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Birthing the Nation: Sex, Science, and the Conception of Eighteenth-Century Britain

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Alysa Levene

Birthing the Nation represents history of medicine at its most inclusive. Born itself from the author's doctoral work on the history of midwifery, this book is an insightful and hard-hitting examination of how men-midwives and questions of reproduction more generally intersected with national identities and scientific knowledge. In taking such a broad view of the impact of what might otherwise be quite a narrow (though significant) medical development, Cody pushes obstetrical practice to the forefront of many of the most vital of eighteenth-century debates.

Cody starts her book with a boldly written introduction, which sets out clearly her aims and ideas. She begins on a theme which is developed throughout the book: the way in which images of reproduction were used by satirical artists to shed light on wider concerns. As she says in her preface, her theme 'unexpectedly came to illuminate how the British conceived of themselves and others as individuals and as members of groups' (p. viii). Images of pregnant kings, male midwives delivering nations, monstrous births, and neglectful mothers all support her theme, by demonstrating how birth and delivery were used to reflect wider processes of inversion, gullibility or novelty. The book is structured both chronologically and by theme. This is effective, since it draws attention to the fact that certain themes are particularly pertinent to certain parts of the long eighteenth century, without splitting the time period up artificially. Early chapters are, therefore,

particularly concerned with the emergence of men-midwives, and how they appropriated biological and experimental approaches to reproduction. Later chapters deal with the threat of revolution in the latter third of the eighteenth century, and with emerging ideas on race and taxonomy. The reader is thus reminded that the politics and personnel of reproduction changed over the period, and also that they intersected with many other significant new themes. At the outset, men are starting to exert their influence over experimentation; by the end, they are largely recognised as experts. The structure of the book also begins with the specific and moves outwards, gaining momentum as it proceeds from new ideas on sperm and generation, to the monarchy, the state, and revolution. The weakest link is chapter 2, which sets out the context to the male intrusion into midwifery. It is perhaps necessary to provide background, but by being mainly descriptive, it lacks the analytical punch and range of themes developed in the other chapters.

Chapter 3, however, picks up the wide-ranging thrust of the introduction, by discussing how suspicion of female midwives might feed in to anxieties about patriarchy and the subversion of the state. Female midwives had a potentially powerful degree of agency over succession, both within the family, and in wider concerns such as inheritance of the crown. Case-studies are used to demonstrate how women might supposedly have perverted their proper function, by murdering newborns, by plotting against the religious status quo, and by subverting the monarchy (the infamous 'Warming Pan Scandal', which cast doubt over the veracity of James II's claim to a male heir). None of these stories is newly discovered, but Cody is skilful in pointing out how much they struck at the heart of patriarchy, and how they were re-invoked at other points of crisis over the long eighteenth century.

In chapters 4 and 5, the focus moves to men, and the ways in which they managed to gain access to the study of obstetrics. Again, this is not a new topic, but Cody introduces several novel themes to her discussion. Especially of note is the part played by the newly founded, male preserve of the Royal Society. In this arena, men were able to disseminate their discoveries on aspects of reproduction which did not touch on female bodies, and establish their skill in theories of generation. This skill was used to promote men as experts on the theory of reproduction, such that they were called upon to judge ambiguous cases such as Mary Toft's, who apparently gave birth to a number of rabbits in the 1720s.

The discussion in these chapters also introduces a theme of gender ambiguity surrounding men who worked in the field, which was to continue throughout the development of male obstetrical practice. Even when male practitioners used traditionally male tools of investigation and experimentation, they were often represented in satirical print and literature as either effeminate, or as sexual predators. In later chapters, Cody shows that men continued to have to demonstrate certain female qualities such as intuition and sympathy, alongside their male skill and empirical knowledge in obstetrical matters. They also continued to be viewed with some mistrust for the access they had to men's wives. Alongside this, however, was a fear that men might still be misled by women's bodies, and that they could be duped by trumped-up evidence. When Mary Toft was shown to be a fraud, several male practitioners' reputations were lost, and others were careful to recast the episode in a light which reflected poorly on female passions and irrationality rather than on male skill.

Having set out how men managed to establish their authority over the science of reproduction and normal birth, and its impact on gender relations, Cody moves up a gear in demonstrating how this was harnessed to wider themes. In chapter 6, she draws attention to the fact that many of the high-profile male midwives in mid-eighteenth-century London were not English-born, and that many were Scottish. This immediately plays into wider questions of national identity and access to medical training, which are developed further in subsequent chapters. Denied access to elite medical practice, Scots sought new ways to gain expertise, and many specialised in obstetrics. Men such as William Smellie and William Hunter, both Scots, were also able to change the way that midwifery was taught, by giving open lectures and practical teaching. Along with countrymen such as Edmund Burke and Adam Smith (who both attended Hunter's lectures), they appealed to a wider sense of identity as Britons rather than Englishmen, and established an expertise which encompassed Edinburgh and Glasgow as well as London, Oxford and Cambridge. The developments pioneered by Smellie and Hunter in teaching and practice also opened up a number of other fields for investigation. These included the origin of life itself, encouraged by the depiction of fetuses as fully human in Hunter's teaching diagrams, and the place of men in the birthing chamber. This was a time of anxiety over gender roles, seen

also in the treatment in the press of Georgiana, Duchess of Devonshire, whom Cody mentions in passing. Here too, gender roles were being cast aside, as they were by men who attended women in childbirth. This anxiety is one of the most persuasive reasons why reproduction and birth appeared so frequently in print and in literature as a metaphor for so many other themes (especially when, as the author reminds us, freedom of expression was not absolute).

One of the most novel chapters of the book is the one which draws parallels between medical developments and those in other areas of science (chapter 8, 'Sex, Science, and Race'). Histories of science and medicine overlap too rarely, but here, a convincing case is made for a common concern with understanding the basis of all things. The chapter is curiously effective, given that it is the one in which medicine is perhaps most tangential, but it illustrates how men used reproductive terms to explain the development of race, language and natural science. These in turn, were harnessed to debates on British national supremacy, much of which was based on reproduction. The (apparently) easier births of African women, for example, were deemed to arise from their larger pelvises, and the smaller heads of their infants; arguments which reinforced the superior mental powers of Britons. It is interesting to note that it was at this time that cranial measurements began to be used to assess male development, while for women, the equivalent was pelvimetry. This gendered approach was to be significant for the development of medical practice and ideas on sexuality and the body throughout the next century.

In the final substantive chapter, Cody turns to the state, and the role that it began to play in reproductive politics towards the end of the century. This chapter is thus tied to changing ideas over population as a resource, fears of poverty, and a desire to enumerate the people and judge the quality of national stock. Just as male expertise had at last been judged necessary in the courtroom to judge on rape and infanticide cases, so government was now felt to be the expert manager of the state of the population. The relationship with Malthus, and also with Darwin, is clear. Male midwifery had ceased to be a shadow of female practice, and had become a whole approach, based on rationality: 'an objective body of knowledge about the invisible world of life, acquired through clinical practice, contemplation, reading, collecting, dissecting, learned conversation and debate.' (p. 277) Men used skills which women did not yet have, based on internal examination and the collection of facts on reproductive anatomy. So too, did the state collect information in censuses and reports such as that carried out in preparation for the New Poor Law, which similarly adopted a regulative and expert framework for the lives of the poor.

Cody ends by reflecting on the path followed by men to reach the state of expert. She particularly dwells on two themes, which are effectively brought out throughout the book. The first is the ambiguous way male control over knowledge about female bodies was used in terms of gender relations. Male expertise was constantly stressed over female superstition and ignorance, and it was invoked also as a justification for a lack of female participation in political rights. At the same time, however, by publicising knowledge about these matters, men altered preceding notions of patriarchy by stressing a larger role for men within the traditionally female realm of the home. The world of reproduction and family life was made public, a development the author sums up in the public grief surrounding the death of Princess Caroline in childbirth in 1817. Never before had such a scenario been either so public, or so mourned.

Birthing the Nation thus succeeds in its aims. It makes a strong case for a common origin of research into obstetrics and into many other aspect of science. It also illustrates how the intrusion of men into midwifery summed up many gender-based anxieties as to control of lineage, sexual propriety, and the status quo, which could be harnessed to wider scenarios of national identity and security. The use of satirical prints and literature is particularly effective, as it demonstrates how widely available these images were. The use of stories of monstrous births such as Mary Toft's, and of national scandals such as the birth of James II's son also shows how such images were disseminated and anchored to certain well-rehearsed narratives.

The book also does justice to the complexity of notions such as gender and knowledge. Male judgements were not infallible even after they had started to claim superior knowledge, as the Mary Toft case illustrates. Even when they started to command respect, men such as Hunter realised that they had to appeal to feminine qualities, and to win over the women they wished to attend. Near the end of the book, Cody shows how

notions of expertise had in fact come something of a full circle, as male medical experts in court cases were accused of being too ambiguous in their evidence. Men might now be the witnesses of choice, but they were open to the same charges that women had been earlier. The way that men represented themselves, and also their ideas on reproduction itself, sometimes highlighted the differences between the sexes, and sometimes the similarities. This was not a clear-cut transition from female midwife to male, but one which was played out on uncertain ground.

It is the ease with which different debates are marshalled, however, which gives this book so much weight. By targeting national identity, the quality of population, the development of scientific understandings and anxieties about gender roles, Cody straddles some of the most significant and distinctive themes of the long eighteenth century. Historians of medicine have only now begun to realise the ways in which medicine played into debates over the strength of the nation in this period, and the way that the assertion of expertise shaped national policies. Men-midwives are not always centre-stage in the discussion, and at times, one might wonder exactly how far they represent wider developments, and how much they simply reflected what was going on in other fields. By adopting this framework, however, Cody teases out a novel interpretation of a well-rehearsed medical development, and presents it in a way which cannot help but have impact on the reader.

The author thanks Dr Levene for her thorough engagement with themes of *Birthing the Nation* and does not wish to comment further.

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