

BODIES AT ODDS: THE MATERNAL BODY AS LIVED EXPERIENCE AND
CULTURAL EXPRESSION IN AMERICA, 1750-1850

Nora Doyle

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Approved By:

Kathleen DuVal

Jacquelyn Dowd Hall

John F. Kasson

Joy S. Kasson

Heather A. Williams

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ABSTRACT

NORA DOYLE: Bodies at Odds: The Maternal Body as Lived Experience and Cultural Expression in America, 1750-1850
(Under the direction of Jacquelyn Dowd Hall)

Between the 1750s and the 1850s American society saw the emergence of a new ideology that defined motherhood as women's primary role. This project shows that central to this vision was an evolving understanding of how women's bodies were supposed to look, act, and feel as mothers. I argue that cultural representations of the maternal body increasingly sought to refine the body—or even make it disappear entirely—in order to project an idealized vision of sentimental motherhood. Over time these cultural representations became invested in assumptions about race and class, defining the ideal mother as white and middle-class. Yet cultural definitions of the ideal mother bore little resemblance to the ways in which women experienced the physical challenges of childbearing and childrearing. I argue that women consistently contested prevailing cultural ideals by perceiving their identity as mothers to be fundamentally defined by the work of their bodies. Moreover, in their emphasis on the physical work of childbearing, women revealed a deep-seated ambivalence toward motherhood that contrasted markedly with predominant cultural ideals. Women's articulations of embodiment pose a challenge to the current periodization of the history of motherhood by showing that women's own perceptions changed relatively little, revealing the history of motherhood in this period to be a story of continuity as well as change over time.

*In loving memory of my grandmother,
Ruth Peterson Doyle (1918-2012)*

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LIST OF ABBREVIATIONS

| | |
|-----|---|
| DU | William R. Perkins Library, Duke University |
| HSP | Historical Society of Pennsylvania |
| LCP | Library Company of Philadelphia |
| MHS | Massachusetts Historical Society |
| SCL | South Caroliniana Library, University of South Carolina |
| SHC | Southern Historical Collection, University of North Carolina, Chapel Hill |
| SL | Arthur and Elizabeth Schlesinger Library, Radcliffe Institute, Harvard University |
| UVA | Albert and Shirley Small Special Collections Library, University of Virginia |

INTRODUCTION

In Search of the Maternal Body

“The woman’s body, with its potential for gestating, bringing forth and nourishing new life, has been through the ages a field of contradictions.”¹

In June 1798, new mother Gertrude Meredith wrote to her husband that she was “better than I have been this summer, but extremely thin notwithstanding. Mama tells me this is owing to my suckling my Child—she is very anxious that I should wean her, but this I cannot think of doing.”² Meredith’s brief update highlighted the toll that childrearing could take on a mother’s health, but also emphasized her dedication to what she saw as her duty to nourish her daughter from her own body. Three years later, an American women’s magazine printed an article on breastfeeding in which the author argued that, by nursing her child, a “woman undergoes a kind of happy metamorphosis, which almost renders her difficult to be known. Her skin becomes fine, soft, and fair; her features are refined into an uncommon degrees of sweetness, under the influence of this new regimen. The too-ardent carnation of her cheeks, tempered by the milky revolution, assumes a milder tint.”³ This glowing portrait of the nursing mother evoked the gulf between the lived experience of women such as Gertrude Meredith and the idealized

¹ Adrienne Rich, *Of Woman Born: Motherhood as Experience and Institution* (New York: W.W. Norton & Company, 1986), 102.

² Gertrude Gouverner Ogden Meredith to William Meredith, June 28, 1798, Folder 1, Box 51, Meredith Family Papers, HSP.

³ “The Advantage of Maternal Nurture,” *The Lady’s Magazine and Musical Repository*, 2 (November 1801): 290. Online. *ProQuest: American Periodicals Series*.

cultural representations of motherhood that increasingly permeated American society. Although these two perspectives exposed the tension between the real and the ideal maternal body, perceptions of the body were integral to each author's understanding of motherhood. In this respect these authors were highly representative of their time, demonstrating that ideas about the body were central to defining motherhood both as a lived identity and a cultural trope in late eighteenth- and early nineteenth-century America.

How do we locate bodies in historical sources? Some texts evoke an explicit corporeal presence, while others leave the body buried beneath layers of language. The private journals of Sarah Logan Fisher, a Philadelphia Quaker who lived from 1751 to 1796, offer an unusually consistent account of the repeated cycles of childbearing that marked most adult women's lives. An intelligent and deeply introspective woman, Fisher wrote regularly between 1776 and 1795, recording news about friends and loved ones, her religious contemplations, the goings on of a busy community, national politics, and the daily activities of her household. In addition to these details of eighteenth-century American life, her diaries contain an extraordinarily consistent narrative of her body and the physical work that she did as a mother. Fisher was pregnant at least eight times (probably more) and bore five children who survived infancy before her life was ended by illness. The rhythms and repetitions of her diaries push her corporeality to the forefront, for she was constantly seeking signs that she was pregnant, managing the pains and unwieldiness that attended pregnancy, thinking ahead with concern about the trials of childbirth, and rejoicing when she had survived another delivery.

The frequent references to childbearing in her diaries indicate that Sarah Logan Fisher was preoccupied with the physical sensations and bodily consequences of childbearing. So consistent was she in dropping clues about her reproductive life that the reader gains an almost visceral awareness of the changing size, shape, and sensations of her body and its impact on her emotional state. “Had a little hope of a certain matter, all Day at Home,” she wrote in January of 1781, expressing her yearning to be pregnant, and two days later noted “my small hopes still continue.”⁴ A week later, her hopes were confirmed by violent morning sickness. She wrote only, “very sick indeed.”⁵ By September, she was fearfully anticipating her confinement, feeling “very poorly, & as if my Hour of pain was not far off.”⁶ Finally, she was delivered of a son and rejoiced that “after a very fine easy Labour, had a good getting up only very sore Nipples, near the end of the 4th Week.”⁷ Although Fisher’s record of childbearing is unusually complete, she was not alone in emphasizing the bodily experiences of motherhood. In 1845, the writer and social activist Caroline Healey Dall recorded her first pregnancy in her diary: “For the first time the conviction presses itself upon me—that I am myself a mother.”⁸ Though she had not yet given birth and raised a child, Dall made the physical fact of pregnancy the defining factor of her new identity as a mother. The centrality of the body was even more keenly felt by enslaved women who were defined by their physical ability to

⁴ Sarah Logan Fisher, January 12, 1781, and January 14, 1781, p. 28-29, Volume 10, Sarah Logan Fisher Diaries, 1776-1795, HSP.

⁵ Sarah Logan Fisher, January 20, 1781, p. 31, Volume 10, Sarah Logan Fisher Diaries, 1776-1795, HSP.

⁶ Sarah Logan Fisher, September 6, 1781, p. 73, Volume 10, Sarah Logan Fisher Diaries, 1776-1795, HSP.

⁷ Sarah Logan Fisher November 11, 1781, p. 79, Volume 10, Sarah Logan Fisher Diaries, 1776-1795, HSP.

⁸ Caroline Healey Dall, *Daughter of Boston: The Extraordinary Diary of a Nineteenth-Century Woman*, Helen R. Deese, ed. (Boston: Beacon Press, 2005), 83.

reproduce rather than their capacity for mothering. One former slave recalled that “slave buyers would come around and jab them in the stomach and look them over and if they thought they would have children fast they brought a good price.”⁹ Thus for some women, the body became central to their experiences as mothers because of their social status. Yet whatever their circumstances, American women often revealed the physical contours of their lives as mothers in both subtle and overt ways in their personal narratives and private letters and diaries.

Other representations of the maternal body in the eighteenth and nineteenth centuries were based less in physical experience than in a constellation of beliefs and assumptions about identity and prescribed social roles. As mothers became central figures in nineteenth-century sentimental culture, for instance, stories, essays, poems, and pictures contrived to make their bodies seem ethereal, or even non-existent, in order to project a spiritualized vision of motherhood. The ideal mother needed to transcend the disorder of corporeality in order to express her enduring moral and spiritual influence on family and on society; her physicality was only useful to the extent it could express her “soul’s rich tenderness and depth of feeling.”¹⁰ In these sources, what is most notable about the body is that it cannot be found. Yet this lack, this silence with respect to corporeality, tells us a great deal about the maternal body and how Americans perceived it at this time. The invisibility of the body shows that it was culturally troublesome, particularly in the context of idealized womanhood, and that the cherished identity of the mother needed to be detached from the physicality of childbearing and childrearing. Thus

⁹ Hattie Rogers, *North Carolina Narratives*, Vol. 11, Part 2: 229. Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

¹⁰ Mrs. Norton, “The English Mother,” *Godey’s Ladies’ Book* (September 1831): 182.

the presence or absence of the body can speak eloquently to the conflicting ways in which American women and men understood motherhood both as a real-life physical occupation and as a cultural projection of ideal femininity.

This study begins around 1750, a time when women bore large families and gave birth in their homes with all-female companions consisting of a midwife, friends, and relatives. The study of midwifery, or obstetrics as we now call it, was only just emerging as part of the male medical profession in England and would soon make its way to the American colonies. Over the next century, the medical profession carefully negotiated its involvement in the traditionally female affairs of childbearing as doctors entered the lying-in chambers of American women, though the customs and practices surrounding childbearing continued to mark the birthing chamber as a predominantly female social space. In 1750, the concept of motherhood was not yet imbued with the great social and cultural importance it would gain by the end of the century. Women's main role in society was as a "help meet" to her husband, a role which implied many different functions including that of motherhood.¹¹ At this time prescriptive writers put more emphasis on women's ability to produce offspring than on their efforts as parents; a mother was first and foremost a reproductive body. Many early parenting advice manuals, in fact, were addressed to fathers rather than mothers in the belief that it was the father's role to decide how his children would be raised and educated.¹² The popular

¹¹ For an analysis of women's many roles in colonial America, see for example Laurel Thatcher Ulrich, *Good Wives: Image and Reality in the Lives of Women in Northern New England 1650-1750* (New York: Vintage Books, 1991).

¹² For a history of American fatherhood, see for instance Stephen M. Frank, *Life with Father: Parenthood and Masculinity in the Nineteenth-Century American North* (Baltimore: Johns Hopkins University Press, 1998).

literature of the time similarly put less emphasis on women as mothers than as virtuous virgins, loyal daughters, obedient wives, or victims of seduction.

The late eighteenth century marked a transitional phase in ideas of womanhood in Anglo-American culture as English and American writers articulated a new conception of motherhood women's most important social role. This new vision of motherhood stemmed from Enlightenment ideas that circulated between England, Scotland, France, and America in the eighteenth century as well as from the growing evangelical Protestant impulse in both England and America. Although polar opposites in many ways, both Enlightenment thought and evangelical religion constructed a popular and enduring vision of women's superior virtue and natural tenderness that combined to create the ideal of what Ruth Bloch has called the "moral mother."¹³ New ideas about the perfectibility of mankind led writers such as the French *philosophe* Jean-Jacques Rousseau to reconsider the roles of men and women and highlight how women in particular contributed to social progress as mothers.¹⁴ Enlightenment thinkers extolled women's superior virtue, while religious writers commended women's natural piety; both strains of thought contributed to a growing emphasis on the affective ties of motherhood and on women's ability to transmit virtue and faith to their children.

¹³ Ruth H. Bloch, "Revaluing Motherhood. American Feminine Ideals in Transition: The Rise of the Moral Mother, 1785-1815," in *Gender and Morality in Anglo-American Culture, 1650-1800* (Berkeley: University of California Press, 2003). Bloch describes the transitional process toward defining motherhood as a "longer-term, transnational, and essentially cultural rather than political process" (p. 57).

¹⁴ For a discussion of women's roles according to Enlightenment philosophy see Rosemarie Zagarri, *Revolutionary Backlash: Women and Politics in the Early American Republic* (Philadelphia: University of Pennsylvania Press, 2007), esp. pages 3-4. Henry F. May (*The Enlightenment in America*, New York: Oxford University Press, 1976) suggests that Rousseau was widely read in America in the 1780s and '90s and that his work *Emile* (1762) was particularly influential on new ideas of motherhood. For an analysis and comparison of the respective roles of the Enlightenment and evangelical Christianity in the rise of the Moral Mother, see Ruth H. Bloch, "Rise of the Moral Mother."

The rise of republican ideology during the era of the American Revolution was another critical force in reshaping maternal ideology and practice. The need for order in a society newly bereft of more traditional class-based social distinctions and anxious about the production of a virtuous citizenry made the role of the mother central to the new republic. The “Republican Mother,” as Linda Kerber has called her, would create a virtuous domestic space in which to endow her children with moral sensibility and a sense of civic responsibility; the good mother would produce good citizens and reaffirm the potential of the republican project.¹⁵ The Revolutionary era was also marked by a fertility revolution as American women chose to bear fewer children as part of a new emphasis on rationality and restraint in the new republic.¹⁶ Indeed, Susan Klepp argues that the United States and France, the only two nations to undergo republican revolutions, each saw a marked decline in fertility rates beginning in the second half of the eighteenth century, while mothers in other western European nations, including England, continued to bear very large families until the late nineteenth century.¹⁷ Although women were bearing fewer children than their foremothers had, the importance of motherhood as a social role and cultural symbol grew. By the early nineteenth century, then, American culture had come to equate ideal womanhood and motherhood. As Nancy Theriot writes, “Motherhood became the most important symbol of true womanhood, the major cultural

¹⁵ Linda K. Kerber, *Women of the Republic: Intellect and Ideology in Revolutionary America* (Chapel Hill: University of North Carolina, 1980). See also Mary Beth Norton, *Liberty's Daughters: The Revolutionary Experience of American Women, 1750-1800* (Boston: Little, Brown, 1980).

¹⁶ For an analysis of the fertility transition in the eighteenth century, see Susan E. Klepp, *Revolutionary Conceptions: Women, Fertility, and Family Limitation in America, 1760-1820* (Chapel Hill: University of North Carolina Press, 2009).

¹⁷ Susan E. Klepp writes that birthrates in Western Europe did not begin to decline until the 1870s (over a century later than in America). See Klepp, *Revolutionary Conceptions*, 5.

metaphor for femininity.”¹⁸ To be a woman was to be a mother, and to be a good mother was to fulfill the highest and most sacred purpose of womanhood.

Thus by the 1850s the social and cultural landscape had changed considerably. The average family had shrunk in size to just over five children and white middle-class women were spending less of their adult lives pregnant, recovering from childbirth, and breastfeeding.¹⁹ Still, their daily lives were profoundly affected by childbearing and their embodied experiences shaped their perception of motherhood. Indeed, the physical experiences of childbearing and childrearing changed very slowly; it was not until the second half of the nineteenth century, for instance, that anesthetized childbirth became an option for some women, while it was even longer before the development of infant formula offered women a means of successfully raising their children without breastfeeding and without hiring a wet nurse. But while the physical aspects of motherhood were slow to change, the ideological weight of motherhood had shifted to what Theriot calls “imperial motherhood.”²⁰ As mothers, women not only bore children but were expected to be child-centered, nourishing their children’s bodies and guiding their moral and intellectual education. In return, women were seen to gain an important degree of power and influence in society as mothers. As one nineteenth-century author earnestly explained, “the *mistress* and *mother* of a family occupies one of the most important stations in the community.”²¹ Moreover, the ideology of “imperial

¹⁸ Nancy M. Theriot, *Mothers and Daughters in Nineteenth-century America: The Biosocial Construction of Femininity* (Lexington: University Press of Kentucky, 1996), 18.

¹⁹ John D’Emilio and Estelle B. Freedman, *Intimate Matters: A History of Sexuality in America*, 2nd ed. (Chicago: University of Chicago Press, 1997), 58.

²⁰ For a full explanation of this ideology, see Theriot, *Mothers and Daughters*, esp. 18.

²¹ Ann Martin Taylor, *Practical Hints to Young Females* (Boston, 1816), 2-3.

motherhood” assumed that the physical and affective pleasures of motherhood were essential to female happiness. Thus by the antebellum period femininity was equated with motherhood, and the figure of the mother had become one of the most important symbols of order and virtue in American society. I refer to this vision of women’s role as the ideal of *sentimental motherhood*, a term which encompasses the ideals of the “moral mother,” “republican motherhood,” and “imperial motherhood” while making reference to the importance of sentimentalism, which became the dominant mode of expression in the late eighteenth century and first half of the nineteenth century.

My research shows that changing representations of the body were integral to this ideological shift from women as reproducers to women as sentimental mothers. Women’s bodies had historically been perceived as more disorderly and disgusting than men’s, for processes such as menstruation, childbirth, and lactation made their bodies seem leaky, unpredictable, and dangerous.²² But the ideal mother whose (non-corporeal) presence signified order and virtue came to occupy an important place in the cultural imagination. The idealization of the mother in domestic culture involved reshaping ideas about motherhood and in particular refining the maternal body into an orderly, virtuous, and ethereal non-body. Such representations demonstrated that women could be uniquely moral and spiritual if only attention could be drawn away from their troublesome bodies, for as one scholar has explained, “That which is not-body is the highest, the best, the noblest, the closest to God; that which is body is the albatross, the heavy drag on self-realization.”²³ Although visions of the non-corporeal mother conflicted dramatically with

²² For more on perceptions of women’s bodies see Kathleen M. Brown, *Foul Bodies: Cleanliness in Early America* (New Haven: Yale University Press, 2009), 191.

women's own experiences of maternity, it was an appealing fantasy that granted women, rhetorically at least, an extraordinary degree of influence by making them the guiding lights of American society.

At the heart of this study is an investigation of the role the body played in defining motherhood in America from the second half of the eighteenth century through the first half of the nineteenth century. Putting the body at the center of this work reveals that perceptions and representations of corporeality were crucial to defining motherhood, both as an identity for real-life mothers and as a cultural symbol within American society. This is a cultural study of motherhood because it emphasizes an evolving history of representation, yet it is also deeply invested in the social experience of the body and the tensions between ideology and lived experience. It is imperative to consider culture and lived experience in tandem, for as one historian has argued, "The biological capacity to bear children itself was not what determined the course of women's lives, but rather the cultural use to which that capacity was put during most of American history."²⁴

Examining women's private discussions of childbearing and childrearing as well as widespread public representations of motherhood and childbearing, I ask how ideas about the body helped construct motherhood as both an individual and a cultural identity. How did the work of the body influence how women saw their role as mothers? How did cultural prescriptions define the mother, particularly with respect to concepts of race and class identity? These questions bring together two sets of concerns. On the one hand, I explore women's own descriptions of their bodies during repeated cycles of childbearing.

²³ Susan Bordo, *Unbearable Weight: Feminism, Western Culture, and the Body* (Berkeley: University of California Press, 1993), 5.

²⁴ Judith Walzer Leavitt, *Brought to Bed: Childbearing in America, 1750-1950* (New York: Oxford University Press, 1986), 35.

On the other hand, I explore cultural prescriptions of how the maternal body was supposed to look, act, and feel. This work is structured around the tension between the experiences of real mothers and the visions of an ideal maternal body that were developed in the realm of print and visual culture.

In exploring this tension, I argue that the lived experience of the physical body constituted the foundation of women's maternal identities, while at the same time prompting feelings of ambivalence toward motherhood. In contrast, over the course of the late eighteenth and early nineteenth centuries, cultural representations of the maternal body increasingly sought to refine and transform the body, or even make it disappear entirely, in order to project an ideal vision of sentimental motherhood as a "higher place in the scale of being."²⁵ In other words, individual identity was founded on embodied experience in all its messiness and complexity, while motherhood as a cultural institution was predicated on the evasion of the body and the privileging of abstract moral and emotional qualities. Moreover, I show that although the idealization of motherhood led to the evolution of an ostensibly universal and transcendent feminine figure in the "Good Mother," motherhood simultaneously—paradoxically—came to be redefined as a specifically white and middle-class identity. Indeed, the category of "Mother" seemed to be universal and monolithic in its conception, but not all childbearing women were perceived to be equally non-corporeal, spiritual, and sentimental. Assumptions about race, class, and different modes of embodiment determined which bodies could be elided and which would be emphasized. Lower-class women, women of color, and enslaved women were uniquely identified by the robustness of their bodies and provided an apt foil for idealized visions of the white sentimental mother. The enslaved mother, defined by

²⁵ Lydia H. Sigourney, *Letters to Mothers*, 2nd ed. (New York: Harper & Brothers, 1839), 9.

her ability to produce and reproduce and routinely subjected to violence and sexual exploitation, epitomized the ways in which some women's bodies were precluded from fulfilling the ideals of sentimental motherhood. The corporeal differences drawn between idealized and marginalized mothers suggest that the visibility of the maternal body in American culture signified disorder and unease, whereas bodies that were properly transformed conveyed a sense of order and morality.

This is a national study in which I have endeavored to capture a broad range of ways in which Americans living between the 1750s and the 1850s thought about the maternal body. The eighteenth-century published works I examine represent the transnational dimension of the project, as they were either imported directly from England or reprinted from English texts in one of the urban centers along the eastern seaboard, especially in cities such as Boston, New York, and Philadelphia, before being conveyed to more far-flung locations. Published texts by American authors emerged in greater numbers by the beginning of the nineteenth century and were likewise generally published in cities along the east coast, particularly in New England and the middle-Atlantic region. In spite of the northeastern bias in the origin of American print sources, they were widely consumed and thus represent a coherent and influential national culture.²⁶ Similarly, manuscript sources such as letters and diaries from the pens of American women writing up through the 1850s are much easier to come by in the populous areas of the eastern seaboard. The majority of the women I write about came from areas such as Massachusetts, Pennsylvania, Virginia, and the Carolinas, although

²⁶ On the question of regionalism, V. Lynn Kennedy has shown in her study of motherhood that southerners were exposed to the same kinds of literature and gender ideology as those in the north and articulated the same kinds of values with respect to motherhood. See V. Lynn Kennedy, *Born Southern: Childbirth, Motherhood, and Social Networks in the Old South* (Baltimore: Johns Hopkins University Press, 2010).

some of the women whose words I use lived as far north as Maine, as far south as Louisiana, and as far west as Oregon.

The sources I have examined show that region was a less important factor in differentiating women's lives as mothers than other factors such as class, race, age, and the particularities of their childbearing experiences. It goes almost without saying that the women who left abundant records behind were usually educated, white, and middle-class or elite. Yet I have also been able to draw on sources such as medical records, plantation records, published slave narratives, and slave interviews that shed light—if often in a frustratingly indirect manner—on the experiences of mothers who were marginalized by poverty, lack of education, or enslavement. This history of the maternal body, then, holds in tension the lofty idealization of the mother in American culture and the less-than-ideal circumstances that shaped women's lives.

Each chapter of this dissertation considers a different type of representation of the maternal body. Karen Harvey writes that “The idea that change in one genre led to simultaneous and comparable changes in others relies on a model of culture as monolithic; it obscures the ways in which different types of material might have drawn on a range of resources and performed different functions.”²⁷ I have endeavored to take her warning to heart by allowing each chapter to tell its own story about the maternal body, even when these different personal and cultural narratives do not follow the same trajectory. American culture at this time was indeed far from monolithic, though it is possible to identify many significant trends, as well as many significant contradictions and inconsistencies. Ranging from the personal experience-based representations of real

²⁷ Karen Harvey, *Reading Sex in the Eighteenth Century: Bodies and Gender in English Erotic Culture* (Cambridge: Cambridge University Press, 2004), 8.

mothers to the imaginings of popular literature, each chapter alone provides only a small glimpse of the varied perceptions of the maternal body that coexisted in American society over the course of a century, but together they recreate the complex and often contradictory culture within which women experienced motherhood.

Making the self-perceptions of real mothers the basis of comparison for other types of corporeal representations, I begin in *Chapter One* by examining references to fertility, pregnancy, and childbirth left by and about American mothers in letters, diaries, slave narratives and interviews, and medical records. These sources reveal that women's understanding of motherhood was fundamentally defined by the bodily experiences of childbearing. In the sparse records available, the words and actions of enslaved women signal that the physical work of childbearing was central to their oppression and that they readily understood that slaveholders explicitly defined them in physical terms. Although middle-class and elite white women, who left ample records of their lives, tended to rely on genteel phrases that elided the messiness of corporeality, they also conveyed time and again the extent to which their lives were defined by the physicality of childbearing, and their adherence to genteel conventions repeatedly broke down when they sought to describe particularly painful or traumatic physical experiences. Their reliance on conventionally oblique language conveys their hesitancy to fully reveal the body, yet in the end the exigencies of corporeality always broke through, indicating a practical acceptance of the body. Examining the strategies women used to recount their childbearing experiences reveals striking continuity over the course of a century, irrespective of ongoing changes in cultural representations of motherhood.

Looking at childbearing from a very different angle, *Chapter Two* examines visual and written representations of the maternal body in obstetrical texts to show that, beginning as early as the mid-eighteenth century, medical writers began to shift their focus away from the mother as an active corporeal figure and toward the uterus as the primary agent in reproduction and childbirth. By the early nineteenth century, medical authors disguised the patient in their texts and allowed the womb and surrounding parts to speak and act in place of the woman as a means of desexualizing their encounter with the female body and legitimizing male participation in the field of midwifery. The dissociation of the mother from her body and the scientific focus on the uterus also helped to preserve a fantasy of the mother as a refined, moral, and spiritual figure, while differentiating the bodies of poor women and women of color in such a way as to make them vulnerable to medical experimentation.

The fantasy of the ideal mother that was implicit in these medical texts came through clearly in the medical and prescriptive literature intended for the education of mothers. *Chapter Three* explores how debates about the importance of maternal breastfeeding underwent an important rhetorical shift beginning in the late eighteenth century. Prescriptive authors moved from a focus on women's divine duty and the practical benefits of nursing for infant and maternal health to a new sentimental rhetoric that emphasized maternal pleasure as the primary argument in favor of breastfeeding. The rhetoric of pleasure accentuated the beauty and erotic appeal of the maternal body, its significance as a source of emotional and physical pleasure, and its importance as the nexus of familial affection. Rather than seeking to make the mother disappear entirely, these texts transformed and idealized this particular facet of women's corporeality and

dictated how women's bodies should feel as they experienced motherhood. The idealized maternal breast came to stand in as a metonym for sentimental motherhood.

Women's discussions of breastfeeding both borrowed from and rejected the ideals set out in prescriptive literature, suggesting that cultural trends were only relevant to women when they reflected their own experiences or when they sustained women's perceptions of themselves and of others. *Chapter Four* uses women's letters and diaries to show that frequent discomfort tempered the pleasure they derived from nursing their children, resulting in ambivalence toward the physical act. In spite of their ambivalence, women agreed with prescriptive authors that breastfeeding was practically and symbolically crucial to the identity of the ideal mother. Because the act of breastfeeding was so important to the work of mothering and to the idealization of motherhood, by the beginning of the nineteenth century it became a central issue around which the very definition of the mother became fractured. Enslaved women were frequently deprived of the right to nourish their own children and defined as (re)productive bodies rather than as mothers. Middle-class and elite white women's attitudes toward their hired wet nurses furthermore demonstrate that the issue of breastfeeding exposed widening race and class-based fissures in the definition of "Mother." True mothers came to be defined as white and middle-class, while non-white and poor mothers came to be seen merely as reproductive bodies.

Epitomizing the contrast between women's perceptions of embodiment and dominant cultural attitudes toward the maternal body, *Chapter Five* examines representations of the mother in the popular sentimental poetry that was widely produced and voraciously consumed by Americans in the first half of the nineteenth century. By

the 1830s and continuing through the 1860s, sentimental poems about motherhood were remarkable for their consistent and nearly perfect disembodiment of the mother. Freeing her from the constraints of materiality, sentimental writers portrayed the mother as a spirit, a smile, a memory, a voice, an essence of everlasting and infinite love and piety. The figure of the mother was also central to antislavery literature and propaganda. But although antislavery poems used sentimental rhetoric to create a common bond between mothers, enslaved and white, they did not invoke the fantasy of the spiritual mother in their representations of enslaved mothers. Unlike the implicitly white mother in the sentimental poetry of popular middle-class culture, the slave mother was bound to her corporeality by the physical torments of slavery. The ostensible inclusiveness of sentimental rhetoric notwithstanding, the contrast between poems about idealized white motherhood and antislavery poems exposed and perpetuated a culturally entrenched race-based division between (white) spiritual mothers and (black) mothers who were ensnared by earthly and corporeal realities.

In exploring the tensions between women's experiences as mothers and cultural representations of motherhood, the issue of historical continuity looms large. While medical, prescriptive, and popular literary representations of the mother revealed an uneven but definite change over time toward a clearly defined sentimental maternal ideal, women's personal representations of the maternal body were defined by continuity. The continuity in women's representations may be surprising, even dismaying, to the historian whose job it typically is to identify and explain change over time.²⁸ Yet thinking

²⁸ Recently some scholars have begun to consider the significance of continuity, particularly in the lives of women. See for instance Judith M. Bennett's analysis of what she terms "patriarchal equilibrium" in *History Matters: Patriarchy and the Challenge of Feminism* (Philadelphia: University of Pennsylvania Press, 2006). See also Anya Jabour's argument in *Scarlett's Sisters: Young Women in the Old South*

about the practical realities that defined the lives of American mothers in the eighteenth and early nineteenth centuries may alleviate some of our discomfort. As Judith Walzer Leavitt shows in her history of childbirth, the material changes surrounding women's childbearing and childrearing experiences in the eighteenth and nineteenth centuries were gradual and uneven. Although women were beginning to bear fewer children, they still spent much of their adult lives pregnant, recovering from childbirth, and lactating. Leavitt shows that women's perceptions of childbirth and its dangers did not change significantly until the twentieth century when childbirth moved from the home to the hospital.²⁹ Thus it is unrealistic to assume that a nineteenth-century woman's experience of the corporeal work of childbearing and rearing was radically different from that of her mother or even grandmother. Moreover, it would be a mistake to assume that women's personal attitudes must always reflect the changes occurring in public representations of motherhood. Although women participated in the public discourses surrounding motherhood, their writings show that they based their identity and understanding of motherhood first and foremost on their own lived experiences.

The questions that guide this project are based on the belief that the definition of "mother" and related terms such as motherhood, mothering, and maternal, are socially and culturally produced and thus vary according to time, place, and social position. Contrary to the beliefs of eighteenth- and nineteenth-century Americans, there is no such thing as a natural or essential mother, for she is a gendered construction and did not spring from nature fully formed and imbued with virtuous sentiment. Indeed, physiology

(Chapel Hill: University of North Carolina Press, 2007) that the coming-of-age experiences of young white women in the south remained consistent throughout the antebellum era.

²⁹ Leavitt, *Brought to Bed*, 107.

must not be equated with destiny, for as Ludmilla Jordanova explains, “Men and women may be born with different reproductive organs, but societies make femininity and masculinity along with the norms that determine who meets the criteria of womanhood and manhood at any particular time and place and for a specific social group.”³⁰ Thus women are not naturally and inherently defined by their ability to bear children; instead, their maternal role has been cultivated over time. Similarly, although the material body does imply a certain biological constant—after all, the physiological functions of conception, pregnancy, childbirth, and lactation have not changed markedly over time—the body in both its material and purely discursive forms is always defined, regulated, and reinvented by its cultural context. The very same living human body may be burdened with vastly different meanings and be valorized for different attributes depending on its context, while the discursively imagined bodies that appear in written and visual culture always vary according to the beliefs and assumptions of the culture they represent. Different notions of power and social worth, as well as a host of identities based on categories such as gender, sexuality, race, class, nationality, ethnicity, religion, and age, are inscribed on the body. The study of the body is imperative to understanding how identities are perpetually created and reinforced in society. Moreover, we need to understand the ways in which personal agency resides in the body, even as power and coercion act upon it in order to reinforce a particular vision of society.

The body has long been subordinated in the western intellectual tradition to the mind or soul, allegedly superior sites of reason and truth. Plato, for instance, linked concepts such as knowledge, truth, beauty, and love to the soul, while he understood the

³⁰ Ludmilla Jordanova, *Sexual Visions: Images of Gender in Science and Medicine between the Eighteenth and Twentieth Centuries* (Madison: University of Wisconsin Press, 1989), 4.

body as the site of vulgar and dangerous appetites, what one scholar describes as “an *epistemological* deceiver, its unreliable senses and volatile passions continually tricking us into mistaking the transient and illusory for the permanent and the real.”³¹ Plato also drew a clear link between women and the body, arguing that one of the defining characteristics of women was their preoccupation with materiality. To focus on the body and its senses was to behave like a woman.³² To be embodied was to be too tethered to the particularities of one’s time and place, to lack objectivity and autonomy. Rhonda Shaw writes that, “When the activities associated with human reproduction are naturalistically equated with the female body, as they often are, women’s bodies and their bodily functions (e.g. menstruation, pregnancy, maternity, lactation), are seen to have little, if anything, to do with reason, choice, and autonomy.”³³ Kathryn Schwarz shows, moreover, that the association of man with the spirit and woman with the body has been historically corroborated by the production of breast-milk, a function which makes women a physical “vessel in the most literal possible sense.”³⁴ Indeed, the reproductive functions of the female body have often been used to imprison women’s subjectivity and impose on them a particular mode of being, one that is inevitably seen to be inferior and irrevocably bound to corporeality.

³¹ Bordo, *Unbearable Weight*, 3.

³² For an analysis of Plato’s soul/body dichotomy, see Elizabeth V. Spelman, “Woman as Body: Ancient and Contemporary Views,” *Feminist Studies* 8, no. 1 (Spring 1982): 109-131.

³³ Rhonda Shaw, “Performing Breastfeeding: Embodiment, Ethics and the Maternal Subject,” *Feminist Review* 78 (2004): 99-116.

³⁴ Kathryn Schwarz, “Missing the Breast: Desire, Disease, and the Singular Effect of Amazons,” *The Body in Parts: Fantasies of Corporeality in early Modern Europe*, David Hillman and Carla Mazzio, eds. (New York: Routledge, 1997), 147.

Not only have women been viewed by western culture as too embodied, but the female body itself has traditionally been deemed uniquely disruptive. The pre-modern womb was thought to wander and rage like a beast; the early-modern uterus became unmistakably pathological by the end of the eighteenth century, and by the nineteenth century psychological disorders in women were assumed to be symptomatic of gynecological problems. A woman's mind was subordinate to her reproductive organs. Indeed, in the nineteenth century moral and behavioral "failures of femininity" were blamed on the depredations of the ovaries, which in many cases were summarily removed.³⁵ More generally, the female body has been seen as disgusting and pathological because of processes such as menstruation, pregnancy, childbirth, and lactation. With such a long history of relegating women to corporeal deviance, it becomes particularly important for scholars to interrogate the varied ways in which the female body functioned both as a site of individual experience and as a site of layered cultural meanings. The female body could signify both ideal beauty and disease; it could highlight simultaneously the dangers of reproduction and the heartwarming bonds of motherhood. It was multivalent in its meaning, and as such provides a particularly fruitful realm of historical inquiry.

This dissertation joins a diverse body of scholarship on the history of childbearing and motherhood. Since the establishment of women's history as a field in the 1970s, historians have explored the changing significance of motherhood in America from the

³⁵ Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to Freud* (Cambridge, MA: Harvard University Press, 1990), 176. For more on the presumed link between hysteria and gynecological problems, see Nancy M. Theriot, "Women's Voices in Nineteenth-Century Medical Discourse: A Step Toward Deconstructing Science," *Signs* 19, no. 1 (Autumn 1993): 1-31. See also Rachel P. Maines, *The Technology of Orgasm: "Hysteria," the Vibrator, and Women's Sexual Satisfaction* (Baltimore: Johns Hopkins University Press, 1999).

eighteenth to the nineteenth century. Scholars such as Ruth Bloch, Nancy Cott, Carl Degler, and Linda Kerber, among many others, have identified a shift in the ideology of motherhood in the late eighteenth century that set the stage for the cult of domesticity and true womanhood that came to characterize antebellum middle-class society.³⁶ As one scholar explains this transition, “The Rousseauist idea that woman was by nature a giving, loving, self-sacrificing, contingent creature was to form the basis for a new ideology of idealized motherhood, and one that would find currency in Europe and America for much of the next two centuries.”³⁷ These scholars, among others, collectively mark the period from the second half of the eighteenth century to the first half of the nineteenth century as an era in which women’s social roles and their cultural image underwent significant transformations. They do not, however, explore the significance of the body in shaping cultural perceptions of motherhood nor do they illuminate the significance of continuity in women’s lives during this period.

Other scholars have explored the history of childbirth and medical practice as crucial factors in women’s experiences as mothers. Richard and Dorothy Wertz’s classic study of childbirth practices illustrates a gradual transition from midwives to male

³⁶ See Bloch, “The Rise of the Moral Mother”; Nancy F. Cott, *The Bonds of Womanhood: “Woman’s Sphere” in New England, 1780-1835* (New Haven: Yale University Press, 1977); Carl N. Degler, *At Odds: Women and the Family in America from the Revolution to the Present* (New York: Oxford University Press, 1980); Linda K. Kerber, *Women of the Republic: Intellect and Ideology in Revolutionary America* (Chapel Hill: University of North Carolina, 1980). For more on the shift in the ideology and practice of motherhood and for the development of nineteenth-century maternal ideology, see also Janet Lynne Golden, *A Social History of Wet Nursing in American: From Breast to Bottle* (Columbus, OH: Ohio State University Press, 2001); V. Lynn Kennedy, *Born Southern: Childbirth, Motherhood, and Social Networks in the Old South* (Baltimore: Johns Hopkins University Press, 2010); Mary P. Ryan, *Cradle of the Middle Class: The Family in Oneida County, New York, 1790-1865* (Cambridge; New York: Cambridge University Press, 1981); Mary P. Ryan, *The Empire of the Mother: American Writing about Domesticity, 1830-1860* (New York: Copublished by the Institute for Research in History and the Haworth Press, 1982); Catherine M. Scholten, *Childbearing in American Society, 1650-1850* (New York: New York University Press, 1985); Nancy M. Theriot, *Mothers and Daughters in Nineteenth-century America: The Biosocial Construction of Femininity* (Lexington: University Press of Kentucky, 1996).

³⁷ Marilynn Yalom, *A History of the Breast*, (New York: Alfred A. Knopf, 1997), 111.

physicians, while Judith Walzer Leavitt brings women's experiences to the forefront in her analysis of the changing medical and social practices surrounding childbirth.³⁸ More recently, Marie Jenkins Schwartz has explored how enslaved women were used in the development of nineteenth-century obstetrical and gynecological practice.³⁹ These medical histories of childbearing often make the maternal body an implicit aspect of their analysis, particularly when discussing women's experiences of pain or the medical management of pregnant or laboring mothers, but they do not bring the body forward as an explicit category of analysis.

Nancy Theriot is one scholar who does make embodied experience an explicit part of her analysis of motherhood in the nineteenth century, though her work focuses on a slightly later period than this project. Like many scholars of motherhood, her main focus is on charting transitions in feminine ideology, but in order to understand these changes she sets out to explore the impact of white middle-class women's lived experiences on ideas about motherhood. Theriot makes the important argument that these women were "active agents in forming and re-forming feminine identity" and that the changing bodily experiences of childbearing in nineteenth-century America pushed women to reshape feminine ideology from generation to generation.⁴⁰ Yet Theriot does not in the end examine articulations of the body or embodied experiences as such; instead, she explores changes in the medical practices surrounding childbirth that occurred for women who bore children in the early to mid-nineteenth century and their

³⁸ Richard W. Wertz and Dorothy C. Wertz, *Lying-In: A History of Childbirth in America* (1977) (New Haven: Yale University Press, 1989); Leavitt, *Brought to Bed*.

³⁹ Marie Jenkins Schwartz, *Birthing a Slave: Motherhood and Medicine in the Antebellum South* (Cambridge: Harvard University Press, 2006).

⁴⁰ Theriot, *Mothers and Daughters*, 2.

daughters, who came of age in the 1860s. She argues that developments such as anesthetized childbirth, improved techniques for treating gynecological complications, and an increased emphasis on the importance of limiting fertility reshaped feminine ideology into a new script that de-emphasized women's frailty and suffering and brought to light new-found independence. Theriot's work inspires this project by raising the question: what would the history of motherhood look like if we put the body, rather than ideology, at the center of the narrative?

Relying on the important work that has already been accomplished by women's historians, I shift focus to take the body as my central category of analysis, revealing the many views of motherhood that coexisted in American society. Highlighting the body brings into focus the subtle ways in which motherhood came to be defined as a class- and race-specific identity. It also attests to the ways in which an explicit discussion of corporeality can complicate the periodization of women's history by putting continuity and change in tension and adding nuance to well-established narratives of changing ideology and practice. Studying the history of motherhood without an explicit analysis of the body oversimplifies both the experience of maternity and the meaning of motherhood in American society. Without taking corporeality into account, we risk forgetting the challenging physical work that was a part of mothering in the eighteenth and nineteenth centuries in favor of the emotional and intellectual work that our society tends to privilege.

While this project relies on existing scholarship on motherhood, it is particularly inspired by an interdisciplinary collection of works that take the body as their central concern. Since the 1980s, the body has been a subject of growing importance in a number

of fields, from feminist theory to sociology, philosophy, literary studies, and history.⁴¹ Scholars have explored the body as individual and collective, coerced and contestatory, and as a site of inscription and performance. Their works have raised a number of questions about the body as the site of human experience and about the body in society. How does the material body constitute subjectivity and agency and when does the body become the object of discipline and power?⁴² How are sex, gender, and race inscribed on and contested by the body?

The pioneering work of Michel Foucault has provided the foundation for much of the scholarship on the body across disciplines. The ideas he has put forth have inspired and influenced this project. He proposes that power acts on the body and in so doing creates the body as a recognizable signifier of identity and status. The body must therefore be understood as a discursive product; there is no original or natural non-discursive material body.⁴³ I do not wish to deny the existence of an original material body, yet following Foucault and other scholars I do work from the understanding that everything we know about the body is discursively constructed. As Judith Butler writes, “To claim that discourse is formative is not to claim that it originates, causes, or exhaustively composes that which it concedes; rather, it is to claim that there is no

⁴¹ Generally speaking, the discipline of history has come relatively late to the study of the body. For an analysis of the body as methodology in history, see Kathleen Canning, “The Body as Method? Reflections on the Place of the Body in Gender History,” *Gender and History* 11, no. 3 (November 1999): 499-513.

⁴² See for instance an analysis of how society defines “good” and “aberrant” bodies in William M. Etter, *The Good Body: Normalizing Visions in Nineteenth-Century American Literature and Culture, 1836-1867* (Newcastle upon Tyne: Cambridge Scholars Publishing, 2010).

⁴³ See for instance Michel Foucault, *Discipline and Punish: The Birth of the Prison*, 2nd ed., translated by Alan Sheridan (New York: Vintage Books, 1995).

reference to a pure body which is not at the same time a further formation of that body.”⁴⁴

Although many of our experiences in life may be rooted in the pure materiality of the body, we can never know or understand those experiences outside of language. Thus historians can approach the body as a purely discursive construction, as I do in my analyses of the maternal body in medical texts and popular literature, for instance, or as a site of experience, which is also always filtered through language.

The study of the body has been particularly fraught for feminist scholars who struggle against the pernicious tendencies of biological essentialism while simultaneously endeavoring to understand the fullness of women’s experience. There is no doubt that women’s role in society has been historically defined by their biological capacity to bear children, and it is necessary to contest an enduring tendency in our society to define women in terms of their sexual and reproductive bodies. Yet in writing about the women of the past, it is also important to recognize the ways in which the capacities of their bodies truly did shape their daily lives and opportunities. This project responds to Elizabeth Grosz’s challenge to feminist scholars to consider the body in explorations of subjectivity and identity instead of only privileging the mind.⁴⁵ In writing the history of the maternal body, my goal is not to essentialize women as mothers, but to historicize reproduction and motherhood. I show that the meaning of the body and the ways in which it contributed to defining motherhood are contingent on time, social position, experience, and a host of other variables. The body must be seen as “a fleshly field of

⁴⁴ Judith Butler, *Bodies that Matter: On the Discursive Limits of “Sex,”* (New York & London: Routledge, 1993), 10.

⁴⁵ Elizabeth Grosz, *Volatile Bodies: Toward a Corporeal Feminism* (Bloomington: Indiana University Press, 1994), vii.

dreams,” and the purpose of this project is to examine the experiences and fantasies that invested the maternal body with meaning in American society.⁴⁶

The representation of the body is always at least partially about defining social and cultural belonging. One important theme in the existing historical scholarship that offers some explicit analysis of the body is the role that corporeality played in defining the middle class in America. Karen Halttunen, for instance, explores the fears of hypocrisy and the quest for authenticity that characterized antebellum America and reveals the ways in which women and men sought to stylize their bodies and shape their expressions so as to convey perfect sincerity. The regulation of the body and the projection of sincerity came to mark middle-class belonging in a democratic society that was constantly, unnervingly, in flux.⁴⁷ John Kasson’s work on etiquette in nineteenth-century America likewise demonstrates how the restraint of the body, the styling of gestures and expressions, and the meaning attributed to one’s appearance and comportment helped Americans negotiate the urban milieu and identify themselves as part of the genteel middle class.⁴⁸ Kathleen Brown’s more recent history of hygiene in early America makes the body the central focus of analysis and explores the importance of cleanliness and bodily management in the definition of civilization and the hardening of race- and class-based social divisions. Importantly, she puts women at the center of her

⁴⁶ Carole E. Henderson, “Introduction: Bordering on the Black Body: Text and Subtext in America’s Literature and Culture,” in *America and the Black Body: Identity Politics in Print and Visual Culture*, Carole E. Henderson, ed. (Madison, NJ: Fairleigh Dickinson University Press, 2009), 14.

⁴⁷ Karen Halttunen, *Confidence Men and Painted Women: A Study of Middle-Class Culture in America, 1830-1870* (New Haven: Yale University Press, 1982).

⁴⁸ John F. Kasson, *Rudeness and Civility: Manners in Nineteenth-Century Urban America* (New York: Hill and Wang, 1990). For more on the importance of etiquette and bodily restraint see also Richard L. Bushman, *The Refinement of America: Persons, Houses, Cities* (New York: Vintage Books, 1993), esp. chapter three.

story, for they were largely responsible for the work and education that was necessary to producing clean and proper bodies.⁴⁹

In addition to the question of class identity, other historians have focused on the role of the body in defining racial difference and identity and how that came to structure American society. Jennifer Morgan, for instance, examines European perceptions of African and Native American women's bodies and how their perceived failure to embody European notions of femininity helped to create and sustain racial ideology.⁵⁰ Lars Schroeder applies an explicitly foucauldian framework to the antebellum south and shows that nineteenth-century white middle-class and elite women and men were ideologically and textually constructed as disembodied, or "no-bodies." Enslaved women and men, on the other hand, were exclusively associated with the body rather than the soul or the intellect.⁵¹ This racial distinction between the embodied and the disembodied contributed, in Schroeder's argument, to the coexistence of pre-modern body-focused methods of discipline for black individuals and modern forms of discipline for white Americans that focused on disciplining the mind and soul. Dorothy Roberts's history of nineteenth- and twentieth-century efforts to control black women's reproduction likewise highlights the ways in which black bodies have been historically more visible and more subject to control than white bodies.⁵²

⁴⁹ Brown, *Foul Bodies*.

⁵⁰ Jennifer L. Morgan, "'Some Could Suckle Over Their Shoulder': Male Travelers, Female Bodies, and the Gendering of Racial Ideology, 1500-1770," *The William and Mary Quarterly* 54, no. 1 (January 1997): 167-192.

⁵¹ Lars Schroeder, *Slave to the Body: Black Bodies, White No-Bodies and the Regulative Dualism of Body-Politics in the Old South* (Frankfurt: Peter Lang, 2003).

⁵² Dorothy E. Roberts, *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty* (New York: Pantheon Books, 1997).

Although scholars such as Schroeder and Roberts make invaluable contributions to our understanding of the body in history, the general tendency in history to focus on non-white bodies risks reinforcing the historical disembodiment of whiteness. Nineteenth-century Americans saw white women and men as less defined by corporeality than lower class Americans or women and men of color, and I have no desire to let this assumption stand. One of my goals, then, is to recognize and examine the embodiment of white mothers, alongside women of color, and to expose the cultural machinations that sought to perfect the white mother by disguising her body and elevating her spirit, while relegating other mothers to the imagined baseness of physicality.

Placed in the context of other scholarship, the maternal body represents one case study in the history of the body more generally. When combined with the work of scholars such as Kathleen Brown, Karen Halttunen, John Kasson, and Lars Schroeder, I hope that this history of the maternal body will provide one part of a more complete history of the body in early and antebellum America. Thus far scholarship shows that beginning in the late eighteenth century and continuing at least through the first half of the nineteenth century, Americans became increasingly preoccupied with embodiment. This preoccupation did not lead them to accept or embrace the body; rather, cultural representations increasingly sought to restrain and, in the case of maternal bodies, even render the body invisible. Much of this bodily restraint occurred in the service of establishing or solidifying race and class divisions. Bodily restraint became the hallmark of the white middle class. The idealization of motherhood as a moral, spiritual, and intellectual role was predicated on the evasion of the body, although the experiences of real women belied this disembodiment. Disorderly physicality—often symbolized by

unrestrained sexuality or intemperance—came to be associated exclusively with the poor, with immigrants, and with non-white Americans. But there is still much work to be done before we understand the nuances of bodily experience and representation in the past. Were women's and men's bodies restrained in similar ways? Did individuals and groups contest the corporeal restraint promoted by white middle-class culture? What kinds of contradictory or complementary bodily narratives existed? And when did Americans cease to evade the body and begin to embrace it?

The body is both everywhere and nowhere in the historical record. It existed in the lived experiences of the individual, in the encounters between two people or between groups of people, in the articulation of sameness and difference, and in the material traces left by past societies. But the body is not always easy to find, particularly because we most often rely on written evidence from the past, which allows us to forget that the mind that articulated the words on the page was always contained and defined by a body, and the pen that recorded events and ideas was always wielded by a fleshly hand. As historians we tend to bring to life the thoughts and feelings of the women and men of the past, while allowing the flesh to remain dead and forgotten. In order to find the historical body we must look imaginatively at every source that brings the past to life, for inevitably the body is present just below the surface.

CHAPTER ONE

Living and Writing the Body: Childbearing Narratives, 1750-1850

“Bodies have all the explanatory power of minds”¹

Gertrude Meredith explained to her husband in 1797 that “our sweetest bliss & diversion should arise from a dear little Boy and Girl. They would bring us new duties and each of these should cheer Papa’s hours and warm the heart of your Gertrude with every virtue.”² She invoked an emotional and sentimental vision of parenthood, corresponding to the idealization of motherhood that characterized American culture by the end of the eighteenth century and grew into the centerpiece of domestic culture by the antebellum period. The writings of predominantly middle-class and elite mothers such as Meredith demonstrated that motherhood was an emotional, even spiritual, role for most of these women. But Meredith’s sentimental musings on domestic bliss and maternal virtue represented only one facet of motherhood. Women’s writings also demonstrated that the repeated rigors of pregnancy and childbirth made motherhood an unavoidably corporeal experience for all mothers. Although most women seem to have derived satisfaction and happiness from their children, the bodily trials of maternity forced them to approach motherhood with both joy and trepidation. The physical unwieldiness, discomfort, and pain wrought by pregnancy and childbirth brought the body to the

¹ Elizabeth Grosz, *Volatile Bodies: Toward a Corporeal Feminism* (Bloomington: Indiana University Press, 1994), vii.

² Gertrude Gouverner Ogden Meredith to William Meredith, Sunday, February 26, 1797, Folder 1, Box 51, Meredith Family, HSP.

forefront of women's experiences as mothers. Their emphasis on the physicality of reproduction and mothering in their personal writings shows that they saw the corporeal work of childbearing as fundamental to their identity as mothers. As one mother wrote in 1824 of her new maternal identity, "At 6 o'clock on the 7th of January 1824 I was a mother and experienced that delightful transition from suffering, danger, and anxiety to happiness and that intense delight, that unspeakable sentiment which pervades the heart at its first maternal throb."³ Her emotional realization of maternity came through the physical suffering of childbirth, suggesting that women came to identify as mothers first through the work of their bodies.

Although the lives of the American women represented here spanned a century of social, cultural, medical, and demographic changes, the writings left by and about these women attest to remarkable continuity in the importance they placed on the corporeal aspects of motherhood and in the narrative and linguistic conventions with which they represented fertility, pregnancy, and childbirth. One young woman, for whom motherhood was yet a distant possibility, expressed a sense of generational continuity in her understanding of physical suffering in childbirth. She wrote in 1793 of her mother's death: "I can't reflect without pain, that I was the innocent cause of her death. I always thought & think now, that if I am ever married, what she suffer'd for me, I shall for another, believe me in such a case it will comfort me to think I am paying the debt I owe."⁴ In her imagination, the physical suffering and danger of childbirth linked mother and daughter, providing a sense of connection and continuity both in terms of their

³ Elizabeth Sedgwick, quoted in Nancy Schrom Dye and Daniel Blake Smith, "Mother Love and Infant Death, 1750-1920," *Journal of American History* 73, no. 2 (September 1973): 338.

⁴ Maria Magdalen Flagg to Lydia Nightingale, August 17, 1793, Maria Magdalen Flagg Letters, SL.

relationship and in terms of the childbearing experience. Although during this period women were gradually bearing fewer children than their foremothers and some were giving birth under different social and medical conditions, they continued with remarkable consistency to emphasize and articulate the physicality of reproduction in such a way that it linked women across generations and contributed to an ongoing understanding of motherhood as an identity that was rooted in the body.

The experience of the body is uniquely individual and thus provides an elusive target for the generalizations of the historian. The conventions of language, moreover, preclude the full articulation of corporeality such that narrative and experience can never be conflated.⁵ But although women's writings can never tell us exactly how their bodies felt in the midst of pregnancy or in the throes of childbirth, their narratives do reveal consistency in the ways in which women perceived and articulated the corporeal work of childbearing and the ways in which their narratives helped construct a common maternal identity. Women's childbearing narratives, most often left behind by middle-class and elite white women, were always marked by linguistic convention. They used oblique conventional phrases to refer to fertility and pregnancy, imitating a broader cultural impulse to restrain or disguise the indelicacies of the body, and they used predictable narrative patterns and phrasing when they described childbirth. Such widely used and understood conventions helped women convey more than genteel norms would allow them to say explicitly. They were able to highlight the physical experiences of childbearing without seeming too indiscreet. But textual conventions broke down when women wrote of more significant bodily changes in late pregnancy and of particularly

⁵ Elaine Scarry, for instance, has explored in particular the inability of language to express pain. See Elaine Scarry, *The Body in Pain: The Making and Unmaking of the World* (New York: Oxford University Press, 1985).

traumatic births. In these instances, women did not shy away from explicit evocations of physicality; instead, their greater candor revealed moments when they were entirely preoccupied with their bodies and driven to express the inexpressible. Although subject to the constraints of their time, women managed to work flexibly within an acceptable framework of genteel convention in order to communicate their experiences to friends and family, until such times when the exigencies of embodiment led them to push at the tenuous edges of propriety.

A number of scholars of women and the family have described an important shift in ideas about motherhood at the end of the eighteenth century. After the American Revolution in particular, notions of republicanism and civic virtue in the new nation shifted the meaning of motherhood from a focus on childbearing, a physical process, to childrearing, a moral, intellectual, and emotional vocation.⁶ Mothering was no longer merely a practical day-to-day practice for many women, but part of an entire ideology of womanhood fraught with implications for women's citizenship and participation in the new republic. As Nancy Schrom Dye and Daniel Black Smith explain, colonial childrearing was "extensive" in nature—one facet of a complex domestic realm that encompassed extended family members who often participated in the work of

⁶ For scholarship on this shift in the meaning of motherhood, see for example Ruth H. Bloch, "Revaluing Motherhood. American Feminine Ideals in Transition: The Rise of the Moral Mother, 1785-1815," in *Gender and Morality in Anglo-American Culture, 1650-1800* (Berkeley: University of California Press, 2003), 57-77; Nancy F. Cott, *The Bonds of Womanhood: "Woman's Sphere" in New England, 1780-1835* (New Haven: Yale University Press, 1977); Carl N. Degler, *At Odds: Women and the Family in America from the Revolution to the Present* (New York: Oxford University Press, 1980); Janet Lynne Golden, *A Social History of Wet Nursing in American: From Breast to Bottle* (Columbus, OH: Ohio State University Press, 2001), esp. chapter 2; Sylvia D. Hoffert, *Private Matters: American Attitudes toward Childbearing and Infant Nurture in the Urban North, 1800-1860* (Urbana: University of Illinois Press, 1989); Linda K. Kerber, *Women of the Republic: Intellect and Ideology in Revolutionary America* (Chapel Hill: University of North Carolina, 1980), esp. chapter 9; Susan E. Klepp, *Revolutionary Conceptions: Women, Fertility, and Family Limitation in America, 1760-1820* (Chapel Hill: University of North Carolina Press, 2009); Mary P. Ryan, *Cradle of the Middle Class: The Family in Oneida County, New York, 1790-1865* (Cambridge: New York: Cambridge University Press, 1981); Catherine M. Scholten, *Childbearing in American Society, 1650-1850* (New York: New York University Press, 1985).

caretaking—whereas by the early nineteenth century ideas about childrearing indicated a new “focus on the individual mother as the most influential force in shaping and preserving a child's life.”⁷ As one early nineteenth-century female author declared in her treatise for women, “the *mistress* and *mother* of a family occupies one of the most important stations in the community.”⁸ The mother became the central figure of nineteenth-century sentimental culture in which the emotional and spiritual aspects of motherhood superseded the corporeal.⁹ In spite of these ideological and cultural shifts, however, women’s personal records of motherhood repeatedly emphasized the physicality of maternity, showing that women’s articulations of their personal experiences did not always share the same trajectory with developments in the cultural imagination.

The scholarship on women and the family has produced a vivid picture of shifting feminine ideals and a convincing vision of the mother as a central figure in American culture and society, but it has left the complexity of motherhood as both an identity and a practice somewhat overshadowed by ideology.¹⁰ The rich body of scholarship on childbirth has remedied this omission to a certain extent; thanks to scholars such as Judith

⁷ Dye and Smith, “Mother Love and Infant Death,” 330.

⁸ Ann Gilbert Taylor, *Practical Hints to Young Females* (Boston: Wells & Lilly, 1816), 2-3.

⁹ For discussions of motherhood as ideology and practice in the nineteenth century, see also V. Lynn Kennedy, *Born Southern: Childbirth, Motherhood, and Social Networks in the Old South* (Baltimore: Johns Hopkins University Press, 2010); Sally G. McMillen, *Motherhood in the Old South: Pregnancy, Childbirth, and Infant Rearing* (Baton Rouge: Louisiana State University Press, 1990); Mary P. Ryan, *The Empire of the Mother: American Writing about Domesticity, 1830-1860* (New York: Copublished by the Institute for Research in History and the Haworth Press, 1982); Nancy M. Theriot, *Mothers and Daughters in Nineteenth-century America: The Biosocial Construction of Femininity* (Lexington: University Press of Kentucky, 1996).

¹⁰ Katy Simpson Smith is one new scholar who has taken up the challenge to write a history of motherhood as lived experience rather than as ideology. See Katy Simpson Smith, “We Have Raised All of You: Motherhood in the South, 1750-1835,” (Ph.D. Dissertation, University of North Carolina-Chapel Hill, 2011).

Walzer Leavitt, we have a powerful sense of the texture of women's thoughts and emotions as they anticipated, endured, and recalled the pangs of labor.¹¹ Indeed, the proliferation of histories of childbirth and obstetrics has helped scholars understand simultaneously the changing ideology of motherhood and the changing social and medical realities of childbearing. Even medical histories of childbirth, however, have tended to obscure the maternal body as the site of sensation, experience, and narrative. How did (or did) women think about and view their bodies in the context of childbearing? As mothers, did they see themselves as embodied or, like popular evocations of motherhood, as primarily spiritual and moral beings? Focusing on the body as a new category of analysis adds another layer to the historical meaning of motherhood and shifts the discussion from an emphasis on growing sentimentality to a focus on corporeality, continuity, and ambivalence in women's definitions of their own identity as mothers.

In spite of the overwhelming continuity over time in references to childbearing between 1750 and 1850, two factors did create differences in the stories women left behind. First, life experience affected the ways in which women narrated their pregnancies and births. Women who were living through their first pregnancy and delivery (usually in their early twenties, though sometimes younger) were, in a sense, encountering their bodies as adults for the first time. They had not yet learned to understand bodily signs and sought advice, especially from female friends and family, and tended to be more explicit in describing their experiences. Women who had already borne several children, however, recognized the particularities of their bodies and wrote

¹¹ Judith Walzer Leavitt, *Brought to Bed: Childbearing in America, 1750-1950* (New York: Oxford University Press, 1986).

with confidence, but less detail, about the expected or unusual sensations they experienced. Mothers of adult childbearing daughters tended to be the most practical and direct in their approach to discussions of reproduction and they often discouraged frequent or prolonged childbearing for their daughters and other female relatives; they were wise from experience.

The second factor, social position, affected both the experience of childbearing and the kinds of narratives left behind by or about mothers. Working-class and enslaved mothers left few records of their own, so it is difficult to know how they told their own stories of pregnancy and childbirth to friends and family. We know more, however, about the different conditions that might have marked their narratives. Poor and working women were more likely to have recognition of their corporeality forced upon them by the hardships of their daily lives and by the assumptions of white middle-class culture, which assumed that lower-class and non-white women were more embodied than their more privileged counterparts.¹² Poor and enslaved women did not always have access to professional medical assistance (and if they did it was on different terms than more privileged women), nor did they have the leisure to protect their bodies in the tiring weeks before and after delivery. Although medical practitioners and many women insisted on a month's lying-in after delivery, this was certainly not an option for impoverished and enslaved women who lacked both the material comforts of a well-appointed lying-in chamber and the power to make their own choices about what labor they could do while pregnant and after delivery. These material realities surely affected their experiences of childbearing, but we lack a body of written evidence to help us

¹² For a discussion of perceptions of relative embodiment among women and men, and white and black southerners in the nineteenth century see Lars Schroeder, *Slave to the Body: Black Bodies, White No-Bodies and the Regulative Dualism of Body-Politics in the Old South* (Frankfurt: Peter Lang, 2003).

understand whether they would have emphasized corporeality in the same way and used the same conventions of language and narrative that more privileged women displayed in their personal writings.¹³

Thus the sources explored in this chapter consist predominantly of the diaries and correspondence of middle-class and elite women of different ages and from different regions of what is now the United States. Because of the greater population density along the eastern seaboard, most (though not all) of the women in question lived in the southeast, the middle Atlantic, or New England. They peppered their writings with comments about fertility patterns, pregnancy, and childbirth and the similarities among their narratives show that region had little bearing on the way women and those close to them chose to describe these experiences. Although rich in the diversity of individual experience and expression, such sources reflect solely the experiences of educated middle-class and elite white women. These documents do at times refer to non-white and working-class mothers, but such textual moments come across the distance of the third person perspective as well as the perhaps more gaping chasm of social position .

Although we lack the same richness of documentation for underprivileged women, other types of sources provide important, though indirect, depictions of non-white and non-elite women's experiences and attitudes toward childbearing. By the turn of the nineteenth century, especially in urban areas, physicians often delivered poor and immigrant women either at home or in hospitals, and doctors were also called to treat

¹³ For more on the experiences of childbearing, motherhood, and family life among enslaved mothers see for example Sharla M. Fett, *Working Cures: Healing, Health, and Power on Southern Slave Plantations* (Chapel Hill: University of North Carolina Press, 2002); Marie Jenkins Schwartz, *Birthing a Slave: Motherhood and Medicine in the Antebellum South* (Cambridge, MA: Harvard University Press, 2009); Brenda E. Stevenson, *Life in Black and White: Family and Community in the Slave South* (New York: Oxford University Press, 1996); Deborah Gray White, *Ar'n't I a Woman?: Female Slaves in the Plantation South*, Revised Edition (New York: W.W. Norton & Company, 1999).

enslaved women during pregnancies and deliveries. Medical records tended to be terse and narrated the perspective of the male physician rather than his childbearing patients, but they do provide at least a hint of the actions and reactions of these women and the stories they might have told. Slave narratives provide another important glimpse into the lives of marginalized women, although the fact that such narratives were written for publication as antislavery propaganda means that the experiences articulated in these texts were necessarily filtered through a particular ideological lens. The numerous and invaluable interviews with former slaves collected in the 1930s provide another means of locating the stories of historically silenced women, but narratives about reproduction in these sources are sparse and generally displaced by both time and person. Not only was the individual interviewed decades after the events s/he recounted, but the interview subject often gave second-hand information about another individual such as a mother or grandmother. Moreover, the circumstances and format of these interviews preclude the kind of consistent, month after month, year after year, narration of reproductive experience that can often be found in diaries and letters. Thus the stories in these interviews have been filtered through time and a series of voices: the original source, the interview subject, the interviewer, and finally, the historian. Furthermore, these interviews generally reflect only the experiences of individuals enslaved during the last years of slavery and so using information culled from these sources risks conflating earlier and later experiences of childbearing in slavery. But because the continuities over time in references to childbearing have proven more striking than the differences, I use these sources carefully with the desire to bring at least the echoes of these women's voices into my narrative.

Unfortunately for the historian, the richest expressions of embodiment almost certainly occurred physically and orally between women. Women's letters and diaries refer often to their social interactions with their peers, to the times spent together chatting in the lying-in chamber, and to advice sought and received. In 1790 Sarah Logan Fisher of Philadelphia noted in her diary that she "went with Coz' Waln to pay a Lying in visit to Becky Waln several were there, & we had a very agreeable afternoon."¹⁴ Four days later she spent another "agreeable" afternoon in the lying-in chamber of another friend. We can only imagine the kinds of stories those women might have shared. For those who could afford it, the traditional lying-in month provided occasions for women to chat, commiserate, comfort, and communicate their experiences to one another. But other women, too, certainly found the time and place to share their wisdom and experience, their remedies and medical knowledge, and stories about their own bodies with one another. Unfortunately, we can never be privy to the conversations between female relatives and friends or between women and their midwives and physicians. We can never see the gestures they made in describing their experiences, nor can we know the intimacy of women who used their bodies to comfort and support friends through their reproductive trials. These aspects of the corporeal experiences of motherhood remain a mystery.

One of the defining factors in women's childbearing experiences was simply how often and how many times they became pregnant and gave birth. Peaking around 1760, fertility rates in British America began a steady decline in the last decades of the eighteenth century, nearly a century earlier than all western European nations, with the

¹⁴ Sarah Logan Fisher Diary, March 25, 1790, p. 22, volume 18, Sarah Logan Fisher Diaries, HSP.

exception of France. In 1800, white married couples had an average of just over seven children; in 1825 this had dropped to just under six children, and by 1850 white couples had an average of 5.42 children. Susan Klepp locates this downward trend within a broader revolutionary-era emphasis on reason and restraint, which led white American women to engage in careful family planning. She argues that mothers themselves led the fertility revolution, consciously seeking to space and limit their childbearing, often with the cooperation of their husbands. Unlike free women, however, enslaved women experienced an increase in fertility over this period, due to the coercive pronatalist measures that slaveholders found necessary to sustain the domestic slave trade in the nineteenth-century south. Not until after emancipation did birthrates among African American women begin to decline.¹⁵

In spite of these changes in rates of fertility over the course of a century, middle-class and elite women's personal writings from this period remained remarkably consistent in their discussions of rates of fertility. First and foremost, women presented fertility as a form of accounting, a record of the number of children born to one woman, but more importantly, a record of her physical labors as a mother. Women saw frequent childbearing as alternately desirable and dreadful—women who bore unusually large numbers of children were regarded with both wonder and pity. Whatever their attitude toward childbearing, however, women's references to fertility were testimony to their

¹⁵ For birthrate statistics see John D'Emilio and Estelle B. Freedman, *Intimate Matters: A History of Sexuality in America*, 2nd ed. (Chicago: University of Chicago Press, 1997), 58. See also Susan E. Klepp, who shows that birthrates among white Americans differed somewhat by region. They declined most rapidly in New England, followed by the Mid-Atlantic and then the South. Fertility rates remained higher on the frontier where women had less access to information provided by networks of women and to more sophisticated forms of birth control such as syringes and douches. See Klepp, *Revolutionary Conceptions*, esp. 7, 15, 212. For more specific regional analysis of fertility rates see for example Jan Lewis and Kenneth A. Lockridge, "'Sally Has Been Sick': Pregnancy and Family Limitation among Virginia Gentry Women, 1780-1830," *Journal of Social History* 22, no. 1 (Autumn 1988): 5-19.

understanding of motherhood as inescapably physical, even dangerously so. Some women subtly criticized their friends and family for having many children, implying that couples ought to exert more control over childbearing. The lack of such control could be seen to indicate personal or moral failings, or simply a carelessness that was dangerous to women's safety. In her work on antebellum southern mothers, for instance, V. Lynn Kennedy argues that elite whites "associated poorer women with an excessive fecundity. Although southern ideals of womanhood promoted high birth rates, they contrarily condemned poor whites for producing *too many* children. Social commentators linked the latter's reproduction to licentiousness, loss of control, and an inability to provide properly for offspring."¹⁶ Kennedy's analysis shows that women's perceptions of fertility rates were often contradictory and depended on her particular circumstances and her social position.

At different times in their lives and for many different reasons, women sometimes hoped to bear children and at other times sought to avoid pregnancy. Although married women and enslaved women in particular lacked the legal right to refuse sexual intercourse, they could limit their fertility in other ways by making use of herbs, vaginal douches, clandestine abortions, prolonged breastfeeding, and strategic absences from home.¹⁷ Sharla Fett has noted that plants such as cotton root, tansy, rue, and pennyroyal were thought to terminate pregnancies and were readily available to enslaved women, so much so that advice manuals for slaveholders warned about the use of such remedies.¹⁸

¹⁶ Kennedy, *Born Southern*, 25-26.

¹⁷ See for example Jan Lewis and Kenneth A. Lockridge's analysis of efforts on the part of elite women in Virginia to limit their fertility. In calculating the intervals between children, they identify breastfeeding as a successful method that most likely women to exert some control over their childbearing. Lewis and Lockridge, "Sally has been Sick," 10.

Limiting fertility wasn't the only goal, however. Indeed, by the nineteenth century some women could undergo intrusive medical procedures such as bleeding, purging, puking, and blistering that were meant to restore fertility.¹⁹ Thus some women eagerly sought to bear children and expressed pride in the number they bore; others desired to limit their pregnancies as much as possible and expressed pity for friends and relatives who bore what they deemed to be too many children.

Many women wrote more directly about rates of fertility than about their experiences with pregnancy and childbirth; the number of children borne by a woman could be mentioned in writing with some degree of delicacy because it could be expressed as merely a form of accounting. Susan Klepp has argued that the practice of numeracy became prevalent in the Revolutionary era as American women rationalized childbearing through numbers. When Elizabeth Drinker, a member of the Philadelphia Quaker community, wrote of an acquaintance who “expects some time this summer to lay in with her seventh child,” she put the emphasis on the number of children rather than on the woman's survival of seven births. This child-oriented calculation drew attention away from the work of the mother's body, highlighting her ability to reproduce but effacing the impact of reproduction on the mother's body and psyche.²⁰ Although this way of recording focused on the child rather than the maternal body, it was a form of accounting that nevertheless always referred back to the body. Seven children meant seven

¹⁸ Fett, *Working Cures*, 65.

¹⁹ Schwartz, *Birthing a Slave*, 70. For more on infertility see Margaret Marsh and Wanda Ronner, *The Empty Cradle: Infertility in America from Colonial Times to the Present* (Baltimore: Johns Hopkins University Press, 1996).

²⁰ Susan E. Klepp uses the diaries of Elizabeth Drinker to demonstrate a shift to numeracy in the late 1770s. Klepp, *Revolutionary Conceptions*, 115-117. Elizabeth Sandwith Drinker, June 17, 1794, *The Diary of Elizabeth Drinker: The Life Cycle of an Eighteenth-Century Woman*, Elaine Forman Crane, ed. (3 vols., Boston: Northeastern University Press, 1994), 1: 566.

pregnancies and seven deliveries (or perhaps fewer in the case of twins and more in the case of miscarriages). For some women, the rigors of their reproductive lives were legible on the body itself. The celebrated British actress and anti-slavery writer Frances Kemble recounted with shock her interaction with an enslaved woman on her husband's Georgian plantation whose body was ravaged by childbearing:

She was the mother of a very large family, and complained to me that what with childbearing and hard field labor, her back was almost broken in two. With an almost savage vehemence of gesticulation, she suddenly tore up her scanty clothing, and exhibited a spectacle with which I was inconceivably shocked and sickened.²¹

Kemble was appalled by the gruesome history of repeated childbearing that was revealed by the sudden act of exposure. The unexpected unveiling of the body itself made a mockery of genteel restraint and propriety, and although Kemble herself did not go so far as to describe the shocking spectacle for her readers, it is significant that she allowed the woman's body *almost* to speak for itself in her narrative.

In addition to this encounter with an enslaved woman, Kemble was also the recipient of a host of petitions from enslaved mothers who recounted their horrific reproductive histories and begged for lighter workloads and for more time to rest after giving birth. Kemble recorded their histories with poignant directness—indeed, their stories were marked by a simple recitation of numbers—numbers of children, numbers of miscarriages, numbers of deaths:

Nanny has had three children; two of them are dead. She came to implore that the rule of sending them into the field three weeks after their confinement might be altered . . . *Sarah*, Stephen's wife—this woman's case and history were alike deplorable. She had had four miscarriages, had brought seven children into the world, five of whom were dead, and was again with child. She complained of dreadful pains in the back, and an internal tumor which swells with the exertion of

²¹ Frances Anne Kemble, *Journal of a Residence on a Georgian Plantation in 1838-1839* (Savannah: Library of Georgia, 1992), 9.

working in the fields . . . *Sukey*, Bush's wife, only came to pay her respects. She had had four miscarriages; had brought eleven children into the world, five of whom are dead.²²

These women's extreme rates of childbearing—one woman on Kemble's list had borne sixteen children and endured four miscarriages—and the chronic problems that resulted forced Kemble to understand high rates of fertility in terms of the chronic ailments the enslaved women brought to her attention. These women's bodies indeed presented the evidence of a long history of difficult childbearing and forced labor, and their physical experiences flew in the face of the sentimental assurances that white culture wrapped around the physical realities of motherhood.²³

Women who bore many children often suffered an accumulation of problems which could become debilitating. Indeed, all childbearing women, regardless of social position, risked complications such as uterine rupture, perineal tears, chronic incontinence, or abdominal and back pain. Plantation records, for instance, show that many enslaved women suffered from uterine prolapse, a condition in which the ligaments and muscles holding the uterus into place weaken and allow the uterus to slip into the vaginal area, mostly likely caused in the case of enslaved women by a combination of debilitating work and frequent childbearing. The slave records of a slaveholding family in South Carolina, for instance, listed by name all their slaves and included a column for "remarks" about each individual, though few remarks were made. One of the more common remarks, however, was the phrase "falling of the womb" (uterine prolapse),

²² Kemble, *Journal*, 103-105.

²³ It should be noted that such high fertility rates were not necessarily universal among enslaved women. Richard Follett's analysis of birthrates on Louisiana sugar plantations, for instance, demonstrates that different cycles of labor over the course of a year (as well as other factors such as nutrition, climate, and disease) could have a profound impact on enslaved women's ability to conceive and/or carry a child to term. See Richard Follett, "Heat, Sex, and Sugar: Pregnancy and Childbearing in the Slave Quarters," *Journal of Family History* 28, no. 4 (October 2003): 510-539.

attesting that reproductive complaints were important enough to warrant the slaveholder's attention.²⁴ But reproductive injuries and chronic ailments were not unique to enslaved and working women. Wealth could not protect women from the difficulties of childbirth, and even the best physicians that money could procure could make dangerous situations worse by their interference. Forceps might be used to deliver a child in cases of maternal exhaustion or a difficult presentation of the fetus, but they could also cause irreparable tears in the vagina, leaving women permanently incontinent. Such bodily marks followed women throughout their lives, daily reminders of the inescapably corporeal dimension of motherhood. Numbers were not merely numbers—they represented a history of the individual body.

One part of this bodily history was sexual intercourse, the necessary precursor to motherhood. But although women acknowledged in varied ways the corporeal work of motherhood in their letters and diaries, they were uniformly silent on the subject of sex. Sex was indeed not a proper topic—in the eighteenth century female sexuality was seen to represent much that was earthy and inferior about women and female purity was thus prized above all feminine traits; by end of the eighteenth century and into the nineteenth century some medical and prescriptive writers managed to elevate women to a higher moral plane by disconnecting them entirely from sexual desire.²⁵ But personal writings between lovers and between husbands and wives show that many women and men treasured sexuality as an important part of their relationships. This did not necessarily mean, however, that sexuality was something to be spoken of with any frankness.

²⁴ "Falling of the womb" referred to a prolapsed uterus. See Slave Records 1844-1864 and Slave Records 1844-1865, Glover Family Papers, SCL.

²⁵ See Nancy Cott's discussion of this trend in Nancy F. Cott, "Passionlessness: An Interpretation of Victorian Sexual Ideology, 1790-1850," *Signs* 4, no. 2 (Winter 1978): 219-236.

Women did occasionally note their suspicions of pregnancy, providing (very) veiled references to recent sexual activity. In 1844 Madaline Selima Edwards, an educated white woman whose tumultuous life led her to become the mistress of a man in New Orleans, offered an unusually direct reference to sexual activity on a particular day when she recorded in her diary the terse phrase, “Conception I think.”²⁶ Her use of the word conception was extremely unusual; it was an appropriate subject in medical texts, but almost never appeared in personal writings. A woman living in upstate New York offered a similarly oblique reference to intercourse when she wrote to her husband in 1849, “The old maid come at the appointed time. I do think you are a very *careful* man.” The old maid she referred to was menstruation, and she complimented her husband for the care he took during intercourse to prevent conception (though she did not specify his method). She followed up this little remark by telling her husband that he should do his friend Mr. Stewart (and his wife!) a favor and “take Mr. Stewart out one side and learn him” how to prevent conception.²⁷

To what extent average women and men understood the fertility cycle at this time is difficult to ascertain. The existence of medical texts about and for women suggests that some women at least could have learned, apart from their own observations, that they were more prone to conception on certain days in their monthly cycle. But the information given in such texts was inaccurate, as science has since shown. Pye Henry Chavasse, for instance, instructed women in calculating their due date by explaining, “The reason we fix on a female conceiving a few days after she has ‘ceased to be unwell’

²⁶ Madaline Selima Edwards Diary, February 27, 1844, folder 16, Charles William Bradbury Papers, SHC.

²⁷ Carol Kammen, ed., “The Letters of Calista Hall,” *New York History* 63, no. 2 (April 1982): 232.

is, that she is more apt to do so very soon after menstruation, than at another time.”²⁸ We now know that conception can only occur shortly after ovulation which, although it varies considerably from woman to woman, generally happens more than a week after menstruation. This misinformation would not have helped women avoid pregnancy, but it is clear that most women kept careful track of their menstrual cycles, noting possible pregnancy or a false alarm.

References to fertility rates and patterns were implicitly linked to sex, but they revealed little about women’s attitudes toward their bodies as sexual bodies, except to convey that this was a facet of reproduction that could not be readily articulated. References to sex, however, were much more common in the recollections of former slaves than in the sources left by more privileged women, and they demonstrated that very different assumptions about maternal sexuality were applied to white and black women. Moreover, both direct and oblique references to sexuality were more common in slave sources than in references to pregnancy or childbirth, suggesting that, at least in the retrospective act of telling about slavery, enslaved women may have been more profoundly affected by the remembered trauma of sexual vulnerability than by the challenges of pregnancy and childbirth. One former slave, Ida Blackshear Hutchinson, told a story of forced childbearing that was most likely passed down from older relatives, for she would have been very young in the last years of slavery. “Once on the Blackshear place,” she recounted, “they took all the fine looking boys and girls that was thirteen years old or older and put them in a big barn after they had stripped them naked. They used to strip them naked and put them in a big barn every Sunday and leave them there

²⁸ Pye Henry Chavasse, *Advice to Wives on the Management of Themselves, During the Periods of Pregnancy, Labour, and Suckling* (New York: D. Appleton & Co., 1844), 47.

until Monday morning. Out of that came sixty babies.”²⁹ These scenes of deliberate breeding and forced intercourse had no place in the conceptions of motherhood that dominated American culture, privileging the emotional, moral, and spiritual influence of ideal mothers above their more physical qualities. The differences between idealized motherhood and the realities of motherhood in slavery illustrated that the issue of sexuality helped to draw a line between women whose class and race privilege allowed them to separate motherhood from sexuality, thus granting them important social capital, and those whose bodies were seen to be irrevocably debased. In the stories they shared about their reproductive lives, white women perpetuated a chaste silence surrounding matters of a sexual nature, allowing them to reinforce visions of maternal virtue. For enslaved women, the realities of their social position dictated that there could be no line between sex and motherhood, no real or rhetorical protection of feminine purity. But narratives of enslavement exposed the truth underlying the experiences of many women, both black and white: that in reproductive matters their bodies were not their own and could become sexual and reproductive commodities.

Because of their status as commodities, measuring fertility signified a literal form of accounting for enslaved women—a measure of the accumulated value placed on the body of the mother and her progeny. Slaveholders both encouraged and enforced high fertility rates. As historian Marie Jenkins Schwartz writes, “Bondswomen who did not achieve motherhood because they could not become pregnant, carry an infant to term, or keep a child alive came to be viewed as a problem in need of correction.”³⁰ One former

²⁹ Ida Blackshear Hutchinson, *Arkansas Narratives*, *Arkansas Narratives*, Vol. 2, Part 3: 374. Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

slave in North Carolina recalled that “Marster didn’t care who our fathers was jest so the women had children. . . If a woman was a good breeder she brought a good price on the auction block. The slave buyers would come around and jab them in the stomach and look them over and if they thought they would have children fast they brought a good price.”³¹ Another woman recalled with some pride that her grandmother bore twenty-one children in slavery and was highly prized because of it. She also emphasized, however, that when her grandmother was still very young her owner “forced motherhood upon her.”³² Early childbearing and high rates of fertility testified to enslaved women’s commodification and loss of control over their bodies.

Yet the sparse records available also demonstrate that some enslaved women bore large families out of choice and used their knowledge of fertility patterns to exert as much control as they could, surely often with the cooperation of their sexual partners. As Schwartz shows, although childbearing in slavery was never fully a choice and was therefore inherently coercive, this did not mean that enslaved women did not welcome motherhood. Children could be a practical asset to slave families, as with any other family, as well as a treasured part of the social and emotional life of the family and community that could mitigate the most inhumane aspects of slavery.³³ Josephine Howell spoke matter-of-factly of her enslaved mother’s distress when she could no longer bear

³⁰ Schwartz, *Birthing a Slave*, 11.

³¹ Hattie Rogers, *North Carolina Narratives*, Vol. 11, Part 2: 229. Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

³² Josephine Howell, *Arkansas Narratives*, Vol. 2, Part 3: 340, Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

³³ Schwartz, *Birthing a Slave*, 11.

children: “Mother married then and had five children. . . . Dr. Goodridge stopped her from having children, she raved wild.”³⁴ How and why Dr. Goodridge ended her ability to bear children is unclear, but this woman’s despair attested to the importance of childbearing in her life.

Although they were commodified as both productive and reproductive bodies, enslaved women could exert some control over childbearing. At the very least some women regulated their fertility in order to bear their many children under the best possible circumstances. Former slave Mary Grayson of Oklahoma recounted a story about her mother who, for unspecified reasons, did not bear children until later than was expected and desired by her owners. She was bought by a Creek Indian who

took her away and was kind to her, but he decided she was too young to breed and he sold her to another Creek who had several slaves already, and he brought her out to the Territory [Oklahoma]. . . Jim Perryman, bought my mammy and married her to one of his ‘boys’, but after he waited a while and she didn’t have a baby he decided she was no good breeder and he sold her to Mose Perryman. Mose Perryman was my master, and he was a cousin to Legus Perryman, who was a big man in the Tribe. He was a lot younger than Mose, and laughed at Mose for buying my mammy but he got fooled, because my mammy got married to Mose’s slave boy Jacob, the way the slaves were married them days, and went ahead and had ten children for Mr. Mose.³⁵

We cannot know whether Mary Grayson’s mother did not have children at first because of her own or her husband’s personal wishes, or whether other factors such as youth or medical conditions prevented conception. It is possible, however, that she was able to limit her fertility, whether by sexual abstinence or other methods, until such time as she saw fit to bear children.

³⁴ Josephine Howell, *Arkansas Narratives*, Vol. 2, Part 3: 340. Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

³⁵ Mary Grayson, *Oklahoma Narratives*, Vol. 13: 115-116. Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

Similarly, Harriet Jacobs's well-known published slave narrative poignantly emphasized the inability of enslaved women to exert full control over their sexual activities, but also showed their ability to influence the conditions under which they became sexually active and bore children. In recognizing the impossibility of perpetually evading the advances of her owner who "met [her] at every turn . . . swearing by heaven and earth that he would compel [her] to submit to him," Harriet Jacobs made the choice to bear children with another white man. She regretted what she saw as the loss of her sexual purity, but openly asserted that it was the only way she could exert some control over her sexual life and reproduction. "I wanted to keep myself pure," she wrote, "I tried hard to preserve my self-respect; but I was struggling alone in the powerful grasp of the demon Slavery; and the monster proved too strong for me."³⁶ She could not marry the man she loved, but she did make the practical and strategic choice of the lesser of two evils. Jacob's narrative and the accounts of other former slaves demonstrate that for many enslaved women the issue of bodily control was at the center of their understanding of motherhood.

For many women, both black and white, children provided both comfort and a feeling of accomplishment, and they welcomed a large family despite the physical rigors and uncertainties of repeated pregnancies and births. Sarah Logan Fisher, a member of the large Philadelphia Quaker community, left an extraordinarily complete record of her reproductive life over a span of nearly twenty years. Throughout most of this period she was pregnant, recovering from delivery, or eagerly looking for signs of a new pregnancy. Between 1777 and 1788 she gave birth seven times. Disappointed by several deaths and

³⁶ Harriet Jacobs, *Incidents in the Life of a Slave Girl* (1861) (Mineola, NY: Dover Publications, Inc., 2001), 27, 48.

at least one miscarriage, she became increasingly desperate to be pregnant, in spite of the fact that she suffered ever-worsening gynecological complaints. In November of 1780, not long after the death of her youngest child, Sarah noted in her diary that she took tea with a cousin and “told her of my suspicions.” The very next day she wrote, “Oh what a dissapointment [sic] I have met with this morning, my Hopes quite over, for the present.” Having discovered by the return of menses that she was not (or was no longer) pregnant, she still wrote continually about her hopes. “Oh shall I ever be again blessed as I have, nothing would I not forego to be so once again, ~~very-very~~ low about it indeed,” she wrote, poignantly crossing out excess emphasis. Finally in January she recorded that she “had a little hope of a certain matter,” which was soon confirmed by violent morning sickness. Although she died in her mid-forties of chronic health problems most likely related to or exacerbated by childbearing, Sarah Logan Fisher evinced a persistent desire to bear children, in spite of the increasingly dangerous deliveries she underwent with each child.³⁷

But many women expressed dismay when their friends and relatives bore children frequently or in great number. They knew first-hand the dangers of childbearing and, in spite of the joy that a new baby could bring, desired above all the safety and health of their loved ones. Excessive childbearing was dangerous and, as Susan Klepp points out, flouted the growing emphasis on restraint and rationality that came to govern attitudes toward reproduction in the late eighteenth century. Indeed, it seems that women in the late eighteenth century, a time when many women bore large families in spite of an overall trend toward fewer children, were more likely to remark on rates of fertility than

³⁷ Sarah Logan Fisher Diary, November 13, 1780, November 14, 1780, December 5, 1780, p. 22, January 5, 1781, volume 10, Sarah Logan Fisher Diaries, HSP.

later generations. Even Sarah Logan Fisher, who so desired to bear children, implied concern when she remarked that her friend had borne a daughter, “her 7th Child, & been Married about 8 year.”³⁸ When most women bore children roughly every two years, having seven children in only eight years of married life was a reproductive history worthy of some remark. The ever opinionated Abigail Adams did not hesitate to criticize a kinswoman who bore children too quickly for her taste, writing, “As to my Neice Mrs. Norton I doubt not she will find her Health mended by becoming a Mother . . . I hope however she will not follow her cousins example, and be like always to have one, before the other is weaned.”³⁹

Becoming a mother was desirable for most women, black and white, enslaved and free, but so was moderation and good health. Mary Hubbard exemplified both attitudes when she wrote in 1799, “most sincerely do I rejoice with you all on the happy addition to your family, more especially with my Niece who has again been carried safe through the fiery trial, give my love & tell her I wish she may not have another in less than two years from the date of this.”⁴⁰ Hubbard rejoiced at the news of a new baby, but suggested that babies were welcome only when they came at safe and reasonable intervals. Caroline Healey Dall of Boston recorded a new pregnancy with some despair: “Have a presentiment that I am in the family—way, which has depressed me, in spite of [illegible word] philosophy and religion. . . I desire no exception from the common lot, except as

³⁸ Sarah Logan Fisher Diary, March 7 [?], 1781, p. 35, volume 10, Sarah Logan Fisher Diaries, HSP.

³⁹ Abigail Adams, *New Letters of Abigail Adams 1788-1801*, Steward Mitchell, ed. (Boston: Houghton Mifflin, 1947), 36.

⁴⁰ Mary Hubbard to Sarah (Sally) Townsend, September 11, 1799, box 1, Townsend Family Papers, MHS.

far as may keep me, from losing my reason, as I increase my family.”⁴¹ Like many women, Dall did not reject motherhood, she simply wished to limit her childbearing so as not to have too heavy a burden. Elizabeth Drinker often remarked on the desirability of limited childbearing. She reassured her thirty-nine year-old daughter, in the throes of labor in 1799, that “this might possibly be the last trial of this sort, if she could suckle her baby for 2 years to come.”⁴² Not only did Drinker hope that her daughter would avoid the physical trials of continued childbearing, she also made it clear that women were well aware of one of the most accessible forms of contraception, prolonged breastfeeding, and that they were also aware of the change in fertility wrought by menopause. Although husbands might forbid long-term breastfeeding or medical complications make it impossible, it was at least an accessible method by which women could attempt to regulate their fertility while performing the role of good and dutiful mothers.

Women who wrote about childbearing in their letters and diaries emphasized their understanding of motherhood as profoundly corporeal by taking stock of their own history of childbearing and noting its impact on their lives. In 1756 Esther Edwards Burr, daughter of the celebrated minister Jonathan Edwards, wrote with dismay to a close friend:

I thought to have said a deal to you to day but behold the Court sets in Town, and I have had company from erly in the Morn till late in the Eve, and now I write with the Son at the Brest—When I had but one Child my hands were tied, but now I am tied hand and foot. (How shall I get along when I have got ½ dzn. or 10 Children I cant devise).⁴³

⁴¹ Caroline Healey Dall, *Daughter of Boston: The Extraordinary Diary of a Nineteenth-Century Woman* Helen R. Deese, ed. (Boston: Beacon Press, 2005), 90.

⁴² Elizabeth Sandwith Drinker, October 23, 1799, *The Diary of Elizabeth Drinker*, 2: 1227.

⁴³ Esther Edwards Burr, *The Journal of Esther Edwards Burr, 1754-1757*, Laurie Crumpacker and Carol F. Karlsen, eds. (New Haven: Yale University Press, 1984), 192.

Not only was Esther Burr overwhelmed by the work of mothering, but she expressed her dismay in terms of her body; she was tied hand and foot and her breasts claimed by a hungry infant. Her body was restrained (literally as much as metaphorically) and limited by her children; as much as she loved them, the prospect she evoked was distinctly claustrophobic. In this moment of writing Burr exposed the tension between the corporeal duties of motherhood and the intellectual and emotional pursuits that were equally important in defining her sense of self and her adult relationships. Writing literally with a baby at the breast, she struggled to keep both her mind and her writing hand to the task of expressing her thoughts and feelings.

Noting implicitly the toll taken on their bodies, women who survived their early reproductive years were nevertheless able to look back over their childbearing experiences with a sense of pride that may have overshadowed the memory of physical suffering and fear. Over the years, one South Carolinian mother took stock in her diary of her reproductive past. In 1843 Elizabeth Frances Perry recorded, “I am now about to be a Mother for the fourth time.” In 1848 she noted that she had borne six children, two of whom were stillborn, and that she had endured four miscarriages. Finally, years later in 1868 when her childbearing had long ceased, she recorded the final score: “7 living children, two still born, & four miscarriages so have been 13 times pregnant.”⁴⁴ By noting these numbers, she left a record that told a story about her body—the number of times it was marked by pregnancy and labor or the unexpected pain of miscarriage. More importantly, such a record was a testimony to her survival. As Elizabeth Drinker had reflected in 1797, “I have often thought that women who live to get over the time of

⁴⁴ Elizabeth Frances Perry Diary, April 6, 1843, June 6, 1848, May 6, 1868, Folder 1, Box 1 Elizabeth Frances Perry Diary, SHC.

Child-bareing, if other things are favourable to them, experience more comfort and satisfaction than at any other period of their lives.”⁴⁵ Elizabeth Frances Perry seemed to agree.

Women cherished their living children and wrote with pride and love about their growth and progress, but they also knew better than anyone else that childbearing was a difficult and exhausting physical burden. In keeping accounts of their reproductive lives and those of friends and family, they expressed a distinct ambivalence toward childbearing even as they wrote of their love for the children they had borne. Fanny Appleton Longfellow, beloved wife of Henry Wadsworth Longfellow, doted on her children, but worried about the burden of a growing family. “Expecting to be confined about the first of October,” she wrote in 1853, “a prospect which has depressed me a good deal, and I have been very miserable (physically, I mean) all the spring. I find children such a responsibility as they grow older, and so difficult to manage rightly, that I shrink from further duties beyond my capacities.”⁴⁶ One woman in Virginia wrote of an acquaintance that had just born another child in 1826, “as she suffers little or nothing in childbirth . . . I see no cause she has to shrink from the thought of a large family, nor indeed does the prospect distress her, except as being not the most pleasant way of employing her time.”⁴⁷ Repeated childbearing might be inevitable, but it was not necessarily desirable. When women commented on the size of their families or remarked on the number of children borne of a friend or relative, they made implicit judgments

⁴⁵ Elizabeth Sandwith Drinker, February 26, 1797, *The Diary of Elizabeth Drinker*, 2: 893.

⁴⁶ Fanny Appleton Longfellow, *Mrs. Longfellow: Selected Letters and Journals of Fanny Appleton Longfellow*, Edward Wagenknecht, ed. (New York: Longmans, Green and Co., 1956), 194.

⁴⁷ Ellen Wayles Randolph Coolidge to Mrs. Thomas Mann Randolph, March 23, 1826, box 2, Correspondence of Ellen Wayles Randolph Coolidge, UVA.

about maternal health, a woman's value as a mother, her ability to cope with the demands of motherhood, and her ability to determine the course of her reproductive life. Women might be regarded as commodities to be bought, sold, and bred, or as treasured anchors of the family home. In either case, they acknowledged that their accomplishments and their duties in life were linked to the labor of their bodies.

The recognition of a new pregnancy marked the beginning of a period in a woman's life in which her body became increasingly central to her daily life and sense of self. Women were often reticent and vague when discussing or announcing pregnancy in their personal writings, but as the physical symptoms of morning sickness and physical heaviness increased they became explicit in describing the effects that pregnancy had on their bodies. Indeed, although women's writings and even their daily behavior in public often sought to conceal the physical signs of pregnancy, in the end women were both resigned and practical about living with the inconvenience of an unwieldy belly and its accompanying symptoms.

Although the oblique, conventional, and static phrases women often used to talk about reproduction may seem to tell us little about childbearing and motherhood, I argue that in fact they reveal a great deal about the ways in which women carefully constructed and negotiated an identity that had its roots in the physical experiences of reproduction, even though those experiences could not easily be articulated in the context of genteel society. As the historian John Kasson writes about manners and conventions in American society, "the rituals of everyday behavior establish in important measure the structures by which individuals define one another and interact. In powerful ways they determine what

people take their social identities, social relationships, social ‘reality’ to be.”⁴⁸ The linguistic and narrative conventions apparent in women’s personal writings about reproduction may not always reveal the details of the reproductive events mothers experienced, but they do tell us a great deal about the ways in which women combined convention and lived experience to construct their own notion of maternal identity.

In their correspondence with friends and family, middle-class and elite women writing between 1750 and 1850 uniformly used a vocabulary that veiled the physical aspects of pregnancy. Although medical texts during this time referred directly to “pregnancy” as such, and women *very* occasionally let slip the word in their personal writings, overwhelmingly they used a coded vocabulary that obscured the body.⁴⁹ Unlike earlier colonial Americans who referred at times to “teeming” and “flourishing” women or to women who were “big” with child, by the latter half of the eighteenth century the preferred vocabulary for pregnancy gestured vaguely to a “certain matter,” to a “situation,” or a “certain condition.” Such oblique phrases evaded the concreteness of corporeality (of “bigness”) in favor of refinement and restraint, but nevertheless sent a clear message to friends and family.⁵⁰ Harkening back to an older and more exuberant

⁴⁸ John F. Kasson, *Rudeness and Civility: Manners in Nineteenth-Century Urban America* (New York: Hill and Wang, 1990), 4.

⁴⁹ Medical texts regularly referred to pregnancy as such, as did for instance Samuel Bard when he wrote, “Swelled and painful breasts, are symptoms of early pregnancy.” See Samuel Bard, *A Compendium of the Theory and Practice of Midwifery* (New York: Collins and Perkins, 1807), 75. Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*. Elite Virginian Eleanor Parke Custis Lewis once in her letters used the word “pregnant,” but aside from this exception referred generally to approaching motherhood rather than to pregnancy. See Eleanor Parke Custis Lewis to Elizabeth Bordley Gibson, April 13, 1828, in *George Washington’s Beautiful Nelly: The Letters of Eleanor Parke Custis Lewis to Elizabeth Bordley Gibson, 1794-1851*, Patricia Brady, ed. (Columbia: University of South Carolina Press, 2006), 193.

⁵⁰ For more on the growing culture of restraint and refinement in Revolutionary-era America, see Klepp, *Revolutionary Conceptions*. For the nineteenth century see Kasson, *Rudeness and Civility*. See also Karen Halttunen, *Confidence Men and Painted Women: A Study of Middle-Class Culture in America, 1830-1870* (New Haven: Yale University Press, 1982).

vocabulary that evoked the changes a woman's body underwent during pregnancy, women did occasionally report being in a "thriving condition" or being "in the increasing way," but this was less common during the period in question than simple references to "my situation."⁵¹ Even less frequently, some women used convoluted expressions such as being "in the way that women wish to be who love their lords," which obliterated the physical component of pregnancy in favor of the emotional import of the marriage relation.⁵² Even in the greater privacy of personal diaries, women wrote delicately of their condition or mentioned impending motherhood without explicitly acknowledging the pregnancy that must precede it. In her diary, Pennsylvanian Mary Rodman Fisher Fox wrote: "I am approaching an era in my life—I shall be a Mother."⁵³ Her focus moved forward to the actual fact of being a mother, skipping over the biological processes of pregnancy and childbirth.

In their letters, women exposed the difficulties they faced in telling that which was culturally difficult to express. Speaking of pregnancy was not explicitly taboo, but nor was it a matter for polite discourse. In 1797, Esther Cox of Philadelphia wrote to her married daughter in South Carolina,

This day two weeks ago I wrote you a long letter—to that I refer you for my opinion respecting your coming here, should a certain event call for peculiar attentions, which might not be easily had where you are—I will add no more on that head, seeing 'tis so difficult a task for you to repose even in a Mother's breast,

⁵¹ For a discussion of an earlier "exuberant" vocabulary of childbearing see Susan E. Klepp, *Revolutionary Conceptions*, 3. Sarah Logan Fisher Diary, January 1, 1781, p. 25, volume 10, Sarah Logan Fisher Diaries, HSP; Madaline Selima Edwards Diary, May 8, 1844, folder 16, Charles William Bradbury Papers, SHC; Letter to Mary Chestnut, Sept 4, 1797, Folder 3, Box 1, Cox-Chestnut Family Papers, SCL; Ann Head Warder Diary, September 24, 1786, volume 5, Ann Head Warder Papers, HSP.

⁵² Martha Jefferson Randolph to Ellen Wayles Randolph Coolidge, November 16, 1825, Box 1, Correspondence of Ellen Wayles Randolph Coolidge, UVA.

⁵³ Mary Rodman Fisher Fox Diary, August 9, 1849, p. 20, volume 19, Logan-Fisher-Fox Family Papers, HSP.

the confidence of saying you are, or you are not in the way to become a Mother yourself. Your last [letter] left me as uncertain as I was before.⁵⁴

Paradoxically, even as Cox asked her daughter to be more explicit, she herself shrouded the subject of pregnancy in layers of innuendo. As an older and experienced woman, she was perhaps more confident in asking for reproductive news, but still couched her inquiries with delicacy and evasion. These were matters for intimate conversation among women and were only with difficulty put into writing. Indeed, such a written exchange lacked the knowing gestures, touches, and sights that might have eased the communication of reproductive news. Had Cox been able to speak with her daughter she might have seen the tell-tale swelling of her belly or used whispered questions and discreet gestures to ascertain whether or not her daughter was pregnant; in an intimate conversation the body itself might have communicated all.

But both Cox and her daughter inhabited the careful conventions of language through which they could encode and share information that was desired but might not be proper to express openly. They were not the only ones to be so evasive; another woman wrote obliquely in 1797 that “Sometime hence I shall have an additional source of happiness to acquaint you with I hope.” She specified the nature of that hope but skipped over the intervening experiences of pregnancy and childbirth by writing that

the idea of being a Mother, of watching over & forming the mind of Our little infant is a source of delight which none but those in similar situations can experience. I have been busily engaged in providing little trappings for the sweet stranger & anticipating the delight I shall experience when presenting it to its Dear Father.⁵⁵

⁵⁴ Esther Cox to Mary Chestnut, June 11, 1797, Folder 3, Box 1, Cox-Chestnut Family Papers, SCL.

⁵⁵ Eleanor Parke Custis Lewis to Elizabeth Bordley Gibson, November 4, 1799, *George Washington's Beautiful Nelly*, 62.

Even in her diary, South Carolinian Elizabeth Frances Perry could not directly express her wish to bear a child but had to transfer her desire to a more easily articulated target: “I asked my husband yesterday to give me a Rocking chair; he said, ‘when you present me with a little son, I will make you a present of a handsome rocking chair.’ I long to have my chair.”⁵⁶ Even husbands and wives, whose physical intimacy brought about pregnancy, consistently veiled their references to pregnancy in their letters to one another. In 1818 Ebenezer Pettigrew wrote to his wife Nancy, “Write me in your next whether our suspicions as to your situation are correct.” Twelve years later, he still expressed his desires indirectly, writing, “I should have been pleased to hear whether my lovely wife was in the situation which we both suspected.”⁵⁷ Announcing a pregnancy was something that could be done with considerable delicacy thanks to the conventional language with which these women and their family and friends were well acquainted.

Although the physicality of pregnancy could be evaded through language, it was not so easy to disguise the visible changes of a growing pregnant body, and women’s writings reveal that they were both self-conscious and practical about being visibly pregnant. Although they may have hesitated to go out in public, especially during the late months of pregnancy, it was also impractical to be imprisoned in the home simply because of the size of their bellies. Because most women bore a child roughly every two years during the span of their childbearing years, if they had obeyed the most stringent dictates of feminine delicacy they would have spent much of the time between their early twenties and early forties at home. Elizabeth Drinker recorded in 1807 that “poor Molly .

⁵⁶ Elizabeth Perry Diary, February 11, 1838, Folder 1, Box 1, Elizabeth Frances Perry Diary, SHC.

⁵⁷ Ebenezer Pettigrew to Nancy (Ann) Pettigrew, March 6, 1818, folder 19, box 1, and January 5, 1830, folder 34, box 2, Pettigrew Family Papers, SHC.

. . . has a fire upstairs as she is ashamed, she says, to be seen, she cuts such [a] figure.”⁵⁸

Remaining in the privacy of the upstairs was one way to avoid the knowing eyes of friends and neighbors, though strategically worn garments could play a similar role.

Georgina Lowell of Massachusetts wrote to her husband of her day’s activities, “I sat all the time in my chamber—it was too warm for me to go out with my cloak & I don’t go out without it now.”⁵⁹ Unfortunately, her modesty prevented her from attending several events that she was very sorry to miss, as she explained to her husband in subsequent letters. Penelope Skinner Warren, pregnant for the first time in 1840, wrote to her husband, “in two or three weeks my appearance will not be such as to admit of my going anywhere—for you know I am exceedingly particular & if I thought I showed hardly at all nothing could induce me to go out, but it is beginning to be quite perceptible what is the matter with me.”⁶⁰ For some women, modesty and embarrassment acted as more powerful restraints than for others.

Some women recognized that the desire to conceal pregnancy was neither universal nor desirable. Esther Cox mentioned to her daughter her pleasure at forming the acquaintance of a French woman in 1809 and rejoiced that “French Ladies don’t keep out of company, as ours do, when they are rather clumsily shaped.”⁶¹ In spite of the cultural comparison, Esther Cox’s letter conveyed no negative judgment of the woman for venturing out and implied that some women’s notions of modesty were perhaps

⁵⁸ Elizabeth Sandwith Drinker, January 15, 1807, *The Diary of Elizabeth Drinker*, 3: 2002.

⁵⁹ Georgina Margaret Amory Lowell to John Lowell, October 18, 1829, folder 3.2, box 3, John Lowell Papers, MHS.

⁶⁰ Penelope Skinner Warren to Dr. Thomas Warren, August 16, 1840, box 1, folder 22, Skinner Family Papers, SHC.

⁶¹ Esther Cox to Mary Chestnut, October 10, 1809, Folder 17, Box 2, Cox-Chestnut Family Papers, SCL.

inconveniently and unnecessarily strict. Caroline Healey Dall's attitude toward the matter was more anguished and morally complex. She believed it was her God-given duty toward her unborn child to get healthful exercise during her pregnancy—yet her mother, her husband, and acquaintances repeatedly insisted that she should remain indoors and avoid “attracting observation” because of her pregnant state. She was criticized for impropriety, yet she felt that her first duty was to promote the health of her child. In anguish at what she viewed as lack of support from her family, she wrote in her diary, “when will my own sex learn—that the child within their bosoms—is as precious and pure in his sight as that they lead by the hand?”⁶² Viewing pregnancy as a physical state blessed by God, Dall could not understand how being visibly pregnant in public could be construed as improper and offensive.

Pregnancy might create changes in the female body that were embarrassing to women and needed to be concealed, but for some women these changes were seen to enhance their beauty and confidence, validating motherhood as a positive and a desirable change. Esther Cox reported to her daughter, Mary Chestnut, in 1800 that “Sally has gone a great deal into company this winter. She now refuses all invitations, yet I don't think she looks too Clumsy at all, she looks very handsome in the face.”⁶³ On the one hand, the woman in question evidently felt some scruples about continuing to appear in company in her “clumsy” state, yet Esther Cox felt that because she continued to look attractive there was no shame in appearing out of the house. Penelope Skinner Warren, who had been so hesitant to continue going out in public, also admitted to her husband that her pregnancy had improved her looks. “My complexion is very clear,” she wrote, “I hope that there is a

⁶² Dall, *Daughter of Boston*, 83-84.

⁶³ Esther Cox to Mary Chestnut, March 12, 1800, Folder 5, Box 1, Cox-Chestnut Family Papers, SCL.

decided change for the better in me I feel better every day & look I think prettier than I ever did, you ought to see me.” A month later she was still going out to visit her friends, showing that practicality and perhaps newfound confidence won out over polite scruples. Indeed, it seems she was less afraid of impropriety than of attracting the good-natured teasing of friends. “I feel almost ashamed to see my old companions,” she confessed, “there is such a change in my appearance from a delicate little creature I have become such a stout woman that I fear they will laugh at me.”⁶⁴

In spite of women’s (at times half-hearted) attempts to conceal their growing bellies from friends and acquaintances, pregnancy was always a present and visible part of women’s lives and narratives. We can see the physical reality of living with a pregnant body in a portrait from the mid-nineteenth century (see fig. 1.1).⁶⁵ The woman in the photograph is formally attired, as was appropriate for a portrait, and carefully posed to show the elegant sweep of her gown. The only unusual element in this photograph is the roundness of her belly, barely noticeable under the fullness of her skirts. Evidently her advanced pregnancy did not prevent this woman from being photographed. After all, this may have been a rare chance for a portrait which could hardly be passed up because of the aesthetic inconvenience of pregnancy. Women might wish to conceal their bodies when they were “badly shaped,” but the realities of their lives dictated otherwise. Pregnancy was, above all, a normal and regular part of most women’s lives and they lived and managed this part of motherhood with practicality and grace.

⁶⁴ Penelope Skinner Warren to Dr. Thomas Warren, August 16, 1840, box 1, folder 22, and September 17, 1840, box 1, folder 23, Skinner Family Papers, SHC.

⁶⁵ Michael Zinman Photographic Album Collection, unidentified woman, album P.2010.11.3, LCP.



Figure 1.1. Michael Zinman Photographic Album Collection.
The Library Company of Philadelphia

This portrait also raises the point that engineering attractive yet wearable clothing was one of the more pressing practical concerns that faced pregnant women and forced them to negotiate their rapidly changing bodies. Special maternity clothing did not exist in eighteenth- and nineteenth-century America the way it does today; instead, women's clothing was engineered in such a way as to make it readily adjustable. From the 1790s through the 1820s, the high empire waist with its loose and flowing skirts provided an accommodating fashion for a quickly changing figure. In later decades women could leave off corsets and tie their skirts higher to leave room for a growing belly. In the last stages of pregnancy and while breastfeeding, women might dress more informally in a loose "wrapper" that fastened in the front to make nursing easier. This garment would

have been suitable for seeing family and some informal visitors in the home, but not for going out.⁶⁶ Most women, even affluent ones, would not have had the luxury of owning many different sizes of clothing to meet the needs of their repeatedly changing bodies. Instead, clothing could be temporarily adjusted to fit. Women rarely wrote about the challenges of clothing their changing bodies; this was a practical matter that required little commentary, although no doubt they received considerable advice from friends and family. Perhaps because she was young and experiencing her first pregnancy, Penelope Skinner Warren wrote to her husband with uncharacteristic detail about her struggles to cloth herself. “I have a seamstress with me,” she wrote to her husband, “& am engaged in making (do not laugh at me) loose dresses—for really I am increasing so much in size that my clothes are all becoming unmanageable & I am tired of altering & letting out. . . I do not know how I shall appear in my new dresses—it will be several days before I can venture without a shawl. I wish you were here to give me confidence.”⁶⁷ Warren’s half-humorous, half-plaintive letter showed that managing the pregnant body could be both practical and emotional work.

Although women rarely, if ever, directly named pregnancy as such, they were more forthcoming about the physical symptoms it produced. As the symptoms of pregnancy progressed, their bodies intruded on their lives and writings in no uncertain terms. Assuming that coded references to *certain matters* or *my situation* would provide a clear signal to family and friends, women then discussed their physical condition with

⁶⁶ Joan Severa offers a brief explanation of the wrapper as a maternity garment based on a daguerreotype of a young mother dating from the late 1840s. See Joan Severa, *Dressed for the Photographer: Ordinary Americans and Fashion, 1840-1900* (Kent, OH: Kent State University Press, 1997), 64.

⁶⁷ Penelope Skinner Warren to Dr. Thomas Warren, August 28, 1840, Box 1, folder 22, Skinner Family Papers, SHC.

less restraint. Pregnant for the first time, Penelope Skinner Warren wrote with considerable candor to her absent husband because, as a physician, he wished to hear about all the symptoms of her pregnancy. “I did not feel so well Thursday,” she explained, “every little pain frightened me—I had not you to run to every moment, but I have become accustomed to them & know that they are only natural to me . . . whenever I have any strange pains Cousin Annie says I must come to her & she will explain them to me.”⁶⁸ Warren learned what was normal by becoming familiar with the sensations of her pregnant body, but she could also turn to her female relatives and companions for more explicit explanations based on their own experiences. Her letters also make it clear how important it was for women to communicate in person their experiences with friends and family, receiving in return knowledge and reassurance.

Exposing the physical burden of childbearing, women complained often in the later stages of pregnancy of feeling heavy and unwieldy and of suffering from swelling, pains, and the general awkwardness imposed by a growing belly. During several of her pregnancies, Sarah Logan Fisher recorded almost daily remarks about how she felt, particularly in the early and late stages of a pregnancy. In January 1781 she noted several consecutive days of morning sickness, “very Sick all day, kept up stairs.” By July and August she complained frequently of feeling “poorly & very heavy.” Two years later, pregnant again, she complained of feeling very anxious, for, “I feel so very heavy & uneasy myself, more so I think than ever I did by far.” Pregnant again in 1787, she complained, “My Ancles Swell exceedingly which makes me uneasy.”⁶⁹ Judging by her

⁶⁸ Penelope Skinner Warren to Dr. Thomas Warren, August 8, 1840, Box 1, folder 22, Skinner Family Papers, SHC.

diary, the unwieldiness of her pregnant body had by this time engrossed her thoughts and she wrote of little beyond the immediate concerns of her body. In a similar vein, Ellen

Wayles Randolph Coolidge complained of the suffering she endured during pregnancy:

You may imagine how I get along under such circumstances with my three little ones, all babies together and so helpless and unwieldy as I am from my situation. Oh it is a ‘chien de métier que le mien’⁷⁰ and I know not from what cause that at five months I am as great a sufferer as I usually have been at seven or eight . . . The wise ones comfort me by saying it will be all the better in the end but I believe I had rather suffer a little more then than be for four months longer such a good for nothing, useless, complaining creature as I am at present.⁷¹

Women felt obliged to circumvent the fact of pregnancy with vague phrases about their particular *situation*, but by the later stages of pregnancy their heavy corporeality intruded so fully on their physical and emotional lives that they abandoned conventional phrases for more individualized descriptions of discomfort and suffering. They could talk about “tender pledges” instead of pregnancy or babies, but it was much more difficult to obscure and sentimentalize the physicality of swollen ankles. At such times, women’s bodies became the main focus of their attention and concern for, unlike stories of childbirth which were necessarily retrospective, they simultaneously lived with and wrote about their painful and heavy bodies.

Beyond the material challenges of the body, however, the experience of pregnancy or the desire for pregnancy created for some women a unique psychological crisis by putting their bodies in tension with their emotional and moral lives. In 1849,

⁶⁹ Sarah Logan Fisher Diary, January 25, 1781 and August 18, 1781, volume 10, p. 31, 66; September 21, 1783, volume 12, p. 71; May 23, 1787, volume 16, p. 50, Sarah Logan Fisher Diaries, HSP.

⁷⁰ Translation: “mine is a dog of an occupation.”

⁷¹ Ellen Wayles Randolph Coolidge to Martha Jefferson Randolph, June 6, 1830, box 2, Correspondence of Ellen Wayles Randolph Coolidge, UVA.

Mary Rodman Fisher Fox expressed an unusually vehement reaction to what she saw as betrayal by her body:

Within the last few days I have been agitated and disturbed by feelings entirely new to me.—I am approaching an era in my life—I shall be a Mother. This should come to me as another blessing, but I cannot receive it as such. My pride, the feelings of delicacy which I have cherished all my life—all are outraged by any thing of this nature, following so soon after my marriage—(six weeks ago this night) I never dreamed that I should be so “ungenteel.” Every feeling of my nature rises in rebellion against it.⁷²

Although she may not have wished to become a mother at that time, it is hard to understand why her feelings of pride and delicacy in particular were so “outraged” by impending motherhood. Comparing the dates of her marriage and delivery reveals that she could have conceived prior to her wedding—thus explaining her sense of shame—but it is equally possible that she conceived very shortly after her wedding and delivered a bit early. In any case, a child born so promptly after marriage might have given rise to some sly and humorous comments by family and friends. Whatever the cause, it is clear that her sense of self and her sense of propriety were deeply outraged by the functions of her body. She did eventually reconcile herself to motherhood after the birth of the child, but her extreme reaction to pregnancy indicates that some women found pregnancy a challenge to the ways in which they understood themselves as moral and spiritual individuals.

For Madaline Selima Edwards, the unfulfilled desire to be pregnant, rather than distaste for the circumstance, prompted an emotional crisis. The mistress of Charles Bradbury of New Orleans, Edwards believed that she conceived in 1844 and hoped that the child would solidify the affections of the man she loved. Previously the mother of several children, all deceased, she recognized the signs of pregnancy and faithfully

⁷² Mary Rodman Fisher Fox Diaries, August 9, 1849, volume 19, Logan-Fisher-Fox Family Papers, HSP.

recorded the symptoms of morning sickness and the sensation of quickening in her diary and even consulted a midwife and a physician about her condition. The former declared her “not in the family way,” while the latter reassured her that she was indeed pregnant.⁷³ Nearing the end of the nine month period, she became increasingly anxious and certain that labor was approaching. For several more months she recorded frequent sensations of approaching labor, but when she would have been nearly thirteen months pregnant, her physician finally decided that she was not in fact in the family way. Edwards was devastated. “I feel that I am doomed to be eternally a creature of disappointment and sorrows,” she wrote, “Oh I am so miserable, on the account of it, I have now to undergo a course of medicine.”⁷⁴ Did her desperate desire to have a child with Charles Bradbury cause her to invent these circumstances and misread her body? A lonely, emotional, and perhaps chronically depressed woman, it is possible that her thoughts and desires translated themselves into an apparent physical reality. All the sensations of her body seemed to tell her that she would soon be a mother again, but in the end, Edwards’ story illustrates the potential conflict between psychology and corporeality in women’s lives.

Whether they desired it or not, pregnancy was a recurring part of life for most adult women in the late eighteenth and early nineteenth centuries. They often used vague conventional phrases to indicate pregnancy, but they also discussed explicitly the physical changes that occurred over the course of the nine month period. Women might for the sake of modesty hesitate to go out in company when visibly pregnant, but they still wrote letters to friends and family detailing their symptoms and complaining about problems such as swollen ankles and the general awkwardness of a growing belly. Their

⁷³ Madaline Selima Edwards Diary, October 31, 1844, folder 16, Charles William Bradbury Papers, SHC.

⁷⁴ Madaline Selima Edwards Diary, April 9, 1845, folder 17, Charles William Bradbury Papers, SHC.

attitudes were thus constrained by propriety but also driven by a real need to articulate their experiences and to receive advice and consolation, a trend which continued in their descriptions of childbirth.

Sarah Logan Fisher recorded in her journal in 1779 that she “was poorly all the morning & taken worse about Noon, & in between 8 & 9 was favord to be deliverd of a very fine Son, after a very hard difficult Labour, yet I was safely put to bed & everything right, which was a mercy I wish to be thankful for.”⁷⁵ In contrast to the physically and emotionally evocative birth narratives that have become more common in the wake of Second-Wave Feminism and its explicit celebration of the female body, earlier Americans were reticent about describing in full the physical and emotional experience of childbirth.⁷⁶ In 1826, Georgina Margaret Amory Lowell of Massachusetts sent a similar description to her closest friend, to whom she often wrote in French, announcing:

il faut que je vous dise que notre cousine Catharine Codman a donné naissance samedi dernier à quatre heure du matin, à une petite fille. Ella n’a souffert que très peu: elle ne fut malade que quatre heures, et l’enfant vint au monde [sans] qu’aucune personne de la famille excepté Mme Stevens sa nourrice, eut appris ce qui se passait. Elle se porte à present très bien: la petite demoiselle est fort petite, mais se porte à merveille.⁷⁷

As in Lowell’s announcement, when women reported on childbirth they tended to focus on three key points: the outcome for the mother, the outcome for the infant, and an

⁷⁵ Sarah Logan Fisher Diary, September, 1779, p. 74, Sarah Logan Fisher Diaries, HSP.

⁷⁶ For examples and analyses of twentieth-century birth narratives, see Della Pollock, *Telling Bodies Performing Birth* (New York: Columbia University Press, 1999). For a discussion of personal and literary birth narratives, see Carol H. Poston, “Childbirth in Literature,” *Feminist Studies* 4, no. 2 (June 1978): 18-31.

⁷⁷ Translation: “I must tell you that our cousin Catharine Codman gave birth last Saturday at four in the morning to a little girl. She suffered but little: she was only sick for four hours, and the baby came into the world without anyone in the family except her nurse Mrs. Stevens knowing what was happening. She is doing very well: the little miss is very small, but is doing marvelously.” Georgina Margaret Amory Lowell to Anna C. Lowell, August 15, 1826, folder 2.3, box 2, John Lowell Papers, MHS.

assessment of the birth in terms of its duration and the severity of suffering. These two brief memorandums were typical in these respects. They did not evoke the intensity of the birth experience or emphasize the impact of labor on the mother, but they did communicate the key results and characteristics of the delivery. In such textual moments, the sensations of the mother's body receded into the background of the narrative while the focus shifted to the results of her reproductive work.

Although these narrative patterns remained constant between 1750 and 1850, it is important to recognize that this period did see some changes in childbirth practices. Prior to the mid eighteenth century, childbirth was an exclusively female realm. Women gave birth at home with the assistance of female family and friends and a female midwife who relied on herbal remedies and a non-interventionist approach. In the second half of the eighteenth century male physicians began to enter the lying-in chamber. Richard W. Wertz and Dorothy C. Wertz have argued that between 1750 and 1810 Americans saw childbirth as the purview of both female midwives and male physicians. Midwives oversaw normal births, while doctors attended only those with complications. By 1810, the medical profession came to see childbirth as requiring greater intervention, and some middle- and upper-class women likewise demanded the expertise of formally trained physicians who could employ instruments and more potent medications.⁷⁸ It is important to note, however, that the gradual professionalization of midwifery as part of male medical practice did not necessarily represent an improvement for childbearing women. Many scholars agree that medical science did not increase childbearing women's safety

⁷⁸ Richard W. Wertz and Dorothy C. Wertz, *Lying-In: A History of Childbirth in America* (1977) (New Haven: Yale University Press, 1989), esp. 44. See also Judith Walzer Leavitt, *Brought to Bed: Childbearing in America, 1750-1950* (New York: Oxford University Press, 1986); Janet Bogdan, "Care or Cure? Childbirth Practices in Nineteenth Century America," *Feminist Studies* 4 (1978): 92-99.

and chance of survival until the twentieth century. Puerperal fever, for instance, was a uterine infection that killed many new mothers in the nineteenth century. It was easily spread from patient to patient by the hands and instruments of unwitting physicians who came in contact with many different patients and many different diseases, worked in unsanitary hospitals, and may have conducted more invasive examinations and interventions than female midwives.⁷⁹

Thus during the first half of the nineteenth century, increasing numbers of women bore children under the supervision of a male practitioner. But this shift was experienced unevenly, depending on where women lived, their socio-economic status, and their understanding of childbirth practices. Access to doctors was more readily available to women who lived in populous areas, while more affluent women had the most access to medical resources. Physicians' records show, however, that in the case of a difficult birth even poor women might be attended by a physician, either in their own homes or in hospitals for the poor. Some enslaved women also encountered physicians in cases of complicated or prolonged deliveries. But it is important to realize that most women continued to give birth in a traditional female-centered environment. Indeed, Judith Walzer Leavitt estimates that in 1800 roughly twenty percent of births were attended by physicians, while by 1900 that number had only risen to roughly fifty percent.⁸⁰ The majority of births through 1850 would have been attended by a female midwife. Physicians could intervene in childbirth by administering drugs such as laudanum and, more rarely, ergot, by using instruments such as forceps and the crochet (used for breaking apart and removing a fetus), and, very rarely, by performing a caesarian section.

⁷⁹ Wertz and Wertz, *Lying-In*, esp. chapter 4.

⁸⁰ Leavitt, *Brought to Bed*, 12.

References to developments in medical practice and technology did sometimes appear in women's personal writings, but they seemed to have little impact on the ways in which women recounted their childbearing experiences.

Telling the story of a birth meant walking a fine line between propriety and the desire to apprise distant loved ones of the circumstances and outcome of a birth or to preserve one's own record of a significant life experience. When one mother wrote at some length about the pain and reward of childbirth in response to her pregnant sister's queries, she concluded by exclaiming, "What an abominable letter! Throw it in the fire & drive away all your blue devils."⁸¹ Her sense of propriety required such an exclamation, yet it did not prevent her from responding to her sister with considerable candor. Just as pregnancy could be signaled through conventional coded language, childbirth could be described by means of conventional vocabulary that alluded to but did not elaborate on the panoply of experiences and responses that characterized each woman's birth experience. Variations of the phrase "brought to bed," particularly common in the colonial era, provided a comforting and innocuous way of referring to a difficult and sometimes dangerous process. Many women simply listed in their letters and diaries their friends and relatives who had been brought to bed with no further detail, except sometimes to note the sex of the infant and whether it was living or stillborn.

Many times women offered more lengthy records of births, but they still relied on stock phrases to convey more meaning than they felt they could give explicitly. In 1839, Sarah Lindley Fisher, daughter-in-law of Sarah Logan Fisher, wrote of a younger family member:

⁸¹ Ellen Wayles Randolph Coolidge to Mrs. Nicholas Trist, May 9, 1826, Box 2, Correspondence of Ellen Wayles Randolph Coolidge, UVA.

This morning a little before three o'clock, another Son was added to her family, a fine healthy Baby apparently, and Sarah seems as well as could be asked, under the circumstances,--The time of severe suffering was comparatively short; about two hours; and no other difficulty than what is necessarily connected with such occasions attended her.⁸²

This narrative was typical in that it highlighted the survival of both mother and child and provided a sense of the duration and difficulty of the birth. Moreover, it used a conventional vocabulary to refer implicitly to the physical details of the birth which could not be fully discussed in writing. By assuring her friend that Sarah was “as well as could be asked, under the circumstances” and that “no other difficulty than what is necessarily connected with such occasions attended her,” Sarah Lindley Fisher referred obliquely to the discomfort and messiness of childbirth, something with which most adult women would have been familiar. Her words would have summoned a host of images of childbirth which the memory and imagination of experienced women could readily supply. Writers often reported with cautious optimism that a newly-delivered woman was “as well as could be expected” or simply that she had been “brought to bed.” Both phrases conveyed a successful outcome, but hinted at untold trials with which women who had survived or witnessed childbirth would have been intimately familiar.⁸³ Esther Edwards Burr wrote confidently to her friend about her own delivery, noting that she “had a very quick and good time,” while Sarah Logan Fisher recorded that a friend had endured a “very dangerous difficult Labour.”⁸⁴ Such stock phrases both alluded to the

⁸² Sarah Lindley Fisher to Elizabeth Rodman, February 9, 1839, folder 2, box 11, Logan-Fisher-Fox Family Papers, HSP.

⁸³ Elizabeth Sandwith Drinker, July 1, 1765, *The Diary of Elizabeth Drinker*, 1: 117. Mary Vial Holyoke, Aug. 5, 1761, “Diary of Mrs. Mary (Vial) Holyoke, Salem 1760-1800,” *The Holyoke Diaries 1709-1856*, George Francis Dow, ed. (Salem, Mass.: The Essex Institute, 1911), 52.

⁸⁴ Esther Edwards Burr, *The Journal of Esther Edwards Burr*, 189. Sarah Logan Fisher Diary, July 14, 1783, p. 47, Sarah Logan Fisher Diaries, HSP.

body and permitted it to remain invisible, showing that although the physical experience of childbearing was at the heart of women's narratives, such things could be only incompletely articulated.

Yet not all women concealed their experiences beneath layers of conventional language. Young and inexperienced women in particular sometimes expressed their thoughts and fears more directly. In 1826 Ellen Wayles Randolph Coolidge responded by letter to her pregnant sister's fears about the pain of childbirth. This letter reads more like a candid conversation between women than most such texts, though the distance between the two sisters forced the communication to remain on paper. Nevertheless, it is far more direct than most written discussions of childbearing and is worth quoting at length:

Your letter of May 3d arrived this morning & to your question whether the birth of a baby is as bad as having all your teeth drawn at a sitting I can only remind you of what Napoleon said to O'Meara, that the worst of all pains is the one under which we happen to be suffering. Of one thing I feel confident that you will never be as much alarmed at the thought of another child as you are at present, for the very mystery with overhands the subject before we become acquainted with it enhances to a dreadful degree our apprehensions as to the event . . . I do not attempt to deceive you as to the pain, but upon the whole you get through it infinitely better than you could possibly conceive without having experienced the strength & support that is granted to a woman even in the hardest part of the operation. Of one thing I am quite sure, if you could be seated at the foot of my baby's bed (supposing her yours) as I am & hear her breathing & see her little black head peeping from under the clothes, you would agree to go through twice as much rather than be without her.⁸⁵

Coolidge acknowledged to her sister the pain of childbirth, but she evaded the comparison to "having all your teeth drawn at a sitting" by emphasizing the importance of experience. One's perspective on childbirth changes with experience, she intimated, arguing that though the pain may always be present, one's estimation of it changes after the first birth. With the experience of motherhood came knowledge and greater

⁸⁵ Ellen Wayles Randolph Coolidge to Mrs. Nicholas Trist, May 9, 1826, box 2, Correspondence of Ellen Wayles Randolph Coolidge, UVA.

confidence. Indeed, Coolidge assured her sister that bodily pain would recede when paired with the joy of being a mother. The body, though always present and sensible to pain, was also in her view a vehicle to greater happiness. In this sense she combined a more sentimental understanding of motherhood—the sacrifice of the virtuous mother and her just reward—with a pragmatic awareness of corporeality and its consequences.

Mary Richardson Walker, one of several women missionaries in Oregon, was another inexperienced young mother who wrote candidly of her first birth in 1838. She began her birth story with a tone of surprise and a frank recognition of her body's functions: "Awoke about 5 o'clock A.M. As soon as I moved was surprised by a discharge which I supposed indicated approaching confinement. Felt unwilling it should happen in the absence of my husband. I waited a few moments. Soon pains began to come on & I sent Mrs. Smith who lodged with me to call Mrs. Whitman." Walker's explicit reference to the discharge of fluid or blood that was a part of many women's birth experiences was extremely unusual. Although many women referred to labor pains, it was very rare for them to mention fluid as part of the process. But this was Walker's first child, and her birth story evoked the surprise, uncertainty, and anticipation of a new mother going through this event for the first time. Although in retrospect she "forgot" some of the misery of childbirth, the moment when Walker's waters broke was an important physical memory for it marked the moment of no return. Her birth narrative was remarkably complete in that it combined a sense of both the emotional and the physical experience of birth. She concluded her story with the sequence of emotions that marked her first delivery:

almost nine I became quite sick enough—began to feel discouraged. Felt as if I almost wished I had never been married. But there was no retreating, meet it I

must. About eleven I began to be quite discouraged. I had hoped to be delivered ere then. . . But just as I supposed the worst was at hand, my ears were saluted with the cry of my child. A son was the salutation. Soon I forgot my misery in the joy of possessing a proper child.⁸⁶

Walker eventually recorded the births of five children, but she wrote less about her experiences with each subsequent child. No doubt she had less time to write as her family and duties grew, but her writings also illustrate that for many women the first pregnancy and birth were such new and remarkable experiences that they warranted more extensive and candid commentary.

Although new mothers occasionally broke with narrative convention because of the newness of their experiences, some evidence indicates that the unique trauma of giving birth in slavery was another factor that could shift the pattern of storytelling. We lack sufficient numbers of childbearing narratives from the lips or pens of enslaved women to trace narrative patterns in the same way that we can for more privileged women, but two powerful stories from Harriet Jacobs's slave narrative, *Incidents in the Life of a Slave Girl*, intimate that the social trauma of childbearing in slavery was of greater importance than the physical challenges of childbearing. Jacobs told the story of her first pregnancy and delivery in considerable length:

For some weeks I was unable to leave my bed. I could not have any doctor but my master, and I would not have him sent for. At last, alarmed by my increasing illness, they sent for him. I was very weak and nervous; and as soon as he entered the room, I began to scream. They told him my state was very critical . . . When my babe was born, they said it was premature. It weighed only four pounds; but God let it live. I heard the doctor say I could not survive till morning. I had often prayed for death; but now I did not want to die, unless my child could die too. Many weeks passed before I was able to leave my bed. I was a mere wreck of my

⁸⁶ Mary Richardson Walker, December 7, 1838, *Mrs. Elkanah Walker and Mrs. Cushing Eells*, vol. 2 of *First White Women Over the Rockies: Diaries, Letters, and Biographical Sketches of the Six Women of the Oregon Mission who made the Overland Journey in 1836 and 1838*, Clifford Merrill Drury, ed. (3 vols., Glendale, CA: Arthur H. Clark Company, 1963), 2: 136.

former self. For a year there was scarcely a day when I was free from chills and fever.⁸⁷

Jacobs's narration emphasized two key facets of her experience: her terror of being in the presence of her owner and tormentor, and her understanding of death as a means of escape. Of secondary importance in her narrative was the actual outcome of the birth—the survival of both herself and her infant and her continuing health problems. Because this childbirth story was published as part of Jacobs's larger narrative condemning slavery, it is perhaps unsurprising that she should emphasize the social conditions surrounding her reproductive experiences and their emotional content as a way of furthering her argument against slavery. Although Jacobs's birth narrative was written under different conditions and with a different purpose in mind, it is nevertheless important to take note of alternatives to the narrative conventions adopted in most private descriptions of childbirth.

Another birth story recounted by Jacobs further highlighted the ways in which social conditions could surpass physical experience in importance in enslaved women's narratives. Jacobs wrote, "I once saw a young slave girl dying soon after the birth of a child nearly white. In her agony she cried out, 'O Lord, come and take me!' Her mistress stood by, and mocked at her like an incarnate fiend. 'You suffer, do you?' she exclaimed. 'I am glad of it. You deserve it all, and more too.'" As with her own delivery, Jacobs emphasized the emotional trauma of giving birth in slavery and again highlighted an understanding of death as escape from servitude, rather than as a personal and family loss as it was usually described in white women's records:

The girl's mother said, 'The baby is dead, thank God; and I hope my poor child will soon be in heaven, too.' 'Heaven!' retorted the mistress. 'There is no such

⁸⁷ Jacobs, *Incidents*, 53.

place for the like of her and her bastard.’ The poor mother turned away, sobbing. Her dying daughter called her, feebly, and as she bent over her, I heard her say, ‘Don’t grieve so, mother; God knows all about it; and HE will have mercy upon me.’

But even if Jacobs and other former slaves consistently portrayed death as a welcome release from slavery, she also emphasized the physical suffering of the young mother as a way to underscore the immorality of slavery. Soon the young mother’s sufferings

became so intense, that her mistress felt unable to stay; but when she left the room, the scornful smile was still on her lips. Seven children called her mother. The poor black woman had but the one child, whose eyes she saw closing in death, while she thanked God for taking her away from the greater bitterness of life.⁸⁸

Jacobs did not try to evoke the intensity of the mother’s suffering, but instead used it to show how the institution of slavery destroyed what should have been an empathic community of mothers. For her, the corrupting influence of slavery appeared in the fact that a loving mother of seven children could neither empathize nor sympathize with the physical anguish of another mother who passed through the throes of childbirth just as she herself had done many times before. The fact that the newborn infant was almost white implied that jealousy lay at the bottom of the white woman’s vindictiveness, but the end of Jacobs’s telling of the birth highlighted the terrible divide between women who shared the experience of childbearing but were not included in the same community of mothers. These two birth narratives shared by Jacobs signal that, at least in the more public context of the published slave narrative, the narrative conventions developed in women’s private writings were less useful in conveying the experiences of enslaved mothers. Rather than emphasizing the physical work at the heart of the childbirth

⁸⁸ Jacobs, *Incidents*, 15-16.

experience, Jacobs used the trope of suffering to make a broader point about American social relations and identity.

Although white women's private writings displayed a number of consistent narrative patterns, it is important to note that they, too, did not always remain within a conventional framework. More extreme corporeal experiences prompted women to push the boundaries of convention. Indeed, the most physically explicit and unconventional representations of childbirth centered on extraordinary experiences of pain, suffering, despair, and trauma. By highlighting the suffering of the mother, writers evoked an almost tangible corporeality and also altered the typical narrative form. Elizabeth Drinker, for instance, narrated the experience of her daughter-in-law in 1794. Centered on the woman's physical suffering, Drinker's narrative followed an unusual pattern by narrating the birth as a chronological sequence, rather than first emphasizing the outcome of the delivery for both mother and infant:

John came in for liquid ladanem [sic] for his wife twenty five drops he ask'd, which I concluded would do no harm, if it did no good, as she had been us'd to take it, I went in some time after to see her and gave her, by her own urgent desire 50 drops more in about an hour after the 25—I then left her, in hopes it would still those useless pains that she suffer'd—it appear'd to have little or no effect; the mid-wife inform'd me that le [sic] enfant est fort grand, et la mere bien pitit [sic], it was her opinion que l'enfant [sont][sic] mort,⁸⁹ that she wish'd I would send for a Doctor I wrote a note to Dr. Bensal of Germantown and sent Sam with the Chaise for him . . . I left John and Hannah . . . and went with the Doctor to poor Mary—terrible was the succeeding hour to me, how must it have been to the poor sufferer? The Doctor confirm's what the mid wife had said, et avec ses instruments et beaucoup de deficility [sic], ill [sic] la delivra d'enfant mort,⁹⁰ the first male child of seven, a very fine lusty baby—6 of the 7 dead born—Je n'etoit [sic] pas dans le chamber a le moment Cretical [sic],⁹¹ poor Mary appear'd very

⁸⁹ Translation, "the child is very big, and the mother very little, it was her opinion that the child is dead."

⁹⁰ Translation, "and with his instruments and much difficulty, he delivered her of a dead child."

⁹¹ Translation, "I was not in the chamber at the critical moment."

thankful that all was over—I think her a patient well inclin'd woman.”⁹²

The immediacy of the passage appears in Drinker's initial focus on the suffering mother and her urgent quest for relief from pain. Next Drinker highlighted the medical urgency of the situation, the arrival of the doctor, and the use of the instruments (forceps) both dreaded and welcomed by laboring women. Only then did Drinker reveal the final outcome—the death of the baby and the survival of the mother. This was childbirth at its most urgent and dramatic and it warranted a different kind of storytelling, one that brought the physicality and danger of childbirth closer to the surface of the text.

Elizabeth Drinker was often more frank than many of her peers in describing the physical challenges of childbirth, although this may have been partly due to the fact that she seemed to encounter more than her fair share of difficult births as, according to her account, she and her daughters always tended toward difficult deliveries and regularly sought the aid of the renowned Philadelphia physician William Shippen. Her narratives were more explicit when describing her daughters' labors than her own—most likely at least in part because she had more time as an older woman to consider these experiences and to describe them than she had as a young and busy mother. But she also wrote about her daughters' deliveries with empathy generated by the recollection of her own difficult experiences with childbirth; such memories no doubt made the witnessing of another woman's suffering all the more poignant and worthy of recording. When her daughter Molly endured an agonizing birth due to the wrong presentation of the child, Drinker reported that she had found her the next morning “Awake and feverish—she lay very still most of this day, but very sore, and complain'd of her left side being brused by lieing so long on it, and straining so hard—the blood was settled in the ends of her fingers, by hard

⁹² Elizabeth Sandwith Drinker, September 17, 1794, *The Diary of Elizabeth Drinker*, 1: 595.

pulling, and her nails blue.”⁹³ This was a picture of struggle and physical anguish that rarely appeared in any descriptions of birth, private or published. Childbearing women and their attendants generally shied away from representing the bruised and battered body of the mother, especially if the body was the writer’s own. Childbirth could not be avoided and so it was perhaps best to let the story be told in conventional language. Experienced women knew what “a very hard labor” might mean and rejoiced when it passed “as well as could be expected.”

Childbearing women were acutely aware of the dangers of childbirth and the ever-present possibility of death. Although rates of maternal mortality were not as extreme as anecdotal evidence might indicate—in 1850, for instance, only about two percent of deaths among white women occurred during childbirth, although this number does not take into account women who died of infection or other childbirth-related causes in the weeks following a delivery⁹⁴—it was not uncommon for women to write letters to their spouses, or other family members and friends to communicate their love and their last wishes in the event that they did not survive the approaching delivery. Eleanor Parke

⁹³ Elizabeth Sandwith Drinker, June 16, 1797, *The Diary of Elizabeth Drinker*, 2: 930.

⁹⁴ The percentage of white women’s deaths that occurred during childbirth was highest in the state of Florida (5.4 %) and lowest in New Hampshire (1.2%). Generally speaking, percentages were lowest in New England and the Midwest. For 1850 mortality statistics see McMillen, *Motherhood in the Old South*, Appendix I, Table III. Maternal mortality rates are notoriously difficult to calculate with certainty in the eighteenth and early nineteenth centuries. Janet Lynne Golden estimates that in eighteenth-century America maternal mortality rates ranged from 6 to 20 deaths per 1,000 births (Golden, *Social History of Wet Nursing*, 18-19). In her research into the career of the late-eighteenth-century midwife, Martha Ballard, Laurel Thatcher Ulrich demonstrates that Ballard recorded one maternal death per 200 births. See Ulrich, “‘The Living Mother of a Living Child’: Midwifery and Mortality in Post-Revolutionary New England,” *William and Mary Quarterly* 46, no. 1 (January 1989): 31. For further estimates of mortality rates see also Paul Berman, “The Practice of Obstetrics in Rural America, 1800-1860,” *Journal of the History of Medicine and Allied Sciences* 50, no. 2 (April 1995): 175-193; Maris A. Vinovskis, “Mortality Rates and Trends in Massachusetts before 1860,” *Journal of Economic History* 32, no. 1 (March 1972): 130. Judith Walzer Leavitt argues that improvements in obstetrics have been quite recent: by 1930 there was still roughly one maternal death per 150 births. See Leavitt, *Brought to Bed*, 23-26.

Custis Lewis most likely spoke for many women when she wrote that “death has ever been more terrible to me in *that* shape than in any other.” So fearful was she of the dangers of childbirth that she earnestly prayed that her daughter would never become a mother.⁹⁵ Another woman, pregnant for the first time, wrote to her sister, “my dear Jane how can I ever get through [...] I feel as though I would rather die than bear so much pain. What a fool a girl is ever to get married, if I should be so fortunate as to have a daughter my first lesson to her shall be to despise everything that wears breeches.”⁹⁶ In their diaries and letters women constantly reported either the survival or death of friends and family in childbirth. Rebecca Shoemaker recorded in 1785 that “Becky Jones, Late Waln, was removed almost as Suddenly, to the great grief of her frds. She was ill but 48 hours & died yesterday in child Bed.”⁹⁷ Responding to the difficult labor of a friend, Sarah Logan Fisher wrote that her friend’s experience “made me very thoughtfull [sic] about myself, the frequent disagreeable acute pain that I feel, often makes me anxious about the event.”⁹⁸ A pregnant woman could not help but think of her own body and her own mortality when a friend lost her life in childbed. Ann Head Warder, a relatively recent immigrant from England to Pennsylvania, was so anxious about childbirth that she came to believe she could never survive it unless she returned to England to give birth: “an idea had strongly impressed my Mind,” she wrote, that “if I staid here to be confined I should never git though it.” She braved the arduous voyage back to England and survived to

⁹⁵ Eleanor Parke Custis Lewis, March 19, 1826, *George Washington’s Beautiful Nelly*, 175.

⁹⁶ Sidney Carr to Jane Randolph, quoted in Jan Lewis and Kenneth A. Lockridge, “Sally has been Sick,” 7.

⁹⁷ Rebecca Shoemaker, July 31, 1785, p. 366, Rebecca Shoemaker, Papers 1780-1786, HSP.

⁹⁸ Sarah Logan Fisher Diary, July 14, 1783, p. 47, Sarah Logan Fisher Diaries, HSP.

return to Pennsylvania with the new child.⁹⁹ The threat of death was particularly gruesome in the context of childbirth. Women might die from uncontrolled hemorrhage, from raging infection, or from a host of internal injuries. Death might come during the agonies of a difficult childbirth or sneak up on a mother in the following days. A woman's body could become her greatest enemy.

Perhaps not surprisingly, physicians recorded some of the most painful and dramatic circumstances of childbirth because they were often called in specifically to deal with the worst complications. Their narratives traced the chronology of events and focused on their interventions, for this was both a professional and a scientific narrative. In 1805 the physician James Anderson described the case of Esther Russel, one of his alms-house patients:

Four or five days previously to her delivery the Labias became most monstrously distended . . . For the relief of which, she had taken several diuretics, but to no purpose, so that we were under the necessity of puncturing the Labias, when the Catheter was introduced and a considerable quantity of water taken at each operation, which was once and sometimes in the day for four days before her delivery of the child. During the last mentioned period she was greatly afflicted with Peurperal convulsions, for which she received treatment as the case seemed to indicate—On the 11 of August after passing above 24 hours in the most deplorable situation; being obliged from the overdistention to ly on her back with the lower extremities drawn up towards her body, and knees considerably apart from each other. Nor was she able with the greatest exertions to move out of that position 'till after the delivery of a Large child which proved to be very tedious & painful, owing to the causes above stated. Before this painful process was completed, Gangrene made its appearance on the punctured parts of the Labias, which spread over nearly one half of them.¹⁰⁰

The mother did eventually recover from these gruesome circumstances, thus justifying the interventions of the attending physicians. Being the record of a physician, this narrative offered a more scientific inspection of the maternal body than women's birth

⁹⁹ Ann Head Warder, July 15[?], 1787, vol. 10, Ann Head Warder Papers, HSP.

¹⁰⁰ James Anderson, Case of Esther Russel, August 1805, Casebook 1804-1806, HSP.

stories. It also identified the physician as the hero of the narrative whose interventions eventually resulted in the complete recovery of the patient. How would Russel have described her experiences? Would she have simply asserted that she suffered greatly and had a very hard time, and then left the details to the obscurity of memory? Unfortunately, we do not have a record of her words or recollections, but it seems unlikely, given the patterns of other women's narratives, that her story would have closely resembled the physician's in either focus or detail.

Although Esther Russel's story came from the pen of a physician, such narratives can provide a small window into the experiences of women who did not, or could not, leave a written story of their own. Even the briefest medical records sometimes offered a glimpse of the mother's thoughts and attitudes. Samuel Worcester Butler, a physician in New Jersey, left the following note in his record book for 1849-1858:

Was with this case all night. A short thick set, contrary, Irish woman who fought like a tigress. It was a case of Breech presentation, & the cord prolapsed & no effort she would let me make, enabled me to reduce it. Consequently the child died from strangulation. I had finally to use the forceps. The child was not quite as large as the mother (!)—but was very large, & well formed.¹⁰¹

The mother in this case evidently objected—whether on principle or because of fear or pain—to the proposed interventions of the physician. It seems that in the end, for good or ill, she was able to claim at least some control over the physician's interactions with her body and to leave the impression that she was a physically strong woman with a definite opinion about what ought and what ought not to be done during her delivery. But what kind of a narrative did she tell herself and loved ones? She might have described the loss of the baby as inevitable and insisted that the physician should have spared her the shame and pain of his interventions. Women were not passive patients, and they criticized

¹⁰¹ Samuel Worcester Butler Record Book, Case 15, January 17, 1851, Record Book, 1849-1858, HSP.

physicians when they saw fit, asserting their own priorities and their familiarity with their bodies. Butler recorded another case a few years later in which “the labor was protracted, and the pains severe. The mother was very desirous to take chloroform, but I did not think best to administer it.”¹⁰² Here we see not only the developments in medical technology—the availability of chloroform for childbirth—but also the mother’s knowledge of available treatments and her strong desire to transform the physical experience of childbirth by avoiding some of the expected pain.

Indeed, by 1850 many women were aware and desirous of the possibility of anesthetized childbirth. On January 19, 1847, the Scottish obstetrician James Young Simpson administered ether to ease the delivery of a woman with a deformed pelvis. This was the first known use of anesthesia in childbirth and it quickly prompted debates on both sides of the Atlantic about the advisability of tampering with the pain of childbirth. Physicians such as the American Charles Meigs thought that anesthesia interfered with the natural process of childbirth, but such ideas were soon overshadowed as physicians such as Walter Channing became proponents of anesthetized childbirth and women became vocal in demanding it.¹⁰³ Fanny Appleton Longfellow was the first American woman to give birth under the influence of ether on April 7, 1847, and she immediately became a champion of anesthetized birth. After the birth she wrote to family, explaining,

I am very sorry you all thought me so rash and naughty in trying the ether. Henry’s faith gave me courage, and I had heard such a thing had succeeded abroad, where the surgeons extend this great blessing much more boldly and

¹⁰² Samuel Worcester Butler Record Book, Case 28, June 28, 1857, Record Book, 1849-1858, HSP

¹⁰³ For more on the discovery and use of anesthesia, see for example Donald Caton, *What a Blessing She Had Chloroform: The Medical and Social Response to the Pain of Childbirth from 1800 to the Present* (New Haven: Yale University Press, 1999); Martin S. Pernick, *A Calculus of Suffering: Pain, Professionalism and Anesthesia in Nineteenth-Century America* (New York: Columbia University Press, 1985); Jacqueline H. Wolf, *Deliver Me From Pain: Anesthesia and Birth in America* (Baltimore: Johns Hopkins University Press, 2009).

universally than our timid doctors. Two other ladies, I know, have since followed my example successfully, and I feel proud to be the pioneer to less suffering for poor, weak womankind. This is certainly the greatest blessing of this age, and I am glad to have lived at the time of its coming. . .¹⁰⁴

The enthusiasm for anesthetized childbirth on the part of both women and many physicians shows that it may have prompted a turning point in ideas about childbirth. Indeed, further research in women's personal writing after 1850 could reveal gradual changes in the ways women represented the physicality of childbearing as the possibility of painless birth became more common, influencing both the attitudes toward childbirth and the lived experience of it.

But although there were gradual changes in the practice of childbirth mid-eighteenth century to the mid-nineteenth, the birth stories women left behind during this period underwent little change. Across the generations women used similar stock phrases and narrative structures to indicate what kind of a delivery they experienced and its outcome while maintaining a proper distance from the messiness of corporeality. But women who witnessed or experienced particularly painful or frightening births wrote with greater candor about these events. Pain forced the body to become more prominent both in lived experience and in the text. Most women were matter of fact about the physical trials of childbearing. Though they might fear death and debility, there was little they could do to change the possible outcome. As Elizabeth Drinker wrote during the confinement of her daughter, "There was a time, that if either of my beloved Children were in the Situation that my dear Sally is at present, I could not have found in my heart to have made a memorandum; is it that as we grow in years our feelings become blunted

¹⁰⁴ Longfellow, *Mrs. Longfellow: Selected Letters*, 129-130.

and Callous? Or does pain and experience cause resignation?”¹⁰⁵ Writing then in her sixtieth year, Elizabeth Drinker had borne nine children and witnessed many births; she knew intimately the physical strength required of birthing mothers and the pain they endured. Experience no doubt did bring a certain degree of resignation.

The textual evidence illuminating women’s physical lives as mothers in the eighteenth and nineteenth centuries is often fragmentary at best, offering fleeting glimpses of a panoply of experiences that shaped the life cycles of most adult women. In spite of the often terse and incomplete nature of women’s childbearing stories, taken together, women’s letters, diaries, and life stories provide a rich well of information testifying to the extent to which their lives and identities were shaped by the repeated rhythms of pregnancy, childbirth, and childrearing. They saw their life histories in the number of pregnancies endured, the number of children borne, and the changes these experiences wrought on their bodies. For some women these events represented a history of joy and completion, but many women became mothers under the shadow of fear, suffering, danger, and coercion. The testimonies of enslaved women emphasize that their bodies represented a battleground on which they fought to embrace or reject motherhood on their own terms. Even more privileged women often struggled to reconcile the social and emotional rewards of motherhood with the physical work that they found at best tiresome, at worst terrifying. By recognizing the centrality of the body in women’s understanding of maternity, we acknowledge and validate the ambivalence that shaped many women’s attitudes toward motherhood.

¹⁰⁵ Elizabeth Sandwith Drinker, April 6, 1795, *The Diary of Elizabeth Drinker*, 1: 666.

Women's writings and stories about childbearing reveal the complex situation in which they found themselves as mothers. Middle-class and elite women in particular lived in a culture that valued women for their supposed physical delicacy and purity and their moral superiority. Genteel society valued restrained and orderly bodies that allowed the soul and the intellect to shine forth and define the individual. In short, women lived and bore children in a society that privileged the ethereal over the material. How then could mothers build an identity around the messy and unpredictable physicality of reproduction? The tension between lived experience and convention appears in the language and patterns of women's personal writings. Women gave account of their reproductive lives by deploying a conventional genteel vocabulary that veiled the corporeality of childbearing. They wrote discreetly of being in a particular *situation* and wrote hopefully of the emotional pleasures of parenthood. But at times the physicality of childbearing broke through the barriers of convention and women wrote about their fears of pain and about scenes of suffering they had witnessed or experienced. Less dramatically, but more consistently, they also wrote matter-of-factly about the daily physical annoyances of childbearing that seemed at times to dominate their lives and thoughts. They saw motherhood as a profoundly physical experience and, although the physicality of childbearing did not meet the ideals of femininity and motherhood propagated by genteel American culture, they allowed the exigencies of the body to push them beyond polite convention. Although women often embraced the idealization of motherhood that characterized American culture beginning in the eighteenth century, they ultimately took their own physical experiences as the foundation of their identities as mothers.

Although literate women wrote with frequency and occasional vehemence about the experiences of maternity, there is no doubt that the richest stories were shared orally between women. Indeed, for many women, this would have been their only means of communicating the events of their lives to family and friends. Many women, moreover, were able to share in one another's reproductive lives by caring for friends and family members as they lived through pregnancy, childbirth, and childrearing. The shared physical experience of childbearing was an important marker of community and at critical times it brought women together into the same physical and emotional space. When the midwife Martha Ballard wrote in 1790 that "mrs White Sent for her women. They were with her all night," she attested to the importance of a community of mothers who would accompany women through the physical and emotional trials of childbirth and its aftermath.¹⁰⁶ These women recognized and defined themselves as mothers in terms of a shared experience of embodiment.

¹⁰⁶ Martha Ballard, October 8, 1790, *The Diary of Martha Ballard 1785-1812*, Robert R. McCausland and Cynthia MacAlman McCausland, eds. (Rockport, ME: Picton Press, 1992), 173.

CHAPTER TWO

The Tyrannical Womb and the Disappearing Mother: Medical Constructions of the Female Reproductive Body

“I am seeking to unravel a paradox: how is it that, especially in the matter of generation or reproduction, women’s bodies have disappeared?”¹

It is perhaps not surprising that childbearing women saw their corporeal experiences as the foundation of maternal identity; the bodies in question were their own, and the sensations and functions related to reproduction shaped nearly every day of their lives in both small and dramatic ways. Motherhood, as women lived it, was inescapably physical. Yet women were not the only ones who confronted the maternal body on a regular basis. Midwives, of course, were regular companions of childbearing women. Often well-known and trusted friends and neighbors, they tended to women’s physical and emotional needs during and after childbirth. But by the mid-eighteenth century, when this study begins, physicians increasingly found themselves called in to deal with difficult deliveries or with complications stemming from childbirth. They brought surgical instruments, such as forceps, and medicines such as laudanum and ergot that seemed to promise women and their families the best of modern medical science—though these medical technologies could also cause complications and destruction.² For these men, the

¹ Roberta McGrath, *Seeing Her Sex: Medical Archives and the Female Body* (Manchester: Manchester University Press, 2002), 3.

² The renowned English midwife Elizabeth Nihell, a virulent critic of “man midwives” noted that women believed the instruments that physicians used could save them when the less intrusive practices of female midwives could not. Unfortunately, she argues that instead of salvation, most women found destruction at

female body—particularly during pregnancy and in the throes of childbirth—often appeared mysterious and unpredictable. Young physicians received relatively little hands-on training in obstetrics and their first forays into the professional practice of midwifery often felt like expeditions into uncharted territory.³ Caring for the maternal body was traditionally women’s work, and medical men found themselves placed in a position of uncomfortable physical intimacy with women whose bodies seemed simultaneously vulnerable and dangerous.

Physicians sought the reassurance of the most up-to-date medical knowledge to make sense of childbearing and regulate their relationship to the process. Historically the purview of female midwives, the practice of obstetrics gradually became part of professional medicine in the eighteenth century and “man midwives” began to publish lectures and textbooks detailing the anatomy and processes of reproduction. British physicians, whose knowledge and practice provided the foundation for the development of the American medical profession, professionalized obstetrics in the early eighteenth century before their American colleagues. Thus in the mid-eighteenth century American practitioners such as William Shippen, of Philadelphia, depended on British texts and British training. But by the beginning of the nineteenth century American physicians had established their own medical schools and were beginning to publish texts that drew explicitly on their British (and occasionally French, German, and Italian) predecessors.

the hands of physicians and their instruments. She writes, “through the prevalence of groundless fears, and of imaginary dangers they have run into real ones, and have sometimes found their death precisely where they sought their life; and not seldom where nature has even favored them enough in their labor, for them not to need any extraordinary ministry of art, the men have put them to cruel and dangerous tortures.” Elizabeth Nihell, *Treatise on the Art of Midwifery* (1760) (New York: The Classics of Obstetrics & Gynecology Library, 1994), 5.

³ Elizabeth Nihell mocked William Smellie, one of the preeminent British obstetricians, for teaching his students about childbirth by using a wooden model of a woman from whose belly they could remove a model uterus full of liquid and a wax doll fetus. See Nihell, *Treatise*, 50.

Thus this chapter examines a transatlantic body of medical literature that encompasses both the British texts that were used by American practitioners in the eighteenth century as well as the nineteenth-century texts that came from the pens of American physicians.

While women lived with the complete corporeal experience of childbearing and played the leading role in their own birth narratives, physicians writing and practicing in the mid-eighteenth century began to turn their attention away from the whole woman and to the inner workings of female reproduction. In doing so, they made the womb the focus of their studies and eventually the main character in their medical texts. This literal and rhetorical dissection of the reproductive body distanced the woman from her body and largely served to erase her from the medical text. As the uterus became textually more prominent, the mother herself became increasingly invisible. By the nineteenth century, when American physicians took up the task of producing their own medical literature, it was not merely medical rhetoric that obscured the presence of the mother. Medical writers also began to emphasize specific practices meant to regulate the interactions between physician and female patient, forcing the woman's body to remain concealed in real life as well as in the text.

The causes of this shift were two-fold. First, the growth of scientific knowledge and advances in the study of human anatomy more generally gave medical practitioners new command over the internal parts of the body. Lars Schroeder has written that by the antebellum period increasingly specialized knowledge in all medical fields caused human physiology to be "broken down into small bits that increasingly rendered the body invisible."⁴ In obstetrical texts, the pelvis and uterus could be measured, labeled, and

⁴ Lars Schroeder, *Slave to the Body: Black Bodies, White No-Bodies and the Regulative Dualism of Body-Politics in the Old South* (Frankfurt: Peter Lang, 2003), 59.

diagramed with a neatness that belied the messiness of reproduction. Second—and most important for this chapter—discomfort with female sexuality and the challenge to female modesty created by the presence of male practitioners in the lying-in chamber led physicians to hide the external female body in their texts and in their practice.

Enthusiasm for scientific knowledge collided with notions of modesty and sexual propriety, resulting in a profound ambivalence on the part of medical writers toward the reproductive body. Both an object to be explored and regulated and something to be hidden from the eyes of the male practitioner, the female body represented a host of problems both medical and moral. Making the womb the main character in medical texts helped to ease these tensions.

The invisibility of the female body in medical texts also had important class and race dimensions. By the nineteenth century physicians' fixation on the uterus had transformed into a firm understanding of reproduction as a pathological process for “civilized” women whose bodies were not vigorous or animal enough to withstand pregnancy and childbirth. The refined woman became the normative figure in the medical text, the frail patient needing to be rescued from her unpredictable and mighty uterus. Carefully constructing their rhetoric and practice with this ideal in mind, physicians were able to emphasize both the propriety and necessity of professional obstetrics. They emphasized their delicacy as practitioners by veiling the body of the mother, thus creating a discreet distance between their male bodies and that of the (presumably virtuous) female patient. They emphasized the pathological nature of childbearing in order to make a professional place for themselves as badly needed saviors of frail womanhood. More perniciously, physicians repeatedly insisted that only savage (non-white) and unrefined

(lower-class) women could successfully navigate the perils of childbearing. These women neither needed nor merited the tender mercies of the physician. Instead, their bodies could become useful sites of knowledge to be probed with impunity. Thus the mother was never a race- or class-neutral figure in medical texts and practice, for she was treated both textually and in actual practice according to these distinctions. These aspects of obstetric literature highlight the fact that medicine speaks not only to physiological realities, but also to a host of assumptions about social roles and relationships.

Indeed, the changing role of the uterus in medical representations of the reproductive body indicates that these texts can tell us as much about common assumptions regarding gender roles, race and class differences, and sexual ideology as they do about concrete medical knowledge and practice.⁵ They signify, in the words of Ludmilla Jordanova, that “scientific and medical ideas cannot be separated from the language in which they are expressed.”⁶ Keeping this in mind, the conclusions in this chapter are based on close readings of medical books as cultural, rather than exclusively medical, texts. The choices medical writers made in depicting the female body and the processes of reproduction, and even the grammatical structure of their sentences, reveal a great deal about their attitudes toward women as physical and reproductive beings.

Anglo-American medical representations of the female reproductive body showed that it was deeply problematic on both a medical and a cultural level. Concerns about

⁵ A note on terminology: Although the focus of this dissertation is the maternal body, in this chapter I will refer to the “female reproductive body” to signify the medical perspective that is the focus here and to correspond with physicians’ reluctance to acknowledge the mother who was always part of the reproductive process. In terms of anatomy, I will use the terms *uterus* and *womb* interchangeably. Medical writers in the eighteenth and nineteenth centuries tended to use *womb* more frequently and some earlier writers also used *matrix*, or *matrice*, after the French. *Uterus* came from the Latin and was also used in medical literature.

⁶ Ludmilla Jordanova, *Sexual Visions: Images of Gender in Science and Medicine between the Eighteenth and Twentieth Centuries* (Madison: University of Wisconsin Press, 1989), 6.

female sexuality and uncertainty about the physiology of the reproductive body meant that eighteenth- and nineteenth-century authors were never at ease with the mother as a corporeal agent and accordingly turned their attention to plumbing the mysteries of disembodied reproductive fragments. Medical writers of course could not simply ignore the whole body and its messiness—they were after all responsible for promoting health and saving lives, an undeniably body-focused business—but they could use visual and written representations to separate the woman from her body in order to deal with her corporeality with greater scientific ease and less embarrassment. Medical practitioners writing about some of the most intimate experiences of childbearing women were able to create an authoritative narrative which articulated a new, more passive role for the mother that stood in tension with women's lived experiences of childbearing.

The study of midwifery as a science began in France in the seventeenth century, but did not make its way to England until the beginning of the eighteenth century. Rooted in the burgeoning science and philosophy of the Enlightenment, the medical profession pursued an understanding of the body as measurable and mechanical. Physicians in America inherited a host of texts and practices from the medical profession in England, Scotland, and France. Given the transnational nature of the early medical profession, it is hardly surprising that some of the most popular, enduring, and influential medical texts were originally published overseas and came to influence the development of midwifery as part of the medical profession in America. Nicholas Culpepper's *Directory for Midwives* (1653) was printed for over a century in London alone and was referenced by American writers even in the nineteenth century. *Aristotle's Masterpiece*, first published

in London in 1684, quickly became the most popular English-language medical and vernacular guide to sexuality, conception, pregnancy, and childbirth and went through as many as thirty editions in England and America.⁷ These medical texts offered relatively comprehensive information about the cycles of reproduction and represented the maternal body as sexual and robust.

The social, cultural, and political transitions that marked early modern England had a deep impact on the medical ideas and practices that physicians eventually exported to America in the eighteenth century. Mary Fissell has argued that the shift to Protestantism in sixteenth-century England transformed ideas about the female body. Whereas vernacular culture in Catholic England tended to link the female reproductive body to notions of divinity through the figure of the Virgin Mary, in the seventeenth century it lost this divine connection and came to be seen as disorderly, corrupt, and dangerous. Previously, English women and men saw the womb as a marvelous organ that participated in the divine work of procreation. But in the seventeenth century the womb “went bad” and it was seen as capable of producing monsters, in addition to its numerous other chaotic properties.⁸ These ideas were neither new nor uniform. Indeed, one of the most challenging aspects of making sense of medical and vernacular knowledge is the constant recycling of ideas from antiquity through the nineteenth century, making it difficult to mark clear shifts or innovations in content and rhetoric. The medical

⁷ Nicholas Culpeper, *Directory for Midwives* (London: Printed by Peter Cole, 1653). There are several versions and many editions of *Aristotle's Masterpiece*. See for example *Aristotle's Compleat Masterpiece*, 26th ed. (London, 1755). Online. *Readex: Early American Imprints, Series 1: Evans*. For more on *Aristotle's Masterpiece* and its multiple versions, see Mary Fissell, “Hairy Women and Naked Truths: Gender and the Politics of Knowledge in ‘Aristotle's Masterpiece,’” *William and Mary Quarterly* 60, no. 1 (January 2003): 43-74.

⁸ Mary Fissell, *Vernacular Bodies: The Politics of Reproduction in Early Modern England* (Oxford: Oxford University Press, 2004). See Fissell's introduction for an outline of these key transitions in ideas about female reproduction.

profession was hardly uniform in its ideas and practices, and many interpretations, both new and old, coexisted at any given time.

The development of eighteenth-century medicine in England, America, and on the Continent inherited much from the sixteenth and seventeenth centuries, but it was also closely linked to the growth of Enlightenment philosophies about nature and science. The eighteenth century was an era of ideological upheaval in which ideas about the nature of men and women were debated and reconfigured. One of the paradoxes of the Enlightenment was that proclamations of natural human equality went hand in hand with a philosophy of sexual difference that radically divided women and men by highlighting intellectual, moral, and sexual difference. Scientific and philosophical debates about women's nature took center stage beginning in the 1750s. Earlier understandings of sexual difference were based on a one-sex model in which women's organs were not unique but merely the inferior inverse of men's. But influential Enlightenment thinkers such as Denis Diderot and Jean Jacques Rousseau recast female identity as being rooted in women's unique reproductive organs and in a sentimental vision of Nature.⁹ As the scholar Ornella Moscucci has written, "woman was dominated by her sexual functions, the physiology and pathology of her reproductive system provided the key to understanding her physical, mental, and moral peculiarities." Women were closer to nature, more emotional, sensual, and moral, and had a more sensitive nervous system

⁹ For more on the association of "Woman" and "Nature" in the late-eighteenth century see Jordanova, *Sexual Visions*, esp. chapter 4. For a discussion of the endurance of Galen's one-sex model see Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to Freud* (Cambridge: Harvard University Press, 1990).

which subjected them to constant sensory overload, thus precluding abstract intellectual thought.¹⁰

Enlightenment thinkers insisted repeatedly and explicitly that woman was defined by her womb. In his essay *Sur les femmes*, Diderot wrote of hysteria and disorder emanating directly from the uterus: “Woman carries within herself an organ subject to terrible spasms, ruling her and exciting in her imagination phantasms of all sorts. . . It is from the organ peculiar to her sex that all kinds of extraordinary ideas emerge.”¹¹ His anxiety about this organ was hardly subtle when he described how “The woman dominated by hysteria feels I know not what infernal or celestial emotions. At times she makes me shiver. I have seen and heard in her the raging of the ferocious beast which is a part of her.”¹² His descriptions were reminiscent of Hippocrates’s theory of the wandering uterus, which explained that “the *Vulva* and *Matrix* of woman is also an animal ravenous after generation, which being baulked of its desire for any length of time, is so enraged at the disappointment and delay, that it wanders up and down through the body, obstructing the circulation, stopping the breath, producing suffocations, and all

¹⁰ Ornella Moscucci, *The Science of Woman: Gynaecology and Gender in England 1800-1929* (Cambridge: Cambridge University Press, 1990), 7. For a discussion of Enlightenment ideas of sexual difference see also Marta Cavazza, “Women’s Dialectics, or the Thinking Uterus: An Eighteenth-Century Controversy on Gender and Education,” in *The Faces of Nature in Enlightenment Europe*, Lorraine Daston and Gianna Pomata, eds. (Berlin: BWV-Berliner Wissenschafts-Verlag, 2003), 237-257; Lieselotte Steinbrügge, *The Moral Sex: Woman’s Nature in the French Enlightenment*, translated by Pamela E. Selwyn, (New York: Oxford University Press, 1995).

¹¹ Quoted in Steinbrügge, *The Moral Sex*, 44. The original reads, «La femme porte au-dedans d’elle-même un organe susceptible de spasmes terribles, disposant d’elle, et suscitant dans son imagination des fantômes de toute espèce . . . C’est de l’organe propre à son sexe que partent toutes ses idées extraordinaires. » From Denis Diderot, *Sur les Femmes*, in *Oeuvres*, André Billy, ed. (Paris: Gallimard, 1951), 952.

¹² Quoted in Steinbrügge, *The Moral Sex*, 44. The original reads, « La femme dominée par l’hystérisme éprouve je ne sais quoi d’infernal ou de céleste. Quelquefois, elle m’a fait frissonner. C’est dans la fureur de la bête féroce qui fait partie d’elle-même, que je l’ai vue, que je l’ai entendue. » From Denis Diderot, *Sur les Femmes*, in *Oeuvres*, André Billy, ed. (Paris: Gallimard, 1951), 953.

manner of diseases.”¹³ The female body was consistently portrayed as alternately excessive, lacking, or regrettably inverted; man’s body was, as it had been for centuries, the universal human norm.¹⁴ If Enlightenment philosophy was predicated on the supremacy of Reason, women were devalued by virtue of their internal physiology. But although they might lack reason, Enlightenment thinkers saw the female body as the source of women’s superior morality, for their nurturing capacity and emotionality suited them perfectly to the virtues of the private sphere and the task of biological and social reproduction. Thus the female body was inhabited by a paradox which cast it as moral, tender, and maternal, while always being a potential force of psychological, sexual, and social disorder.

Around the same time that these Enlightenment ideas made their way across the Atlantic to America, the medical profession also began to emerge in the colonies, joining science and philosophy in the practice of medicine. The professionalization of midwifery got off to a slower start in America than in England or on the Continent, for until the mid-eighteenth century there were no schools for training male midwives and obstetrics remained exclusively in the hands of female midwives. It was not until 1762 that William Shippen returned to Philadelphia from medical training in London and Edinburgh to become the first American lecturer in midwifery, though his first course attracted only ten pupils.¹⁵ American practitioners relied on knowledge and textbooks generated abroad

¹³ Hippocrates’s theory as described by William Smellie, *Treatise on the Theory and Practice of Midwifery*. 5th ed. (London: printed for D. Wilson and T. Durham, 1766), xv.

¹⁴ See for instance Mary Fissell’s discussion of Nicholas Culpeper’s midwifery manual. Published in 1651, it was the first such text to treat male sexual organs as well as female. Fissell notes that by first discussing male organs, he established men’s bodies as the norm from which women’s bodies deviated. See Fissell, *Vernacular Bodies*, 143.

until the nineteenth century, when American physicians began to produce their own medical textbooks and journals. Only in 1807 did Samuel Bard publish the first American midwifery textbook, which followed closely on the heels of Valentine Seaman's course of lectures to female midwives, published in 1800.¹⁶ Even by the nineteenth century, when the United States had its own prestigious medical institutions and literature, the international scope of journals such as the *American Journal of the Medical Sciences* attested to the rapid and expansive communication of medical knowledge and practice across the Atlantic.¹⁷

Thus in the second half of the eighteenth century in America physicians began to enter the lying-in chamber. Midwifery had been in the charge of a collective of female midwives, friends, and family members; as Richard and Dorothy Wertz write, "childbirth depended for its success upon more than the medical transaction between a woman and a midwife; it required the practical aid of kin and friends who not only attended the birth . . . but took over the household chores during the lying-in period."¹⁸ Female midwives

¹⁵ Wooster Beach, *An Improved System of Midwifery, adapted to the reformed practice of medicine* (New York: Baker and Scribner, 1850), 12.

¹⁶ Samuel Bard, *A Compendium of the Theory and Practice of Midwifery, Containing Practical Instructions for the Management of Women During Pregnancy, in Labour, and in Child-bed* (New York: Collins and Perkins, 1807). Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*. Samuel Bard (1742-1821) was educated in London and Edinburgh and returned to the States to promote the professionalization of American medicine. He founded the first medical school in New York, as well as what is now the Columbia University College of Physicians and Surgeons. For more on his life and work, see Rev. John McVickar, *A Domestic Narrative of the Life of Samuel Bard, M.D. LL.D., Late President of the College of Physicians and Surgeons of the University of the State of New-York* (New York, 1822). Valentine Seaman, *The Midwives Monitor and Mothers Mirror: Being Three Concluding Lectures of a Course of Instruction on Midwifery* (New York: Isaac Collins, 1800). Online. *Readex: Early American Imprints, Series 1: Evans*. Valentine Seaman (1770-1817) was another New York physician and a contemporary of Bard.

¹⁷ The *American Journal of the Medical Sciences* and others medical journals testified to the importance of the transnational medical community by printing articles, reviews, and brief notices reporting medical developments abroad, important new medical texts, and interesting cases.

¹⁸ Richard W. Wertz and Dorothy C. Wertz, *Lying-In: A History of Childbirth in America* (New Haven: Yale University Press, 1989), 4.

received no formal training, but learned their art from experienced women and from observation and practice. In colonial America midwives were important women in the community and sometimes received such benefits as rent-free homes or generous salaries from the colonial governments, in exchange for their faithful tending of women in need.¹⁹ But although the professionalization of obstetrics (a term not actually adopted until the nineteenth century) brought men into the birthing chamber, this development did not immediately change the overwhelmingly female social nature of childbirth.²⁰ Indeed, women's own writings show that childbirth continued to be a social affair far into the nineteenth century, even after middle-class families began routinely to hire the services of doctors.

But here I am concerned less with childbirth practices, which have been amply and eloquently recorded by other scholars, than with the representational and rhetorical transitions in the medical literature which guided Anglo-American medical professionals. Leading up to the mid-eighteenth century, medical texts offered readers a multifaceted vision of the mother and her body as simultaneously healthy, diseased, vigorous, miraculous, chaste, and sexual. The mother was a clear presence in these works, an actor in the processes of conception, pregnancy, and childbirth. Texts such as the English midwife Jane Sharp's *Midwives Book* (1671), which was the only English language

¹⁹ See Wertz, *Lying-In*, 8.

²⁰ For a comprehensive history of childbirth and obstetrics in America see Judith Walzer Leavitt, *Brought to Bed: Childbearing in America, 1750-1950* (New York: Oxford University Press, 1986). See also Catherine M. Scholten, "'On the Importance of the Obstetrick Art': Changing Customs of Childbirth in America, 1760 to 1825," *William and Mary Quarterly* 34, no. 3 (July 1977): 426-445; Catherine M. Scholten, *Childbearing in American Society, 1650-1850* (New York: New York University Press, 1985); Richard W. Wertz and Dorothy C. Wertz, *Lying-In: A History of Childbirth in America* (New Haven: Yale University Press, 1989). For a cultural analysis of the transition from female midwives to male physicians, see Lisa Forman Cody, "The Politics of Reproduction: From Midwives' Alternative Public Sphere to the Public Spectacle of Man-Midwifery," *Eighteenth-Century Studies* 32, no. 4 (Summer 1999): 477-495.

midwifery manual written by a woman to be published before 1700, offered childbearing women and practitioners a lively and explicit source of information about themselves and their patients.²¹ An image from Sharp's work offered a vision of the mother as healthy, lovely, and desirable while also displaying a growing scientific knowledge of the internal body (see fig. 2.1). Evoking classical conventions of female beauty, the mother was neither veiled nor fragmented and faceless, as she would become in later images, but showed a young, strong, and beautiful woman with nicely arranged curls, high plump breasts and shapely limbs, her vagina suggestively concealed by a flower. The woman's abdomen lay open like the petals of a flower to expose the womb and the position of the fetus with some medical accuracy. The figure of the woman combined science and culture in an easily legible way. She embodied a recognizable classical aesthetic that signified ideal feminine beauty, while the diagram of the fetus and placenta bespoke a growing understanding of reproductive anatomy. This image brought the mother into the text in a visible way, showing the reader that the womb was only one part of her body—albeit an important one.²²

²¹ For an analysis of gender and anatomy in Jane Sharp's text, see Caroline Bricks, "Stones Like Women's Paps: Revising Gender in Jane Sharp's *Midwives Book*," *Journal for Early Modern Cultural Studies* 7, no. 2 (Fall/Winter 2007): 1-27. See also E. Hobby, "'Secrets of the Female Sex': Jane Sharp, the Reproductive Female Body, and Early Modern Midwifery Manuals," *Women's Writing: The Elizabethan to Victorian Period* 8, no. 2 (2001): 201-212.

²² Jane Sharp, *The Midwives Book, or the Whole Art of Midwifery Discovered* (1671), in *The Early Modern Englishwoman: A Facsimile Library of Essential Works*, Series II: *Printed Writings, 1641-1700*, Vol. 4: *Writings on Medicine*, Lisa Forman Cody, ed. (Aldershot: Ashgate Publishing Limited, 2002), n.p.



Figure 2.2. Jane Sharp, *The Midwives Book* (1671).

This illustration was also emblematic of the more open approach to female sexuality that characterized many early medical and vernacular texts. The woman in the image was youthful, beautiful, and obviously fertile. With her thighs parted, perky breasts rising above her belly, and her arms gracefully outstretched it would have been hard to ignore her potential sexual appeal. More significantly, the image embraced maternity and sexuality simultaneously, implying that the two went hand-in-hand. In some early texts, the womb itself was noted for its sexual voracity. As Thomas Raynalde, author of the first English language midwifery manual, wrote, “this Womb port doth naturally open itself, attracting, drawing, and sucking into the womb the seed by a vehement and natural desire.” The uterus *desired* to be pregnant. Raynalde did feel some scruples in discussing such matters, for he feared those who “shall condemn and utterly reprove the whole

matter; some alledging that it is shame, and other some, that it is not meet nor fitting such matters to be treated of so plainly in our Mother and vulgar language, to the dishonour (as they say) of Womanhood, and the derision of their wont secrets.”²³ Raynalde’s fears were perhaps not unfounded; as Peter Wagner writes, “Medical books on midwifery, procreation, and venereal disease served as a kind of ‘ersatz’ for hard-core pornography,” and some readers must certainly have found such descriptions and illustrations titillating.²⁴

Raynalde was not the only one to show concern about the possible improper uses of medical books. Historian Helen Lefkowitz Horowitz recounts that in 1744 the celebrated American minister and theologian, Jonathan Edwards, conducted an investigation into rumors that men in Northampton, Massachusetts, were reading a copy of the vernacular medical text *Aristotle’s Masterpiece* and making lewd comments to women. Different versions of *Aristotle’s Masterpiece* contained varying amounts of sexually explicit, even bawdy, material. The men caused trouble with their provocative claim to local women that “we Know as much about ye as you and more too.”²⁵ This incident illustrates that in the eighteenth century knowledge of women’s bodies could be a dangerous thing because it was seen to be so secret. Only women—and perhaps physicians—could properly be privy to such mysteries. Knowledge was indeed a powerful thing and improper use of it could lead men to shame and abhor women.

²³ Thomas Raynalde’s work was a 1540 translation from Latin that became the first English language childbirth manual. See Thomas Raynalde, *The Birth of Mankind, Otherwise Called, the Woman’s Book* (London, 1654), 28, 8.

²⁴ Peter Wagner, *Eros Revived: Erotica of the Enlightenment in England and America* (London: Secker & Warburg, 1988), 295.

²⁵ Helen Lefkowitz Horowitz, *Rereading Sex: Battles over Sexual Knowledge and Suppression in Nineteenth-Century America* (New York: Vintage Books, 2003), 22.

Nevertheless, medical writers thought that the benefits of a clear explanation of sexual matters outweighed possible disadvantages. Jane Sharp's text, for instance, was divided into six books, the first of which was devoted entirely to a minute description of the male and female reproductive organs and their functions during intercourse. "We women have no more cause to be angry, or be ashamed of what Nature hath given us than men have," Jane Sharp reassured her female readers, for "we cannot be without ours no more than they can want theirs."²⁶ Knowledge was an important tool for aiding women to live healthy reproductive lives. Sharp was also quite direct about female sexual pleasure, explaining that the clitoris "will stand and fall as the Yard doth, & makes women lustful and take delight in Copulation, and were it not for this they would have no desire nor delight, nor would they ever conceive."²⁷ Indeed, Sharp subscribed to the popular belief that conception could not occur without female pleasure and orgasm.²⁸

Aristotle's Masterpiece began with an even franker discussion of the mechanics of sexual intercourse, explaining the nature of women's internal sexual organs and their specific role, including the "neck of the Womb. . . which receives the Man's Yard like a Sheath; and that it may be dilated with the more Ease and Pleasure in the Act of Coition, it is sinewy and a little spongy."²⁹ In case medical explanations were not sufficiently clear, the author included several verses suggestive of the pleasures in store for married

²⁶ Sharp, *Midwives Book*, 33.

²⁷ Sharp, *Midwives Book*, 33, 43-44.

²⁸ Laqueur has argued that it was not until the end of the Enlightenment that female orgasm came to be seen as irrelevant to conception. He writes that "orgasm was relegated to the realm of mere sensation, to the periphery of human physiology—accidental, expendable, a contingent bonus of the reproductive act." In consequence, female sexual passivity and passionlessness became an actual and ideological possibility. See Laqueur, *Making Sex*, 3.

²⁹ *Masterpiece* (1755), 17.

couples.³⁰ The inclusion of so much sexually explicit material alongside important medical advice about pregnancy and childbirth demonstrates that early medical experts understood motherhood and female sexuality as compatible, even mutually dependent, for

Nature to her Children is so kind,
That early they those Inclinations find,
Which prompt them on to propagate Mankind.
Hence 'tis a Virgin her Desires can't smother
But restless is, till she be made a Mother.³¹

Sexual desire was a necessary gift from nature, for it was only by these irresistible urges that a young woman would fulfill her social role by becoming a mother. Moreover, many authors argued that a lack of sexual fulfillment could cause disease in unmarried virgins and widows, thus testifying to the importance of sexual desire in constructions of health and woman's nature.

Female sexuality did not remain a subject for frank and bawdy discussion in medical manuals, however, for as Ruth Perry writes, "the maternal rather than the sexual purposes of women's bodies were increasingly foregrounded in medical literature."³² Even the cheerfully bawdy *Aristotle's Masterpiece* became increasingly modest when it came to sexual matters. Over the course of more than a century, *Aristotle's Masterpiece* was printed numerous times in three principal versions. The earliest iteration, *Aristotle's Compleat Masterpiece* (reprinted as late as 1755), offered a more explicit portrait of female sexuality than a version printed in 1788. Although it embraced female sexuality as

³⁰ *Masterpiece* (1755), 24, 27.

³¹ *Masterpiece* (1755), 29.

³² Ruth Perry, "Colonizing the Breast: Sexuality and Maternity in Eighteenth-Century England," *Journal of the History of Sexuality* 2, no. 2 (October 1991): 216.

healthy and necessary, this later iteration showed more reserve, lacking the sexually explicit verse and frequent references to the pleasures of intercourse that made the earlier version appeal to those with a more prurient interest in the female body.³³ The substantial differences between earlier and later versions of *Aristotle's Masterpiece* show that sexuality came to be seen as less appropriate and less relevant during the second half of the eighteenth century than in the late seventeenth century when *Aristotle's Masterpiece* was originally written. With the entry of men into the obstetrics profession, moreover, the separation between sexuality and maternity achieved an urgent practical aim by allowing men to participate with propriety in the formerly female domain of childbirth.

By the turn of the nineteenth century, medical writers showed a marked reluctance to discuss or even acknowledge women's sexual activity and pleasure as part of the reproductive process. In his course of lectures published in 1800, Valentine Seaman explained that, "The peculiar manner in which conception takes place, being a matter more of curiosity than of real utility, we shall omit at present any attempt to investigate."³⁴ Whereas *Aristotle's Masterpiece* had introduced intercourse and conception as the first and most crucial steps in reproduction, Seaman managed to describe the location and characteristics of the clitoris and reproductive organs without mentioning their role in sexual pleasure and intercourse. Although other physicians were less blatant in their dismissal of sexuality, they likewise included only the briefest mention of sexual pleasure in their medical texts. They tended coyly to evade the

³³ The third version became the basis for the first known American edition (Boston 1766), as discussed in Mary Fissell, "Hairy Women and Naked Truths: Gender and the Politics of Knowledge in *Aristotle's Masterpiece*," *William and Mary Quarterly* 60, no. 1 (2003): 43-74. My comparisons are based primarily on two editions, one printed in 1755 and the other in 1788 (*Aristotle's Master Piece Completed. In two parts*. New York, 1788), which differ substantially in content.

³⁴ Seaman, *Midwives Monitor*, 62.

question by writing that “it is supposed” that the clitoris is a site of sexual pleasure in women.³⁵ In consequence, these later medical texts quickly bypassed conception and restricted their representations of the reproductive body to pregnancy and delivery, processes in which the uterus might be given a leading role, allowing physicians to avoid the immodest possibilities of sexuality.³⁶

In spite of, or perhaps because of, their growing dismissal of sexuality, physicians in the eighteenth century gloried in their steadily growing knowledge of the internal functions of the female body. They marveled at the capabilities of the uterus even as they were horrified by its effects on the female body and psychology. Writing in 1751, the British physician John Burton described with enthusiasm how

This Cannal (*Vagina*) leads to that great Nursery of Mankind, the Womb, contrived for the Reception and Sustenance of the *Foetus*; which may very justly be said, With Regard to its Substance and Structure, to be as extraordinary a Piece of Mechanism as any in the whole Body.³⁷

Burton combined an older sense of the uterus as marvelous and miraculous with a new understanding of reproduction as a mechanical process that could be studied and measured. William Smellie, a contemporary of Burton and one of the most important figures in the history of obstetrics, published a *A Sett of Anatomical Tables* in 1754, which exemplified the mid-century turn to the internal body by envisioning the female

³⁵ See for example William Potts Dewees, *A Compendious System of Midwifery, Chiefly Designed to Facilitate the Inquiries of Those who May be Pursuing this Branch of Study* (Philadelphia: Carey and Lea, 1832), 46; and Thomas Denman, *An Introduction to the Practice of Midwifery*, Vol. 1 (New York, 1802), 27.

³⁶ This shift in medical discussions coincides with the shift to an ideology of female “passionlessness,” as outlined by Nancy F. Cott in “Passionlessness: An Interpretation of Victorian Sexual Ideology, 1790-1850,” *Signs* 4, no. 2 (Winter 1978): 219-236. Whether this notion of passionlessness permeated sexual practice as well as ideology is less certain, but it did have an important impact on the ways in which women’s nature was imagined in medical and cultural texts.

³⁷ John Burton, *An Essay Towards a Complete New System of Midwifery, Theoretical and Practical* (London, 1751), 11.

body as a series of disconnected and neatly presented parts. He was one of the first to offer a detailed description and measurement of the parts of the female pelvis, which he represented visually in isolation from the rest of the body and without reference to the mechanics of the body as a whole, anticipating the American physician Samuel Bard's claim that the pelvis was the only part of the skeleton that practitioners of midwifery needed to know.³⁸ Charles Delucena Meigs, an important physician and professor of midwifery in Philadelphia, later expressed a similarly neat and disembodied vision of the pelvis with a nautical metaphor: "In like manner, a ship sailing on the Black Sea may pass the upper Strait of the Dardanelles into the capacious Mediterranean, from whence it passes through the lower Strait of Gibraltar into the great ocean."³⁹ The pelvis was of interest only as the container of the female reproductive organs and as the structure through which the fetus must pass.

William Smellie and his successors sought to perfect their knowledge of human anatomy in the hopes of gaining a clearer understanding of the mechanics of reproduction. Samuel Bard published the first American midwifery textbook in 1807 and wrote that the practice of midwifery is "founded in a knowledge of the anatomy of the

³⁸ William Smellie, *An Abridgement of the Practice of Midwifery: and a Set of Anatomical Tables with Explanations. Collected from the Works of the Celebrated, W. Smellie, M.D.* (Boston: Printed and sold by J. Norman, 1786). Online. *Readex: Early American Imprints, Series 1: Evans*. Smellie (1697-1763) was a Scottish obstetrician who practiced medicine before eventually earning a degree from the University of Glasgow, attesting to the more informal nature of the medical profession in the first half of the eighteenth century. He was an early proponent of the use of forceps. For more on Smellie, see R. Hingston Fox, *William Hunter, Anatomist, Physician, Obstetrician (1718-1783), with Notices of his Friends Cullen, Smellie, Fothergill, and Baillie* (London, 1901), 29-32.

³⁹ Charles D. Meigs, *Obstetrics: The Science and the Art* (1849) (Philadelphia: Blanchard and Lea, 1852), 39. Meigs (1792-1869) began his medical studies in Georgia before graduating from the University of Philadelphia in 1815. He was appointed Professor of Midwifery at the Jefferson Medical College in Philadelphia in 1841 and held the post for 19 years. For more on Meigs, see Peter M. Dunn, "Professor Charles D. Meigs (1792-1869) of Philadelphia and persistent fetal circulation," *Archives of Disease in Childhood* 70 (1994): F155-F156.

parts concerned; of their structure, situation, and connections.”⁴⁰ The *parts concerned* were restricted to the pelvic region, thus ensuring that childbirth came to be seen as a process which involved only *parts* of the woman. The pelvis in particular was seen as the foundational structure in childbirth. Bard noted that “upon the size, shape, and proportions, first of the brim, or superior opening, and secondly of the lower opening of the pelvis, almost all the difficulty in natural labour depends.”⁴¹ If reproduction was a mechanical process, then the pelvis was the frame that held the machine together. A well-formed pelvis allowed childbirth to proceed smoothly; a malformed pelvis (often attributed to rickets) brought suffering, medical intervention, and often death for the women and/or her infant. Eighteenth-century practitioners insisted that knowledge of the parts and measurements of the pelvis was indispensable for anyone engaged in the practice of midwifery; only by understanding this frame could practitioners correctly assess the progress of a birth and make appropriate decisions in cases of difficult, preternatural, or complicated deliveries.⁴² Although women had successfully practiced the art of midwifery for centuries without the benefit of formal anatomical training, physicians insisted on dissection and the science of anatomy as the necessary foundation for promoting successful deliveries.

The science of anatomy helped to advance medicine, but it also had social consequences well beyond the attainment of medical knowledge. Mary Fissell, for

⁴⁰ Bard, *Compendium*, 6.

⁴¹ Bard, *Compendium*, 38.

⁴² *Natural birth* was defined as one in which the head delivered first within twenty-four hours and without any artificial assistance; a *difficult* or *laborious birth* was one in which the head delivered first but the delivery was protracted or required interference; a *preternatural birth* was defined by the presentation of any part other than the head at delivery; a *complicated birth* was one which involved complications such as hemorrhage, convulsions, etc. See for example Seaman, *Midwives Monitor*, 80-81.

instance, focuses on the growing understanding of the internal body in the eighteenth century to argue that class differences underlay the increasing authority of medical men in eighteenth-century England, an authority which was replicated as the medical profession grew in America. Fissell examines medical institutions for the poor to show how physicians solidified their authority over the body of the patient by focusing on their professional knowledge of the internal body rather than on the history of surface symptoms that the patient could recount. Displacing the patient's corporeal narrative with knowledge of internal anatomy, physicians were able to speak authoritatively in a way that the patient could no longer do.⁴³ Part of this shift to the internal body meant that physicians could no longer treat their patients simply by listening to their recital of symptoms—they had to examine and touch their bodies to ascertain what was wrong and how best to treat them.⁴⁴ Although the practice of touching was applied to both male and female patients, it held particular significance in the case of women, for whom modesty and sexual propriety were considered paramount.

The dissection of bodies and the new focus on internal anatomy allowed physicians to gain a better scientific understanding of reproduction, but the new focus on anatomical fragments also allowed men to bypass their problematic proximity to the female body as a whole. They could hardly be accused of sexual impropriety when the female body was cut into scientifically determined parts. The implicit violence in the practice notwithstanding, the study of anatomy opened new doors for physicians and

⁴³ Mary Fissell, *Patients, Power, and the Poor in Eighteenth-Century Bristol* (Cambridge: Cambridge University Press, 1991).

⁴⁴ For more on the transition to physical examinations in the practice of medicine see Eve Keller, *Generating Bodies and Gendered Selves: The Rhetoric of Reproduction in Early Modern England* (Seattle: University of Washington Press, 2007), esp. chapter 6.

offered a less fraught way to interact with the female body. William Hunter, a contemporary of William Smellie and eventual accoucheur for Queen Charlotte, pushed the boundaries of science and representation even farther than Smellie when he published his *Anatomy of the Human Gravid Uterus* in 1774, complete with thirty-four nearly life-size engravings by the artist Jan van Rymdyk of Hunter's dissections of pregnant cadavers. Simultaneously beautiful and gruesome, these fragments were photographic in their realism and thus could not evade the fact that these parts were once a living and fertile woman (see fig. 2.2 and 2.3), but they were markedly different from seventeenth and early eighteenth-century illustrations of the whole mother.⁴⁵ Although the partial body in Figure 2.2 retained the shape of the buttocks and thighs with a suggestive bit of drapery around the knees, there was little of the sexual or aesthetic appeal of Jane Sharp's seventeenth-century mother (refer back to fig. 2.1). Figure 2.3 appears even more shocking with its severed thighs and gaping vagina—an explicit image, to be sure, but hardly one intended to charm or titillate. By reducing the mother to scientifically useful pieces, physicians increased their knowledge of reproduction and presented a desexualized and scientifically oriented vision of the female body.

⁴⁵ Jan van Riemsdyk, engraver, in William Hunter, *Anatomy of the Human Gravid Uterus* (Birmingham, 1774), Tables 2, 4. Hunter (1718-1783) was the leading anatomist and obstetrician of his day. For more on his life and work, see Fox, *William Hunter*.

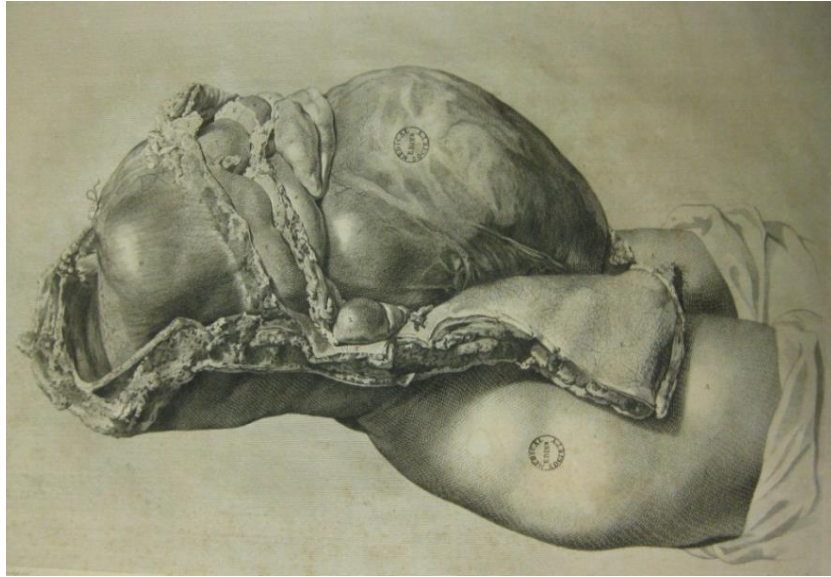


Figure 2.2. William Hunter, *Anatomy of the Human Gravid Uterus* (1774), Table 2.
The University of Iowa John Martin Rare Book Room.

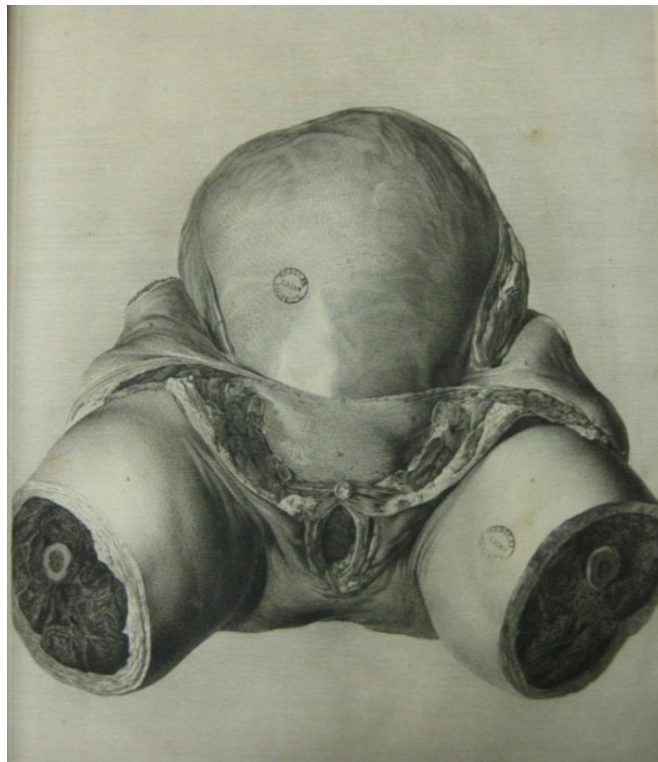


Figure 2.3. William Hunter, *Anatomy of the Human Gravid Uterus* (1774), Table 4.
The University of Iowa John Martin Rare Book Room.

Yet as Ludmilla Jordanova has observed, the more scientifically accurate illustrations were also indicative of “increasing scrutiny and voyeurism,” on the part of medical men, adding a problematic layer to their representations of the reproductive body.⁴⁶ Whereas in earlier times medical men would rarely have found themselves in such intimate proximity to the female body (alive or otherwise), the science of anatomy and dissection gave them ample opportunity to inspect and manipulate the most hidden parts of the body. Indeed, I suggest that the increasingly fragmented depictions of reproductive anatomy both desexualized the female body and paradoxically brought medical images closer to the representational conventions of contemporary erotica. Prose pornography and the medical profession each developed in England in the eighteenth century and evolved a similarly fragmented, invasive, and precisely detailed visual imagery. Anatomical tables allowed the viewer the same intense inspection of female genitalia as popular erotic fiction such as John Cleland’s *Memoirs of a Woman of Pleasure* (1748), popularly known as *Fanny Hill* and generally considered the first English language prose pornography. In one scene, Fanny describes the anatomy of a lady of uncertain virtue, beneath whose breasts “lay the delicious tract of belly, which terminated in a parting or rift scarce discernible, that modestly seemed to retire downwards, and seek shelter between two plump fleshy thighs: the curling hair that overspread its delightful front, cloathed it with the richest sable fur in the universe.”⁴⁷

Fanny might have been describing the medical images published by physicians such as George Spratt or Jacques Pierre Maygrier. Sophisticated visual works such as

⁴⁶ Jordanova, *Sexual Visions*, 61.

⁴⁷ John Cleland, *Memoirs of a Woman of Pleasure* (1748) (Oxford: Oxford University Press, 1985), 29-30.

George Spratt's *Obstetric Tables* (1833) became more common by the nineteenth century and offered an almost tangibly sensual depiction of female genitalia. Focusing on precisely delineated parts of the body, his delicately colored flap illustrations allowed the viewer literally to peel away layers of the body by lifting up each flap and discovering a new mode of intimacy. One such illustration framed the upper thighs, the labia liberally sprinkled with hair, and the navel. The first flap could be lifted away to uncover the internal reproductive organs, yet on first view, the only real indication that this image belonged to a medical text rather than a more erotic genre was the subtle labeling on the invitingly parted labia and just above the pubic hair. Only upon lifting the flap to expose the internal parts did the medical interest of the image become clear.⁴⁸ A translated edition of the Frenchman Jacques Pierre Maygrier's midwifery text offered a nearly identical image, without the flaps but with the additional enticement of round breasts floating above the navel. Entirely unnecessary in the context of the image, the breasts were whitened almost into invisibility, except for the nipples, but their plumpness stood out all the more against the dark shading of pubic hair and vulva.⁴⁹

One of the new and significant features of such medical illustrations was the presence of abundant and prominently depicted pubic hair. Marcia Nichols has shown that until the eighteenth century most medical illustrations displayed flayed figures in classical poses, like the image from Jane Sharp's midwifery manual (refer back to fig. 2.1). These female figures exemplified classical female beauty, with small high breasts

⁴⁸ George Spratt, *Obstetric Tables; Comprising Graphic Illustrations with Descriptions and Practical Remarks; Exhibiting on Dissected Plates Many Important Subjects in Midwifery* (1833) (Philadelphia, 1850), Table 3.

⁴⁹ J.P. Maygrier, *Midwifery Illustrated*, translated by A. Sydney Doane (New York, 1833), Plate 9.

and hairless genitals that signified a delicate and pure sexuality.⁵⁰ By the second half of the eighteenth century, however, many anatomical diagrams confronted the viewer with close-up images of female genitals covered with pubic hair. Pubic hair, Nichols shows, signified an earthier, more robust, and lower-class sexuality and was also an important element in contemporary erotic texts and images. More anatomically accurate than classically styled figures, such illustrations offered a scientific vision of the body as well as more titillating possibilities. The parallels between medical and pornographic depictions of the female body signal the contradictions inherent in the newly scientific anatomical illustrations. At once representative of the desexualized dissecting gaze of science and the intense titillating inspection of pornography, they served as an uncomfortable reminder that the reproductive body could never be fully removed from the realm of sexuality.

These images show that by the beginning of the nineteenth century the medical vision of the female reproductive body had changed dramatically. Medical texts and visual representations had moved away from conventions of the early modern period and focused on making clear the internal structure of the pelvis and the reproductive organs. In the nineteenth century, thanks to the foundation of knowledge established by men such as William Smellie and William Hunter, physicians focused on the internal body and became fixated on the problematic character of the uterus. If the pelvis could be a source of anxiety for physicians, the uterus appeared even more mysterious and dangerous in its sheer power and propensity for disorder. This was hardly a new concern. The womb had excited wonder and suspicion since antiquity, and in the eighteenth century the medical

⁵⁰ See Marcia Nichols, "The Man-Midwife's Tale: Re-Reading Male-Authored Midwifery Guides in Britain and America, 1750-1820" (Ph.D. dissertation, University of South Carolina, 2010), esp. chapter 4.

profession had pondered its pathological nature. Physicians were frustrated by the mysterious nature of this organ for, as Philadelphia physician William Dewees wrote,

There is no organ in the human body, from whose structure so little can be inferred, as the unimpregnated uterus; in it, when laid open by the knife, we see no manifestation of capacity for distention; on the contrary, we observe nothing but dense unyielding walls . . . in it we have no promise of the immense force which it is destined to exert.⁵¹

Unlike the pelvis, which at least had a decipherable structure and could be measured and rendered elegant by art, the uterus was seen to be without clear form and structure, secretive, nothing but “dense” walls which refused to yield to the probing of science. In pregnancy the form and function of the uterus might become clearer as it fulfilled its natural destiny, but it remained a mysterious and even monstrous entity.

Subject to the violence of the dissecting knife, the uterus yielded few answers and no hint of its great powers. An engraving published by the British physician James Hamilton at the end of the eighteenth century highlighted the grotesqueness of the uterus (fig. 2.4). To be sure, he carefully labeled its parts, but its form was barely discernible. It was disorderly in its formlessness, a shape with ill-defined boundaries and lines that sought to continue beyond the constraints of the page; it stood in sharp contrast to Smellie’s neatly bounded and clearly delineated pelvis which could be measured and described with clarity. The eye, moreover, was not so much drawn to the form of the uterus as to the gaping maw in the lower middle of the image, suggestive of a dark and

⁵¹ Dewees, *Compendious System*, 51. Dewees (1768-1841) was the first physician in America to offer a full lecture course on the practice of obstetrics. His *Compendious System of Midwifery* was extremely popular and went through twelve editions. For more on Dewees, see Peter M. Dunn, “William Potts Dewees (1768-1841) of Pennsylvania: pioneer of perinatal medicine in America,” *Archives of Disease in Childhood* 75 (1996): F69-F70.

unknowable interior.⁵² Another earlier image published by William Hunter presented a more detailed but similarly grotesque vision of the uterus as it seemed to expand menacingly from between the woman's thighs, overwhelming the form of her body and providing a visual testimony to the idea that woman must indeed be defined and governed by the womb (see Fig. 2.5). These two images made visible the ways in which physicians regarded the uterus with awe and trepidation.⁵³



Figure 2.4. James Hamilton, *A Collection of Engravings* (1796), Plate 4.

⁵² James Hamilton, *A Collection of Engravings Designed to Facilitate the Study of Midwifery, Explained and Illustrated* (London, 1796), 12. Online. *Gale: Eighteenth Century Collections Online*. This particular engraving was based on a painting made of an excised and dried uterus.

⁵³ William Hunter, *Anatomy of the Human Gravid Uterus*, Table 8.



Figure 2.5. William Hunter, *Anatomy of the Human Gravid Uterus* (1774), Table 8.
The University of Iowa John Martin Rare Book Room.

In medical texts, the uterus was a force of nature governed by its own laws that humans could only try to understand. It dwarfed the mother in reputation and function. One physician proclaimed: “Thus, as we have seen, the uterus is the most important organ. Indeed, it may be said to govern the woman; for it has a place in all her thoughts, but especially in those which are occupied with love, jealousy, vanity, and beauty; hence it may be said that the reproduction of the species is, in her, the most important object in life.”⁵⁴ In a more medical vein, the English midwife Martha Mears explained with palpable admiration the capacities of the uterus: “It has another property, which appears directly opposed to all reasoning on mechanical principles: it does not grow thinner in

⁵⁴ Eugene Becklard, *Know Thyself: The Physiologist; or Sexual Physiology Revealed* (1844). Translated by M. Sherman Wharton (Boston: Bela Marsh, 1859), 63.

proportion to its greater stretch, but retracts its thickness through the whole period, to whatever degree it may be distended. *Here our inquiries are for a moment lost in admiration*” [my own emphasis]. Mears continued on to stress that “by this continued thickness, which is the medium of its strength, the *human* womb is capable of exerting infinitely greater power, for the expulsion of its contents, than that of any other living creature.”⁵⁵ Without quite understanding how the uterus could function against all “mechanical principles,” Mears implied that reproduction was a rather mysterious process, governed by a marvelous and powerful entity. With a similar sense of wonder, the American physician Alfred Hall wrote of the natural “ambition” of the female reproductive parts:

It is a fact not less surprising that it is true, that the female system, placed under so continuous a periodical and natural gradation of changes, arising and subsiding, year after year, should exist with so much native vivacity, and constitutional ambition. There is certainly something worthy of our deepest regard as men of science. In surveying the beautiful structure, complicated as it is mysterious, designed in the order of nature for a continuous transmission of our species to new generations.⁵⁶

Both grammatically and theoretically, the womb was the active agent in reproduction, the woman an invisible and apparently unnecessary appendage. As Valentine Seaman wrote in his course of lectures to New York midwives in 1800, “At the end of the thirty-ninth week [of pregnancy], the womb, from some unaccountable law of nature, exerts itself to get rid of its contents.” The active subject of his description was the uterus itself which had the power and initiative to “exert itself”; indeed, Seaman’s description of labor focused on the actions of the womb rather than the laboring mother. After the birth of the

⁵⁵ Martha Mears, *The Pupil of Nature; or Candid Advice to the Fair Sex* (London, 1797), 10.

⁵⁶ Alfred G. Hall, *The Mother’s Own Book and Practical Guide to Health; being a collection of necessary and useful information. Designed for Females Only* (Rochester, NY, 1843), xi-xii.

fetus, he wrote that “The womb, having now got rid of so great a proportion of its contents, generally is free from pain for a little while.”⁵⁷ Evidently the womb, not the woman, was the subject who experienced pain. The preeminent American obstetrician William Dewees appeared even more amazed by the powers of the uterus, writing that “we cannot fail being struck with the various resources it seems to possess, and the wonderful order it pursues, to give the greatest possible chance of perfection to the ovum; to secure it against accident; and finally, to cast it off when it can no longer be useful to it.” Referring to the powers of the uterus and making it the grammatical subject of decisive verbs such as *pursue*, *secure*, and *cast off*, Dewees granted the uterus extraordinary agency. He even described the ability of the uterus to contract and expel the fetus after the death of the mother.⁵⁸ The English physician Francis Ramsbotham similarly highlighted the powers of the uterus, explaining that “the principal agent in labour is the uterus itself.”⁵⁹

Physicians expressed their awe and admiration by describing the womb as remarkable and wonderful, but their descriptors also evinced mistrust and even distaste for this peculiar entity. The uterus itself and the processes it supported could wreak havoc on women’s bodies and psyche, sometimes even without their knowledge. In the mid-eighteenth century William Buchan had written somewhat vaguely in his hugely popular *Domestic Medicine* that women’s reproductive organs

⁵⁷ Seaman, *Midwives Monitor*, 78, 87.

⁵⁸ William Potts Dewees, *An Essay on the Means of Lessening Pain and Facilitating Certain Cases of Difficult Parturition* (1806) (Philadelphia: Thomas Dobson and Son, 1819), 15-16, 104. Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*.

⁵⁹ Francis Henry Ramsbotham, *The Principles and Practice of Obstetric Medicine and Surgery* (1841) (Philadelphia: Lea & Blanchard, 1843), 89.

subject them to peculiar diseases; the chief of which are, their *monthly evacuations, pregnancy, and child-bearing*. These indeed cannot properly be called diseases themselves, but from the delicacy of the sex, and their being often improperly managed in such situations, they become the source of numerous calamities.⁶⁰

Buchan equivocated as to whether menstruation, pregnancy, and childbirth were truly diseases, or whether they were natural processes that caused so many problems as to become practically pathological. Writing in the mid nineteenth century, Horton Howard was equally vague: “In several particulars females have important peculiarities. Physiologically they have peculiar functions, and, necessarily, peculiar organs. Hence from both of those causes they are liable to peculiar maladies.”⁶¹ Being unable to categorize the organs and processes of reproduction, Howard simply labeled them “peculiar” and left it at that. Charles Meigs, on the other hand, was more emphatic and specific in describing the tyrannical powers of the womb and other organs, for he wrote that

they are among the most powerful disturbers of the complacency of the organisms. They constitute an imperium in imperio, whose behests are not to be disobeyed. These organs can disturb the brain—the respiration—the digestion—the circulation—the secretions—the nutrition.⁶²

Here the reproductive organs took on the persona of an imperious ruler, or perhaps a spoiled child run amok, whose willful behavior threatened the delicate balance of the body.⁶³ According to a rather grotesque story recounted by Meigs, the uterus could be a

⁶⁰ William Buchan, *Domestic Medicine: or, the Family Physician* (Philadelphia: Joseph Cruikshank, 1774), 391. Online. *Early American Imprints, Series 1: Evans*. Published in 1769, Buchan’s *Domestic Medicine* was a best-seller in Britain and America and was translated into a number of languages, ultimately selling around 80,000 copies.

⁶¹ Horton Howard, *A Treatise on Midwifery and the Diseases of Women and Children; Adapted to the Use of Heads of Families, and Females Particularly* (Cincinnati: J. Kost, 1852), 7.

⁶² Meigs, *Obstetrics*, 191.

threat to the physician as well. One day a physician was obliged to insert his hand into the uterus to extract the placenta, and while he was in the act the cervix closed with such force on his wrist that he could not remove it. "After various unsuccessful attempts to extricate himself from such an unheard-of difficulty," Meigs explained, "he sent for a Bleeder, and, after causing a large quantity of blood to be drawn from the lady's arm, the spasm of the cervix ceased, upon which he was liberated from an imprisonment of two hours. His wrist was marked, as if a cord had been strongly bound round it; the red traces of which impression were visible, even the next day."⁶⁴ Such descriptions of the female reproductive organs revealed a profound unease verging on downright terror on the part of physicians faced with the task of managing the female reproductive body. Difficult deliveries and perplexing abnormalities could strike fear into their heart of the attending physician whose authority seemed to falter in the face of the tyrannical womb.⁶⁵

Just as physicians grappled rhetorically to desexualize the female reproductive body and to negotiate the terrifying powers of the uterus, they sought on a more practical level to find ways in which they could practice obstetric medicine with propriety. Thus in addition to delineating anatomical knowledge, nineteenth-century medical texts offered advice on medical practice, describing the ways in which physicians should examine and

⁶³ It is important to note here that the uterus also came to be connected to psychological disturbance. In the nineteenth century gynecological concerns came to be seen as a cause of insanity in women, an idea that continued to the end of the century. See for example Nancy M. Theriot, "Women's Voices in Nineteenth-Century Medical Discourse: A Step Toward Deconstructing Science," *Signs* 19, no. 1 (Autumn 1993): 1-31.

⁶⁴ Meigs, *Obstetrics*, 235.

⁶⁵ Since physicians were most often called in to attend complicated births, rather than easy ones, their writings show a distinct bias towards obstetrical abnormalities. Articles in medical journals, for instance, focused on relatively common complications as well as unusual occurrences. See for example Samuel Jackson, "On the Safe Delivery of the Placenta," *American Journal of the Medical Sciences [AJMS]* 2, no. 3 (May 1828): 77; "Hints Respecting the Treatment of Lacerated Perinaeum," in the "Quarterly Periscope," *AJMS* 4 (August 1828): 417; Ludwig Frank, "Case of Rupture of the Uterus," in the "Quarterly Periscope," *AJMS* 3, 5 (November 1828): 186.

interact with patients and how deliveries should be conducted. Childbirth was the moment when mother and physician were forced to occupy the same real and textual space. For the sake of modesty and sexual propriety, physicians had to disguise the female body when it was at its most visible, keeping the birthing mother's flesh covered from sight at all times—even during full labor—and effacing her agency in the process of childbirth. This invisibility implied that the mother was no longer a capable actor in the process of childbearing; instead she was subject to the tyranny of the uterus and the authority of the physician. But by separating the mother from the messy physicality of reproduction, physicians preserved the respectability of their profession by emphasizing propriety and professionalism.

Based on what we have seen of early modern medical representations of the mother, it is not surprising that she was more visible and active in seventeenth- and early eighteenth-century descriptions of childbirth than in later periods. The English midwife Jane Sharp offered a relaxed picture of the mother before delivery, writing that during labor,

When the Patient feels her Throws coming she should walk easily in her Chamber, and then again lye down, keep her self warm, rest her self and then stir again, till she feels the waters coming down and the womb to open; let her not lye long a bed, yet she may lye sometimes and sleep to strengthen her, and to abate pain, the Child will be the stronger.

In this earlier depiction, the mother was subject to her own authority; she needed to notice the way her body felt and make decisions accordingly. The practitioner was not even present in this brief textual moment, only the woman and her child. Similarly, Thomas Raynalde recommended that “it shall be very profitable for her, for the space of an houre to sit still, then (rising again) to go up and down a pair of stairs crying and

reaching so loud as she can, so to stir her self. And also it shall be very good for a time, to retain and keep in her breath, for because through that means, the guts and intrails be thrust together and depressed downward.” The whole process required a strong and active body and the mother directed the course of her labor by her actions. When the real labor began, the birthing mother needed a pallet bed: head and pelvis raised, legs splayed and feet pressed against something solid, shoulders held by two female assistants, breath held and body straining, the mother was strong, solid, and fully present in the work of giving birth, a moment which required both physical and psychological strength.⁶⁶ As the women’s narratives from the previous chapter express, the process of childbirth was the most profoundly embodied experience of a woman’s life. Uniting strength and danger, pain and joy, the birthing woman exuded power and vulnerability. The functions of her body might be disruptive and messy, but early medical authors did not shy away from describing the mother, uncovered and spread-legged though she might be.

By the nineteenth century the presence of a male physician in the lying-in chamber was becoming increasingly common, particularly for middle-class and elite women who could afford what they saw as the best and most up-to-date medical care. Many women, and even a number of physicians, had protested since the early eighteenth century, to little avail, the presence of men in the lying-in room. The outspoken English midwife Elizabeth Nihell was incensed for a number of reasons by the entrance of men into the profession, not the least of which was her concern that men, especially young men, might take advantage of their ready access to women’s “secrets.” She wrote that “a skill in what we call the *Touching*, is not to be acquired without a frequent habit of recourse to the sexual parts whence the indications are taken. And in this nothing but

⁶⁶ Sharp, *Midwives Book*, 187-188. Raynalde, *Birth*, 97.

personal experience can perfect the practitioner. But this admitted, only proves the more clearly the utter impropriety of men addicting themselves to this occupation.”⁶⁷ Writers in the nineteenth century perpetuated Nihell’s concerns. George Gregory railed against man-midwifery, inquiring, “What is it but a vast system of legalized prostitution?”⁶⁸ His brother, Samuel Gregory, was so concerned about the impropriety of men as midwives that he promoted the training of female practitioners by opening the Boston Female Medical College in 1848. Samuel Gregory was also one of the few to acknowledge that the problem of sexual modesty also had a class dimension. He explained that

The accoucheur’s display of scrupulous delicacy, and the ‘standing on ceremony’ with women in ‘higher stations,’ deprives them of necessary assistance . . . while in ‘humble life’ there is often too much officiousness and freedom for the physical welfare of the patient, and the moral good of patient, practitioner, and female assistants.⁶⁹

In general, opponents of male-midwifery agreed that male self-restraint could not be relied upon and that the woman in childbed was uniquely vulnerable and needed to be guarded from unwarranted intimacy with a man who was not her husband. As the American physician Wooster Beach put it, “The great intimacy and confidence which exist between the physician and the patient, gives the most unbounded liberties and temptations to the unprincipled and licentious to alienate their affections from their husbands.”⁷⁰ He went on to cite examples of adultery resulting from conquests in the lying-in room. Such concerns may sound a bit hysterical, but there is occasional anecdotal evidence to attest that sexual impropriety did sometimes intrude on the sanctity

⁶⁷ Nihell, *Treatise on the Art of Midwifery*, 85.

⁶⁸ George Gregory, *Medical Morals* (1853), in *The Male Mid-wife and the Female Doctor: The Gynecology Controversy in Nineteenth-Century America* (New York: Arno Press, 1974), 29-30.

⁶⁹ Samuel Gregory, *Man-Midwifery Exposed and Corrected* (Boston, 1848), 26.

⁷⁰ Beach, *Improved System of Midwifery*, 13-14.

of the birthing chamber. One young southern physician was in attendance on a young white woman in labor when she “imprinted on my lips a voluptuous kiss which shot through my system like electricity.”⁷¹ But as Samuel Gregory pointed out, maternal health could also be endangered by too great an obsession with propriety, if it meant that women were not receiving adequate treatment. For other physicians, propriety could not be valued too high. As Charles Meigs wrote, “I confess I am proud to say, that, in this country generally . . . there are women who prefer to suffer the extremity of danger and pain rather than waive those scruples of delicacy which prevent their maladies from being fully exposed.”⁷² Death before immodesty, he suggested, was the mark of a woman of sensibility.

The dilemma of employing male midwives could be mitigated if the female body could be removed, or at least hidden, from the gaze of the male practitioner. In light of such fears about modesty and delicacy, physicians such as William Dewees were especially vocal in their discussions of how male midwives should conduct themselves so as to assist patients with propriety. Dewees scrupulously taught that all exams should be done by touch rather than sight, preferably in a darkened room. “The slightest exposure is never necessary,” he cautioned, and explained how the laboring mother should be positioned on her left side with her legs bent and her whole body covered with a sheet or blanket.⁷³ Illustrations in Jacques Pierre Maygrier’s midwifery text showed the proper

⁷¹ Richard Arnold, quoted in Steven M. Stowe, “Obstetrics and the Work of Doctoring in the Mid-Nineteenth-Century American South,” in *Midwifery Theory and Practice*, Vol. 1 of *Childbirth: Changing Ideas and Practices in Britain and America 1600 to the Present*, Philip K. Wilson, ed. (New York: Garland Publishing, Inc., 1996), 325.

⁷² Charles D. Meigs, *Females and Their Diseases* (Philadelphia, 1848), 19.

⁷³ Dewees, *Compendious System*, 187-188.

way to conduct manual exams with the woman either standing or recumbent.⁷⁴ Yet, like the anatomical images previously discussed, these pictures contained potentially erotic dimensions. The first image was marked by the caption, “Touching the female erect,” a word choice with unfortunate connotations.⁷⁵ This image featured the female patient standing and fully clothed in a proper gown with the physician kneeling in front of her, looking scrupulously away and lifting her gown at the front so as to convey a hand underneath to examine her. The second image’s caption was more appropriate—“Touching in the horizontal posture”—and it pictured a woman in a cap and gown reclining in bed with the physician leaning over her and putting his right arm underneath the covers and between her legs. Although deemed an appropriate image, the potential intimacy of the scene is unmistakable, and the transparency of the drapery reveals the woman’s legs up to her thighs. Nevertheless, the 1833 translation of Maygrier’s work contained an endorsement by William Dewees, who found his tables useful illustrations of medical practice.

Although physicians attending a birth were allowed to use the Touch to gain information about the progress of labor, Dewees insisted that they “beware of officious and unnecessary touching.”⁷⁶ Joseph Warrington’s *Obstetrical Catechism* epitomized this

⁷⁴ Maygrier, *Midwifery*, Plates 29, 30.

⁷⁵ Although the word “erect” did not carry the predominantly sexual connotations that it does today, particularly in a medical context it could bring to mind the male sexual organs and was also part of a more ribald popular sexual vernacular. *Aristotle’s Masterpiece*, for instance, explained with due gravity: “nature has so ordered it, that when the nerves are filled with animal spirits, and the arteries with hot and spirituous blood, then the yard [penis] is distended, and becomes erect.” See *Aristotle’s Complete Master-piece. In Three Parts: Displaying the Secrets of Nature in the Generation of Man* (London, Boston: 1766). Online. *Readex: Early American Imprints, Series 1: Evans*. In an explicitly erotic context, the heroine of John Cleland’s erotic novel described her first view of the male sexual organs: “Her sturdy stallion had now unbutton’d, and produced naked, stiff, and erect, that wonderful machine, which I had never seen before.” See John Cleland, *Memoirs of a Woman of Pleasure*, 25.

⁷⁶ Dewees, *Compendious System*, 190.

concern by explaining in what now seems excessive detail the procedure for a blind examination:

Q. What arrangements should be made in order to conduct the examination most satisfactorily?

A. The room should be darkened, and the patient lightly dressed, and placed in the suitable position . . .

Q. What is the rule for carrying the hand under the coverings?

A. The clothes should be properly raised at their lower edges, by the left hand, and then the right hand with the index finger lubricated, passed cautiously up under the clothes without uncovering the patient.⁷⁷

Today it seems counterintuitive that the sight of the female body should be forbidden, while judicious touching was allowed. Nevertheless, medical texts emphasized that the sight of the body was problematic, even during a medical examination. Explicitly erotic material—both written and visual—emphasized the importance of sight in producing titillation and arousal. If we understand the male gaze as the key site and source of eroticism, it helps explain why practitioners could be more at ease with the internal body, which could be touched but never seen, except perhaps on the dissecting table.

Physicians could not be too cautious in their interactions with birthing women, lest they be suspected of lewd intentions or inappropriate interactions with a woman's body at its most vulnerable. As one young physician recounted, one day on his way to an appointment he passed by his sweetheart's house and saw her face through the window, and "ten minutes after I saw her I was engaged professionally viewing a beautiful woman's pudenda. Good heavens though I at the time, would she, be all sorts of scared if she could take a coup d'oil [sic] of the whole scene."⁷⁸ Although engaged in professional work, the young doctor clearly believed on some level that what he was doing was

⁷⁷ Joseph Warrington, *Obstetric Catechism; Containing Two Thousand Three Hundred and Forty-Seven Questions and Answers On Obstetrics Proper* (Philadelphia, 1854), 113-114.

⁷⁸ Quoted in Stowe, "Obstetrics and the Work of Doctoring," 326.

inappropriate and would shock his lady friend. His story also raises the question of whether physicians really were able to maintain prescribed physical distance from their patients, particularly in difficult cases and moments of crisis. Nevertheless, it was important to the burgeoning medical profession to emphasize in their writings the delicacy and respect of the physician toward his patient.

The birthing positions that physicians prescribed also mitigated their encounters with the body of the mother. Most English and American physicians preferred to position the birthing mother on her left side with knees drawn up (while French physicians generally favored delivery on the back with thighs spread, as Maygrier also illustrated). This position saved the physician the discomfort of finding himself gazing between the spread thighs of an uncovered woman; by positioning the mother on her side he prevented her from parting her knees even in delivery. If the body had to be present, it could at least be managed with the utmost propriety. Valentine Seaman recommended that the mother “should be properly supported by some of her *female friends*, a few of whom are always welcome companions upon such occasions, not only on account of the assistance they afford in enabling her to bear her pains to more advantage, but also as their cheerful conversation supports her spirits, and inspires her with confidence.”⁷⁹ The only bodies that could touch the mother in her time of crisis were the bodies of her female attendants. The physician might be allowed carefully to insert his fingers in order to touch her internal parts, but the women could embrace and support her, using their own bodies to bolster her strength and confidence during labor.

Once they had positioned the mother in the most seemly way possible, physicians turned their attention to the uterus and allowed the woman to recede into the background

⁷⁹ Seaman, *Midwives Monitor*, 85.

of the birth narrative. Valentine Seaman described the stages of labor without mentioning the birthing mother. In the final stage, he wrote, “the membranes being broken, and the waters evacuated, the head now falls down into the cavity of the bason, and by the continuation of the pains, is forced forward.”⁸⁰ The physician’s role was to monitor the actions of the uterus. Dewees similarly explained how delivery occurred without once implying that a person was also involved, referring to the “body” of the uterus but not to the body of the mother. He explained, “That the uterus may be enabled to expel its contents, as we have already said, the fundus and body must contract, while the mouth must relax.”⁸¹ The primacy of the uterus became abundantly clear when he explained how exhaustion in the laboring woman would not slow delivery of the child, for as long as the uterus “preserve its powers” delivery would progress without delay.⁸² Indeed, it seemed that the powers of the uterus rendered the mother superfluous in the delivery room. Could Seaman and Dewees have discovered a way of exercising their powers on a disembodied uterus, no doubt they would have seized the opportunity. Maygrier got as close as he could by illustrating the manual efforts of the physician on a disembodied pelvis and uterus, a common visual practice that highlighted the shape of the pelvis, the placement of the womb, the position of the fetus, and the actions of the physician’s hands or forceps as they removed the fetus.⁸³ In such images the infant was present in its entirety, encompassed by the womb, the physician was present and active through the work of his hands, but the mother was absent except as represented by the pelvis and

⁸⁰ Seaman, *Midwives Monitor*, 92.

⁸¹ Dewees, *Pain*, 54.

⁸² Dewees, *Compendious System*, 260.

⁸³ Maygrier, *Midwifery*, Plate 37.

womb. Judging from these diagrams, childbirth was a structurally neat process accomplished solely by the hands of the physician. These prescriptions for medical practice directed the physician away from the mother and toward the interior functions of her reproductive system.

Although these were the most prevalent ways of discussing and representing obstetric practice, not all medical professionals were equally fixated on effacing the presence of the woman in their texts. Samuel Bard, for instance, illustrated how critical it was for physicians to be attentive to the mother's experience of labor. His text was the first midwifery textbook in America and combined an older understanding of the mother in labor with more recent scientific knowledge. He counseled that:

An experienced midwife will form no inaccurate judgment of the progress of the labour, only by observing her patient's manner, and hearing her cries. Whilst the internal orifice of the womb is opening, the pains are cutting, sharp and grinding; the patient is restless, bears them with impatience, and expresses her sense of them by sharp and shrill cries; but when this is accomplished, or nearly so, the pains become more supportable, and the patient finds herself instinctively called upon to make some voluntary exertion; she lies quiet, holds her breath, and expresses her sense of pain in a grave tone of voice, or frequently bears them in silence.⁸⁴

Here the mother appeared fully present and active in the birthing process; her subjective experience of labor and the wordless ways in which she expressed it signaled to the attendant the unfolding of the process. Bard showed that rather than relying on scientific knowledge of the mechanics of birth, the midwife should focus on the mother herself, a technique which resembled more closely the older practices of diagnosing medical conditions based on the patient's narrative of symptoms rather than on a physical examination. But unlike Bard's frank attentiveness to the experiences of the birthing mother, by the first half of the nineteenth century, most medical writers strove to avoid

⁸⁴ Bard, *Compendium*, 118.

entirely the body of the mother both in rhetoric and practice. The uterus might be treated in a desexualized and scientific way if the woman herself could be carefully concealed from view. In consequence, writers and practitioners evaded the presence of the woman and made her internal organs and the physician the protagonists in their birth narratives.

The focus on the internal reproductive organs in late eighteenth- and early nineteenth-century medical texts and in particular on the fearsome nature of the uterus shows that physicians were increasingly invested in an evolving understanding of reproduction as a pathological process. In his medical notes from 1804-1809, celebrated Philadelphia physician Benjamin Rush listed pregnancy under the category of pathology, attesting to the belief that childbearing was not a normal process.⁸⁵ Horton Howard summed up the general attitude of the medical profession by noting that “No organ of the female system is perhaps so liable to become diseased, or fail to perform its healthy functions, as the uterus; and hence arise some of the most obstinate and painful maladies to which the sex is liable.”⁸⁶ Marcia Nichols has argued that by situating the mother as the victim of her internal organs, physicians were able to represent themselves as the heroes in their own medical narratives. As one American physician effused, “On your own resources alone rests the issue of life or death.”⁸⁷ Women were weak and needed to be rescued from their own bodies.⁸⁸ The notion of pathology in childbearing was also linked to the concept of civilization, a notion which implicated ideas of both race and

⁸⁵ Benjamin Rush, Medical Notes 1804-1809, HSP.

⁸⁶ Howard, *Treatise*, 8.

⁸⁷ Gunning S. Bedford, *Clinical Lectures on the Diseases of Women and Children* (New York: Samuel S. & W. Wood, 1855), 312.

⁸⁸ Nichols, “Man-Midwife’s Tale,” 5.

class. Physicians believed that so-called primitive women in the state of nature did not suffer the same pain or the same danger in childbirth, nor did lower-class women.

This idea was not new, nor was it unique to the medical profession, for seventeenth-century writers had expressed a similar belief that “savage” women generally suffered less in childbirth. Many American and European texts, such as travel narratives about the Americas and Africa, made reference to the respective reproductive capacities of “civilized” and “savage” women. The eighteenth-century Scottish explorer Sir Alexander Mackenzie, for instance, observed of the “Chepewyan” Indians that

Child-birth is not the object of that tender care and serious attention among the savages as it is among civilised people. At this period no part of their usual occupation is omitted, and this continual and regular exercise must contribute to the welfare of the mother, both in the progress of parturition and in the moment of delivery.⁸⁹

Many European observers saw such women as healthier and closer to nature and assumed that their “primitive” ways of life made them more robust. What Mackenzie and other European observers did not consider, of course, was the different cultural context in which Indian women gave birth. In a study of Native American groups in eastern Canada and New England, for instance, Ann Marie Plane proposes that Indian women may have deemphasized the pain of childbirth because they were part of a culture that respected women and men for bearing pain and suffering without complaint.⁹⁰ Moreover, in many Native American societies the maternal body was understood symbolically as powerful

⁸⁹ Sir Alexander Mackenzie, *Voyages from Montreal, on the River St. Lawrence, Through the Continent of North America, to the Frozen and Pacific Oceans in the Years 1789 and 1793* (Philadelphia: John Morgan, 1802), cxvi. Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*. For scholarly discussions of European views of non-white women’s reproductive bodies, see for example Jennifer L. Morgan, “‘Some Could Suckle over Their Shoulder’: Male Travelers, Female Bodies, and the Gendering of Racial Ideology, 1500-1770,” *The William and Mary Quarterly* 54, no. 1 (January 1997): 167-192.

⁹⁰ Ann Marie Plane, “Childbirth Practices Among Native American Women of New England and Canada, 1600-1800,” in *Women and Health in America*, 2nd ed., Judith Walzer Leavitt, ed. (Madison: University of Wisconsin Press, 1999), 38-47.

and life-giving, a site of pride and authority rather than a site of weakness and despair.⁹¹ Such beliefs may have shaped the attitudes with which Indian women anticipated and experienced childbirth. Yet rather than considering the different rituals and practices surrounding childbirth in another culture, observers such as Mackenzie assumed that Indian women experienced childbirth differently because of their way of life. The experience of childbirth thus became a potential measure of civilization.

Early medical writers agreed that there was a clear difference between childbearing in European society and in societies that were allegedly closer to the state of Nature. But these physicians tended to attribute the problems of “refined” women to individual inadequacy—essentially, poor life-style choices on the part of the childbearing woman— rather than viewing reproduction itself as fundamentally pathological. Toward the end of the eighteenth and into the nineteenth century physicians began to argue that reproduction had become a pathological process *because* of civilization. Medical writers linked pathology and pain to the refining and debilitating influences of civilization. By the turn of the nineteenth century, physicians tended to agree that childbearing was a medical affliction that had grown worse with succeeding generations. The civilizing process had *changed* women’s bodies, and not for the better. William Dewees’s essay on the treatment of pain in childbirth stated that, “however easy the act of Child-bearing may be among savage tribes and certain individuals in various states of society, we find it among others an operation of great pain and frequent danger.”⁹² Dewees thought that contractions would not be painful, were it not for “some change which the muscular fibre

⁹¹ See for example the Cherokee myth of Selu, the woman who brought forth corn and beans from her body. See Theda Perdue, *Cherokee Women: Gender and Culture Change, 1700-1835* (Lincoln: University of Nebraska Press, 1999), 13-15.

⁹² Dewees, *Means of Lessening Pain*, 9.

has undergone from civilization, refinement, or disease.”⁹³ Horton Howard agreed, writing that “The most refined, that is, those who depart farthest from the simplicity of nature, have the most painful labors, whilst women amongst savages suffer least. . . even in nations which are civilized, but in which the women are accustomed to labor or exercise themselves much in the open air, they suffer but little at child-birth.”⁹⁴ Another physician argued that “Parturition is not followed by the same degree of exhaustion in those women who are employed in manual labor in the open air, even in this country, as it is in those females who move in what are termed the ‘higher circles,’ whose life is almost wholly artificial.”⁹⁵ As William Buchan had noted several decades earlier, civilization kept women indoors and in restrictive clothing, causing their bodies to be weakened by excessive refinement: “The confinement of females, besides hurting their figure and complexion, relaxes their solids, weakens their minds, and disorders all the functions of the body.”⁹⁶ The effects of civilization were indeed pernicious; yet paradoxically, they also marked the superiority of the refined woman. Refinement was the mark of a true woman, but the costs of true womanhood could be severe. Indeed, by the nineteenth century most of the medical profession agreed that elite women suffered more in childbearing than previously.⁹⁷ Refinement had so weakened the bodies of

⁹³ Dewees, *Compendious System*, 105.

⁹⁴ Howard, *Treatise on Midwifery*, 110.

⁹⁵ Beach, *Improved System of Midwifery*, 97.

⁹⁶ Buchan, *Domestic Medicine*, 390.

⁹⁷ For a discussion of ideas about pain in childbirth see chapter 4 on “The Wounds of Birth” in Wertz, *Lying-In*.

succeeding generations that they could no longer cope with the powerful mechanics of the uterus.⁹⁸

Samuel Bard, writing in the first decade of the nineteenth century, seems to have been one of the few physicians to retain a relatively optimistic vision of childbearing, just as he was one of the few to give a more active portrait of the mother in childbirth.

Generally less interventionist than some, Bard urged practitioners to study carefully “the symptoms and progress of natural labours,” so as to recognize when to leave well enough alone. He assumed that American women were still capable of having natural labors.

Some years later, the American physician Wooster Beach, who promoted a “reformed” (less interventionist) system of midwifery, praised Bard’s textbook as the best, but noted that “it has fallen into disrepute, in consequence of his placing too much reliance on the resources of nature.”⁹⁹ Recommending patience rather than heroic interference in slow first labors, Bard assumed that most women were capable of bearing children safely, if perhaps not always easily. Subtly criticizing his fellow practitioners, he argued that woman

is endowed by nature with the powers which are necessary to perform all her natural functions; and this observation is so peculiarly applicable to the states of pregnancy and parturition, that we risk little in asserting, that all the danger of these states in a healthy, well-formed woman, arises from some error in mismanagement.¹⁰⁰

⁹⁸ This notion of feminine debility continued into the second half of the nineteenth century and was not restricted to the medical profession. In 1855, for instance, the writer Catharine E. Beecher published the results of an informal survey she conducted with dozens of women in communities across the country. She concluded that few American women were in good health and many suffered considerable debility. See Catharine E. Beecher, *Letters to the People on Health and Happiness* (New York: Harper and Brothers Publishers, 1855), 121-133.

⁹⁹ Beach, *Improved System of Midwifery*, 12.

¹⁰⁰ Bard, *Compendium of the Theory*, 10, 70.

The statistics tended to be in Bard's favor. The British physician Fleetwood Churchill compiled statistics from a number of preeminent physicians who had defined British obstetric practice in the eighteenth century: William Smellie had reported 990 natural labors out of 1000; John Leake had reported 900 natural labors out of 1000; others noted similar rates of natural labors around or above ninety percent.¹⁰¹ Statistically speaking, natural labors were far more common, demonstrating that childbearing was not a pathological condition. But physicians like William Dewees insisted that "A number of circumstances must concur that a woman carry her child to the full period of utero-gestation, and then give birth to it with the least possible trouble and risk." There were so many conditions necessary for a natural delivery that physicians deemed it all but impossible.¹⁰² By the time Dewees published his famous midwifery text in 1824 he seemed certain, and the profession generally concurred, that easy or even natural childbirth was almost impossible for the civilized mother.

As they faced the challenges of treating childbearing women, physicians articulated a fantasy of the "rustic" mother whose greater proximity to the state of Nature rendered her stronger and fitter for reproduction. William Dewees claimed that contractions were often "excited without pain, as in the labours of the aboriginal women of this country: in the women of Calabria, and, among some, even in this, our artificial state of society."¹⁰³ Several decades earlier, the British physician William Buchan had praised the robustness of milkmaids in the English countryside and claimed that "we seldom find a barren woman among the laboring poor, while nothing is more common

¹⁰¹ Fleetwood Churchill, *On the Theory and Practice of Midwifery* (London, 1842), 160.

¹⁰² Dewees, *Compendious System*, 222.

¹⁰³ Dewees, *Compendious System*, 105.

among the rich and affluent.” Similarly, Samuel Bard favorably compared country women to their urban counterparts, contrasting low incidences of miscarriage among the strong women of the country with high incidences among the weak, indolent, and inactive women of the city. He argued moreover that neither savage nor working women rested much after childbirth because of their greater fitness.¹⁰⁴ These physicians began to essentialize differences between elite, working class, and non-white women.

What these physicians neglected to recognize, of course, were the material conditions that forced poor and enslaved women to return to their duties shortly after delivery, regardless of their state of health or fitness. The fact that a woman returned to work immediately after childbirth was certainly not a guarantee that she suffered neither pain nor weakness. As Lynn Kennedy writes in her work on antebellum southern motherhood, “If white southerners saw a slow recovery for an elite woman as a necessary result of her delicacy and a privilege accorded to her status, they insisted that enslaved women gave birth with greater ease and viewed any considerations that were granted to these women as acts of benevolence on their part.”¹⁰⁵ An enslaved woman might hope for a short reprieve from work and a gradual return to a full workload; more likely, however, she would have little time to recover before returning to work. In her memoir of southern plantation life, the English actress Fanny Kemble attested to the plight of slave mothers whose bodies were destroyed by simultaneous childbearing and overwork:

The women who visited me yesterday evening were all in the family-way, and came to entreat of me to have the sentence (what else can I call it?) modified which condemns them to resume their labor of hoeing in the fields three weeks after their confinement. They knew, of course, that I can not [sic] interfere with

¹⁰⁴ Buchan, *Domestic Medicine*, 402. Bard, *Compendium of the Theory*, 88, 182.

¹⁰⁵ V. Lynn Kennedy, *Born Southern: Childbirth, Motherhood, and Social Networks in the Old South* (Baltimore: Johns Hopkins University Press, 2010), 76.

their appointed labor, and therefore their sole entreaty was that I would use my influence with Mr. Butler to obtain for them a month's respite from labor in the field after childbearing.¹⁰⁶

In contrast, women who had the support of family and friends and a degree of economic stability could take the traditional lying-in month to recover their strength and treat any complications, although even this reprieve was not without its own complicated implications. As Kennedy writes, "While these women may have appreciated the opportunity to recover their physical strength in relative quiet, it must be remembered how closely this period of recovery was tied to the idealized dictates of feminine identity that elite white women alone could satisfy."¹⁰⁷ Taking a month to recover might be both a physical and psychological boon, but it also corroborated assumptions about feminine delicacy which helped to place women in a dependent and subordinate position in society.

Although physicians treated enslaved women when complications arose and often delivered the urban poor either in hospitals or homes, their medical texts nevertheless assumed that the normative patient was an affluent white woman. The recognition and treatment of pain, fatigue, and debility were the prerogatives of women who had the time and resources to address the gynecological and obstetrical problems that were common to childbearing women regardless of race or class. Physicians' differentiation of civilized and uncivilized women exposes how integral notions of race and class were to their understanding of the reproductive body. Indeed, they demonstrate how important it is for historians to explore the practice of medicine as an example of what Evelyn Books

¹⁰⁶ Frances Anne Kemble, *Journal of a Residence on a Georgian Plantation in 1838-1839* (Savannah: Library of Georgia, 1992), 101.

¹⁰⁷ Kennedy, *Born Southern*, 75.

Higginbotham has called a *technology of race*.¹⁰⁸ Ideas about race and the prejudicial practice of medicine mutually reinforced one another in nineteenth-century America. Physicians assumed that pain was felt differently by refined women, and refined women were by definition white and privileged. Although physicians expressed admiration and respect for the allegedly natural reproductive powers of “savage,” rural, or working women, they nevertheless intended their work to benefit refined women who allegedly both required and merited greater concern. These white women needed to be rescued from civilized debility. Physicians’ focus on the inadequate body of the refined mother made her the standard from which all others would be judged. Pain and pathology became markers of social worth and privilege.

By linking pain and pathology to notions of civilization, medical writers opened the way for the use of non-white and non-elite mothers in the development of gynecology and obstetrics. Their bodies were supposedly hardier and more resistant to suffering; science saw them as closer to nature—more like animals—and less chaste, so that their bodies could be manipulated by male physicians with little impropriety. A great deal of pioneering work in gynecology was done by southern physicians because they had ready access to black women’s bodies. Indeed, many of the surgeries and treatments that became routine in obstetrics and gynecology during the second half of the nineteenth century were first practiced on enslaved women in the antebellum south. A number of scholars have explored the use of enslaved women as well as impoverished immigrant women in the development of nineteenth-century obstetric and gynecological practice. Marie Jenkins Schwartz shows that enslaved women’s bodies were integral to nineteenth-

¹⁰⁸ Evelyn Brooks Higginbotham, “African-American Women’s History and the Metalanguage of Race,” *Signs* 17, no. 2 (Winter 1992): 251-274.

century medical progress because physicians could operate more boldly and even recklessly on black bodies than on white. When gynecological problems occurred, slaveholders had a vested interest in taking extreme measures to restore a woman's reproductive capacity. On the other hand, when a woman's organs were so debilitated as to render reproduction impossible, her body was devalued and therefore became a suitable subject for medical experimentation. Deidre Benia Cooper Owens argues that impoverished women in urban areas, often Irish immigrants, came to hospitals to be delivered and treated and in so doing provided needed subjects for medical training and experimentation in the north.¹⁰⁹

In spite of his proclaimed distaste for the female reproductive organs, the southern physician James Marion Sims became renowned for his innovations in gynecological surgery, including the development of a surgical repair for vesicovaginal fistula, a condition that could result from prolonged labors during which the tissue of the vagina was weakened and torn. In his autobiography he recalled his frustration at receiving a number of patients who suffered from this condition and whom he deemed utterly incurable. It was not until a chance discovery prompted him to operate repeatedly on several enslaved women that he developed a successful surgical technique. As he later wrote, "I made this proposition to the owners of the negroes: If you will give me Anarcha

¹⁰⁹ Marie Jenkins Schwartz, *Birthing a Slave: Motherhood and Medicine in the Antebellum South* (Cambridge: Harvard University Press, 2006) and Deirdre Benia Cooper Owens, *'Courageous Negro Servitors' and Laboring Irish Bodies: An Examination of Antebellum-Era Modern American Gynecology* (Ph.D. Dissertation, University of California-Los Angeles, 2008). See also Katherine Kemi Bankole, *Slavery and Medicine: Enslavement and Medical Practices in Antebellum Louisiana* (New York: Garland Pub., 1998); Walter Fisher, "Physicians and Slavery in the Antebellum Southern Medical Journal," *Journal of the History of Medicine and Allied Sciences* 23 (January 1968): 36-49; Todd Savitt, *Medicine and Slavery: The Diseases and Healthcare of Blacks in Antebellum Virginia* (Urbana: University of Illinois, 2002); Lars Schroeder, *Slave to the Body: Black Bodies, White No-Bodies and the Regulative Dualism of Body-Politics in the Old South* (Frankfurt: Peter Lang, 2003); Steven M. Stowe, *Doctoring the South: Southern Physicians and Everyday Medicine in the Mid-Nineteenth Century* (Chapel Hill: University of North Carolina Press, 2004).

and Betsey for experiment, I agree to perform no experiment or operation on either of them to endanger their lives, and will not charge a cent for keeping them.”¹¹⁰ His success depended on repeated experimentation without, as he noted, the benefit of anesthesia and with considerable agony to his patients. Anarcha endured thirty operations over the course of four years, from 1845 to 1849, when Sims finally achieved a cure.¹¹¹

The first discovery that prompted Sims’s quest for a surgical cure involved an examination of a poor but “respectable” white woman with a prolapsed uterus. Placing the patient on her knees, carefully covered by a large sheet, Sims cautiously inserted one finger to touch the uterus, then gradually introduced his entire hand in an effort to restore the uterus to its proper position: “I commenced making strong efforts to push it back, and thus I turned my hand with the palm upward . . . all at once, I could not feel the womb, or the walls of the vagina . . . It was as if I had put my two fingers into a hat, and worked them around, without touching the substance of it.”¹¹² This moment of discovery emphasized the act of touching the patient, a proper and approved technique for modestly examining a female patient described in numerous medical texts. But his next discovery occurred in a different way and highlighted a different sense: sight. He examined a slave woman suffering from a vaginal tear by placing her in the same position as the white woman:

¹¹⁰ J. Marion Sims, *The Story of My Life* (New York: D. Appleton and Company, 1885), 236.

¹¹¹ For more on Sims and the development of gynecological surgery, see G.J. Barker-Benfield, *The Horrors of the Half-Known Life: Male Attitudes Toward Women and Sexuality in Nineteenth-Century America* (New York: Harper & Row, 1976); Deborah Kuhn McGregor, *Sexual Surgery and the Origins of Gynecology: J. Marion Sims, His Hospital, and His Patients* (New York: Garland Pub., 1989). For an analysis of the politics of race in Sims’s work and in the development of gynecology, see Terri Kapsalis, “Mastering the Female Pelvis: Race and the Tools of Reproduction,” in *Skin Deep, Spirit Strong: The Black Female Body in American Culture*, Kimberly Wallace-Sanders, ed. (Ann Arbor: University of Michigan Press, 2002).

¹¹² Sims, *Life*, 233.

I got a table about three feet long, and put a coverlet upon it, and mounted her on the table, on her knees, with her head resting on the palms of her hands. I placed the two students one on each side of the pelvis, and they laid hold of the nates [buttocks], and pulled them open. Before I could get the bent spoon-handle into the vagina, the air rushed in with a puffing noise, dilating the vagina to its fullest extent. Introducing the bent handle of the spoon I saw everything, as no man had ever seen before.¹¹³

There are several very important differences in this narrative that highlight the significance of race in medical practice. First, while the white woman was covered entirely by a sheet, there was no mention that such a courtesy was afforded the enslaved woman, who was instead without ceremony “mounted” like an object onto the table. Second, two other men were present, not only to witness the examination, but to manipulate the body of the patient by grasping her buttocks, an act that certainly did not fall into the category of proper “Touching.” Finally, rather than emphasizing the process of touching the patient, Sims recalled his sudden ability to *see* her body, both externally and internally. As suggested earlier, the sight of the female body was problematic in ways that appropriate medical touching was not, most likely because medical touching focused on information that could be gathered from the internal parts of the body, while sight could take in the parts subject to medical interest as well as parts such as breasts, hips, and thighs that might inspire a more prurient interest in the female body. Thus by being exposed to the sight of several male practitioners, the body of the enslaved woman was subjected to different treatment, both in the moment and in Sims’s textual recollection of the event. Such treatment emphasized her corporeality rather than her feminine delicacy and prevented any claim she might have made to feminine modesty.

¹¹³ Sims, *Life*, 234.

The notions of pathology and civilization that were promulgated in late eighteenth- and nineteenth-century medical texts perpetuated physicians' drive to master the disorder of the internal female body. But it also permitted and even encouraged the exploitation of enslaved and impoverished women for the development of medical technology. The harrowing experiences of women who became medical subjects expose the dire practical consequences of ideology. The ways in which male physicians discussed and envisioned the body as it intersected with notions of race and class related closely to the ways in which medicine was practiced on living women. Although non-white women were almost entirely absent from obstetrics textbooks and manuals, by the nineteenth century they were an important but unacknowledged presence in medical representations of female reproduction.

The gradual disappearance of the mother from medical texts eased concerns about sexuality while the pathologization of childbirth simultaneously created and reinforced lines of class and race. Only the refined white body needed to disappear for the sake of propriety, because other women's bodies could be represented and manipulated by physicians with impunity. The way that medicine was written and practiced might differ profoundly depending on the social status of the patient. But could even the refined white body ever truly be made to disappear? In medical books, at least, it might be carefully shrouded behind the text or beneath the sheet, implicit in fragmented images of the pelvis and uterus and concealed in the lying-in chamber. But even the men who wrote and consulted these medical books knew a different realm outside the boundaries of the text. While William Dewees was writing his *Compendious System of Midwifery* in the early nineteenth century, he was also treating women in need, delivering healthy babies to

exhausted but joyful mothers, comforting families when the worst came to pass, witnessing the fatigue of women made old by too frequent childbearing, and always trying to understand and address the complications that inevitably arose over the course of a long and active medical career. In these moments the mother's body was always present, always visible, and inescapably tangible.

Physicians could shroud genteel women in sheets and blankets, but they could never efface the messiness of childbirth, nor could they wholly avoid the immodest possibilities of working in such close proximity to a woman's flesh. Physicians dealt with their concerns about propriety in both subtle and explicit ways in their writings, creating a textual realm that allowed them to focus on the internal mechanics of the reproductive body and its medical problems rather than its external human dimensions. By effacing the body, physicians helped to preserve the race and class-based fantasy of the ideal mother, whose moral, emotional, and spiritual attributes transcended the problems of the flesh. The peculiar disappearance of the mother in pregnancy and childbirth reinforced of middle-class refinement and gentility by effacing the disorder of the female reproductive body. But in practice physicians could never wholly ignore the reality that the refined mother was, in the end, a corporeal being.

CHAPTER THREE

“The Highest Pleasure of Which Woman’s Nature is Capable”: Breastfeeding and the Eroticization of the Maternal Body

“Blessed indeed the Womb and the Breasts are . . . [they] do but exhibit the Vertues and Graces of a Good Mother.”¹

In 1809 the American midwife Mary Watkins published a treatise on mothering in which she admonished that any mother who neglected to breastfeed was “deprived of a very high source of pleasure, of the most tender and endearing kind.”² Watkins was joining a dialogue about breastfeeding that had been growing in importance among medical professionals and moralists on both sides of the Atlantic Ocean since the early decades of the eighteenth century. Early prescriptive authors sought to persuade mothers to breastfeed their own children by criticizing and cajoling them, focusing on women’s divine duty and on the practical benefits of nursing for infant and maternal health. By the late eighteenth century, however, medical and domestic advice manuals began to advance maternal pleasure as their primary argument in favor of breastfeeding. By emphasizing the physical and emotional pleasure women derived from the act of nursing, medical and lay advice authors represented the mother as a creature of sentiment and sensibility, and they highlighted the ways in which breastfeeding created pleasurable physical and

¹ Benjamin Colman, *The Honour and Happiness of the Vertuous Woman; more Especially Considered in the Two Relations of a Wife and Mother* (Boston: B. Green, 1716), 13. Online. *Readex: Early American Imprints, Series 1: Evans*.

² Mary Watkins, *Maternal Solitude, or, Lady’s Manual: Comprising a Brief View of the Happy Advantages Resulting from an Early Attention to Secure a Good Constitution in their Infants* (New York, 1809), 9.

affective bonds between mother, infant, and husband. These discussions of breastfeeding highlight the argument that the “biological phenomena of fertility control, pregnancy, birth, and lactation are never merely biological; they are experienced within the rituals, expectations, and technology of a particular historical time and place.”³ As such, it is crucial to emphasize that even biological processes such as breastfeeding have a history.

The act of breastfeeding provided a unique context in which the maternal body—rhetorically, at least—was neither frightening nor disruptive. Representations of the breast as the locus of maternal and familial pleasure simplified the complexity of the female body, resulting in a narrowly idealized space in which physicality was embraced. The breasts provided a reassuring counterpoint in medical and prescriptive literature to more menacing aspects of childbearing. Of course, breastfeeding could wreak havoc on domestic tranquility. Lactating breasts leaked fluid, an unavoidable reminder of messy and unrestrained corporeality. More devastatingly, breastfeeding could cause excruciating conditions such as abscesses and cracked nipples. Indeed, for many mothers there was little that was ideal or sentimental about the daily practice of breastfeeding, though they understood its importance as one of their maternal duties. But the diversity of women’s experiences did not diminish the fact that breastfeeding was a time-honored symbol of the good mother, whose breasts signified tenderness and beauty. Her very essence was represented in the plump white orbs, and the full sentimental import of motherhood could be conveyed in representations of breastfeeding.⁴ As the Scottish physician William

³ Nancy M. Theriot, *Mothers and Daughters in the Nineteenth Century: The Biosocial Construction of Femininity* (Lexington: The University Press of Kentucky, 1996), 40.

⁴ For a discussion of the breast, as well as breastfeeding, as a sacred symbol in the West from pre-Christian goddesses forward see Marilynn Yalom, *A History of the Breast* (New York: Alfred A. Knopf, 1997), esp. chapter one.

Buchan effused, “In the language of love, women are called angels; but it is a weak and a silly compliment; they approach nearer to our ideas of the Deity: they not only create, but sustain their creation, and hold its future destiny in their hands.”⁵

The idealization of breastfeeding in prescriptive texts, as well as in other aspects of society and culture, was part of a growing emphasis on motherhood that grew out of ideas of virtue and society in Enlightenment thought and led to a new vision of womanhood in the ideal sentimental mother. Sentimentalism represented a new view of emotions as a force for good in human life. Women had traditionally been seen as driven by passion, excessively sensitive, and therefore lacking in reason, but in the eighteenth century the concept of emotion came to have a positive connotation, and reason and sentiment went hand-in-hand. Although the Enlightenment took different forms in France, Great Britain, and America due to their respective political and cultural contexts, sentimentalism was a common denominator between them and suffused both political, social, and cultural life. Enlightenment thinkers, whose writings travelled across the Channel and across the Atlantic, saw feelings such as compassion, sympathy, and empathy as natural and inherent to human nature and as the necessary foundation for a virtuous society. Sensibility, the acute physical and emotional ability to *feel* (pain, pleasure, sorrow, joy), and to empathize, was a corollary to sentimentalism.⁶ These

⁵ William Buchan, *Advice to Mothers; on the Subject of Their Own Health; and of the Means of Promoting the Health, Strength, and Beauty of Their Offspring* (Boston, 1809), 3. This work was first published in 1803 and went through a number of British and American editions in the nineteenth century.

⁶ On the relationship between sentiment, sensibility, and moral virtue in the politics and culture of the Enlightenment, see for example G.J. Barker-Benfield, *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain* (Chicago: University of Chicago, 1992); Andrew Burnstein, *Sentimental Democracy: The Evolution of America's Romantic Self-Image* (New York: Hill and Wang, 1999); Gertrude Himmelfarb, *The Roads to Modernity: The British, French, and American Enlightenments* (New York: Alfred A. Knopf, 2004); Sarah Knott, *Sensibility and the American Revolution* (The University of North

concepts were particularly important in America in the late-eighteenth century as a component of nation building in the new republic. As Andrew Burnstein writes, “Along with a virtuous passion properly applied to the establishment of a well-balanced government, sentiment and sympathy helped form an emotional covenant among Americans that promoted an optimistic view of the future of the nation and the world.”⁷

Sentimentalism and sensibility permeated political and philosophical discourse in Europe and America, and it also found its way into the popular literature and culture of the eighteenth century. The English author Samuel Richardson’s bestselling novel *Pamela*, for instance, was first published in 1740 and illustrated the importance of sentiment and sensibility in conveying and sustaining feminine virtue. Richardson located virtue in the simplicity, sincerity, and sensitivity of the young Pamela’s emotions, while he explored Mr. B.’s evolution from a man of base passions to a man of sentiment. More importantly for this discussion, *Pamela* was one of the first widely-read texts to idealize motherhood.⁸ Popular in England, America, and on the Continent from the 1740s on, the novel anticipated a growing understanding of motherhood as women’s principal contribution to society. Roughly twenty years later, a similar conception of motherhood was articulated by the French *philosophe* Jean-Jacques Rousseau in his popular work *Emile* (1762), which highlighted the mother’s unique moral duty to her children and to society.⁹ This notion of moral motherhood gained particular prominence in America during the Revolution and the formation of the Republic as writers began to draw a

Carolina Press, 2009); William M. Reddy, *The Navigation of Feeling: A Framework for the History of Emotions* (Cambridge: Cambridge University Press, 2001).

⁷ Burnstein, *Sentimental Democracy*, xviii.

⁸ See for example Ruth H. Bloch’s discussion of *Pamela* in her article, “American Feminine Ideals in Transition: The Rise of the Moral Mother 1785-1815,” *Feminist Studies* 4, no. 2 (June 1978): 108-109.

⁹ See Jean-Jacques Rousseau, *Emile* (1762), translated by Barbara Foxley (London, 1966).

connection between the virtuous citizenry necessary for a stable republic and the moral influence of mothers. This connection brought about a greater emphasis on women's education, as proponents argued that in order to raise their children to be both moral and rational citizens, women needed the benefits of an intellectual education.

The Enlightenment was not the only source of new ideas about motherhood and women's social roles. As Ruth H. Bloch has shown, evangelical Christianity in both England and America supplied a new emphasis on emotion, female piety, and motherhood that began to emerge during the revivals of the eighteenth century but flowered more fully in the early decades of the nineteenth century. Bloch notes that this Christian vision of motherhood most likely enjoyed broader popular support than Enlightenment notions, for non-evangelical Protestants also adopted the ideal of the tender and moral mother whose Christian influence would transform the domestic sphere and eventually society at large into a haven of piety.¹⁰ As the American pastor and moralist, John Abbott intoned,

O mothers! Reflect upon the power your Maker has placed in your hands. There is no earthly influence to be compared with yours. There is no combination of causes so powerful, in promoting the happiness or the misery of our race, as the instructions of home. In a most peculiar sense, God has constituted you the guardians and the controllers of the human family.¹¹

Although this Protestant ideal differed from Enlightenment discussions of motherhood in that it deemphasized reason in favor of piety, both visions highlighted the importance of sentimentalism both in describing and enacting motherhood.

Scholars have given the idealization of motherhood in the late-eighteenth and

¹⁰ Bloch, "Moral Mother," 118-120.

¹¹ John S.C. Abbott, *The Mother at Home; or, the Principles of Maternal Duty Familiarly Illustrated* (London: John Mason, 1834) (New York: Arno Press and The New York Times, 1972), 167.

nineteenth centuries different names. Bloch's notion of the "Moral Mother" highlights the importance of women's virtuous influence in society. Linda Kerber's term "Republican Motherhood" reminds us of a specifically American motivation for emphasizing motherhood. Moving into the first half of the nineteenth century, Mary Ryan has referred to the "Empire of the Mother" and Nancy Theriot has used the term "imperial motherhood" to describe the predominant vision of motherhood as women's primary and all-consuming domain.¹² These terms are all useful and highly descriptive, but here I prefer the term "sentimental motherhood" because it highlights the Enlightenment understanding that morality was based on sentiment, while also invoking the highly sentimental aesthetic that infused depictions of motherhood from both Enlightenment and evangelical Protestant writers. The sentimental mother was destined by Nature to be tender, affectionate, empathetic to the woes of her children and society, moral, and acutely sensitive to emotions such as joy, sympathy, fear, and grief. Her influence on society, moreover, was unparalleled. As one author noted, "the *mistress* and *mother* of a family occupies one of the most important stations in the community."¹³ Nowhere can this ideal be more clearly perceived than in the discussions of breastfeeding the permeated maternal advice literature, characterizing again and again the sensibility and affective power of the ideal sentimental mother.

Why was breastfeeding the sole context in which the body of the mother—or at

¹² See Bloch, "Moral Mother"; Linda K. Kerber, "The Republican Mother: Women and the Enlightenment—An American Perspective," *American Quarterly* 28, no. 2 (Summer 1976): 187-205; Mary P. Ryan, *The Empire of the Mother: American Writing about Domesticity, 1830-1860* (New York: Copublished by the Institute for Research in History and the Haworth Press, 1982); Nancy M. Theriot, *Mothers and Daughters in Nineteenth-century America: The Biosocial Construction of Femininity* (Lexington: University Press of Kentucky, 1996).

¹³ Ann Martin Taylor, *Practical Hints to Young Females* (Boston: Wells & Lilly, 1816), 2-3.

least one part of it—was not only culturally visible, but enthusiastically represented? As we saw in the previous chapter, even medical authors who faced the tangible bodies of mothers in their practice of medicine managed to evade the fullness of female corporeality in favor of the pathology of the internal organs. And as we shall see in chapter five, popular literary forms used the aesthetics of sentimentality to disembody the mother in favor of spiritual transcendence. The contrast between these depictions of mothers and discussions of breastfeeding suggests that there was something culturally unique about the figure of the nursing mother, that the maternal breast was the one part of the body that could reinforce, rather than disrupt, ideal motherhood.

Breastfeeding imagery has figured prominently across time and place. Images of the Virgin Mary nursing the infant Jesus, for instance, have been used not only to represent the supreme maternal virtue of the holy mother, but also to symbolize her transcendent role as a spiritual mother to humanity. As Margaret Miles has written of Italian Renaissance culture, Mary epitomized the good mother “who could be counted on to nurse not only her son but, through him, all Christians.”¹⁴ Although the iconography of the nursing Virgin existed predominantly in the realm of Catholic art and imagery, the lactating breast was also an important symbol in Anglo-American Puritan rhetoric. David Leverenz notes the use of the maternal body in Puritan sermons to illustrate spiritual concepts. He asserts that “a surprising analogy often appears in Puritan sermons to describe the minister’s function. Without leering, and with no fear that their manhood

¹⁴ Margaret R. Miles, “The Virgin’s One Bare Breast: Nudity, Gender, and Religious Meaning in Tuscan Early Renaissance Culture,” in *The Expanding Discourse: Feminism and Art History*, Norma Broude and Mary D. Garrard, eds. (New York: Icon Editions, 1992), 35.

was threatened, preachers called themselves ‘breasts of God.’”¹⁵ In a funeral sermon the Puritan minister Cotton Mather wrote with due solemnity: “Such *Ministers* are your *Mothers* too . . . Are not their *Lips* the *Breasts* thro’ which the *sincere Milk of the Word* has pass’d unto you, for your Nourishment?”¹⁶ Drawing on the common image of the nursing mother, such ministers pictured the word of God as a life-giving substance.

On a more secular note, the story of the lactating Greek (or sometimes Roman) daughter captured the imagination of artists and writers in Europe and America across the centuries. The story, with some variations, told of a man who was condemned to starve to death. His adult daughter saved his life by visiting him in prison and feeding him from her breast. Upon discovering her actions, the emperor was so moved by the courage and loyalty of the young woman that he pardoned her father. In 1625 the Flemish painter Peter Paul Rubens painted one of the better known depictions of this tale, *Simon and Pero (Roman Charity)*, to portray the dramatic moment in which the virtuous daughter nurses her father from her own breast. A poem and engraving of the scene circulated in America in several versions in the mid- and late eighteenth century,¹⁷ and the subject was still compelling enough for Rembrandt Peale, son of the celebrated American painter Charles Willson Peale, to paint a version entitled “The Roman Daughter” in 1811, which

¹⁵ David Leverenz, *The Language of Puritan Feeling: An Exploration in Literature, Psychology, and Social History* (New Brunswick, NJ: Rutgers University Press, 1980), 1. See also Elizabeth Maddock Dillon, “Nursing Fathers and Brides of Christ: The Feminized Body of the Puritan Convert,” in *A Centre of Wonders: The Body in Early America*, Janet Moore Lindman and Michele Lise Tarter, eds. (Ithaca: Cornell University Press, 2001), 129-143.

¹⁶ Cotton Mather, *A Father Departing; or the Departure of the Venerable and Memorable Dr. Increase Mather; by One Who, as a Son with a Father, Served with Him in the Gospel* (Boston, 1723), 22-23. Cited in Leverenz, *Puritan Feeling*, 1.

¹⁷ R. E. Smith, engraver; poem, anonymous, “The Grecian daughter” (Windsor, VT: Alden Spooner, 1798). Online. *Readex: Early American Imprints, Series 1: Evans*. The original poem is tentatively dated to the 1760s with additional versions of the poem and engraving existing from 1776 (Boston: sold by T. & J. Fleet, 1776-1797) and 1794 (Boston: printed by E. Russel).

featured the father, seated and in chains, as he put his lips to his daughter's breast to drink. These images and narratives privileged filial devotion—rather than the maternal devotion more commonly connected to the act of breastfeeding—but highlighted nevertheless the virtue and sentiment that seemingly gushed forth from the maternal body.

The variety of texts and images, both religious and secular, featuring the figure of the nursing mother attested to her importance in Anglo-American culture. There was a perception of the nursing mother as simultaneously dutiful and desirable, pure and sensual, that made her uniquely representable well into the nineteenth century. Instead of evading maternal corporeality, prescriptive authors were able to use the context of breastfeeding to explore more fully the physical and affective relationships implicated in motherhood. Whereas sentimental literature, for instance, sought to disembody and spiritualize the mother, the genre of prescriptive literature had to promote both practical and ideological visions of motherhood to living women, and as such they could not entirely do away with corporeality. They could, however, sentimentalize the maternal body by elevating breastfeeding to the pinnacle of physical, emotional, and symbolic importance.

Ironically, the physicians who sought carefully to disguise the mother's body in their medical analyses of pregnancy and childbirth were often the same men who eagerly, even voyeuristically, fixated on the charms and sensations of the nursing mother. Why did they conceal the mother beneath a (literal or metaphorical) sheet one moment, only to accentuate the beauty and sensations of one part of her body the next? In a practical sense, the act of breastfeeding did not implicate the physician in the same way that pre-

natal exams and deliveries did. By entering the lying-in chamber and examining the body of the mother, the attending physician brought with him the threat of sexual impropriety. But in describing the nursing mother, he painted a domestic scene uninterrupted by the presence of any outsider. The scene he described was not intended for his eyes, but for those of the intimate family circle. Moreover, it is important to remember that in practice breastfeeding was not then the hidden act that it has become in twentieth- and twenty-first-century America. As Marilyn Yalom explains, “In England and the United States, as in France and Northern Europe, mothers were not ashamed to be seen in their homes as they nursed their babies; indeed, it was even permissible to breast-feed in such public places as parks and railroads, especially among the popular classes.”¹⁸ While pregnant and birthing bodies needed to be concealed from prying (male) eyes, the nursing mother could be seen and admired without undue impropriety. Of course, this permissive attitude was not without its limits, as the English novelist Frances Trollope demonstrated when she listed the sight of “a lady performing the most maternal office possible” in a theater box as one of the many vulgarities witnessed during her travels in the United States.¹⁹ Breastfeeding in public was perhaps not a sign of gentility, but nor was it universally perceived to be shameful, disgusting, or disruptive.

Medical and maternal advice manuals targeted an audience of white middle-class and elite mothers (and sometimes fathers) who had the ability and means to consult prescriptive literature. As with obstetric literature, most of the volumes that circulated in America during the eighteenth century were originally published in England and then reprinted in America. Not until the nineteenth century did American medical and

¹⁸ Yalom, *History of the Breast*, 126.

¹⁹ Frances Trollope, *Domestic Manners of the Americans*, 4th ed. (New York, 1832), 271.

prescriptive texts begin to proliferate. Ideas about motherhood were transnational in nature, and it is important to recognize the extent to which American representations of breastfeeding were influenced by British and even French texts. The majority of early advice manuals were written by male physicians with the occasional treatise by a female midwife or mother. Indeed, it was not until the nineteenth century that significant numbers of women began to put their ideas and expertise as mothers into print, combining a lay approach to health care with a deeply sentimental appeal to the shared experiences of motherhood.²⁰ Maternal advice manuals addressed a wide variety of subjects from pregnancy to the lying-in period to childhood illnesses, but they were notably insistent in their discussions of the benefits of maternal breastfeeding.

Prescriptive authors writing in the early and middle decades of the eighteenth century believed that motherhood was a natural role, but they mistrusted women's ability and willingness to perform it. As one author claimed, women lacked a "Philosophic Knowledge of Nature, to be acquired only by learned Observation and Experience, and which therefore the Unlearned must be incapable of."²¹ Women needed to be taught (and supervised) in order to ensure proper maternal devotion. Mixing unveiled criticism with increasing sentimentalism, these authors wrote manuals to encourage, educate, and correct mothers. Breastfeeding often appeared at the center of their prescriptions for good

²⁰ Examples of early advice literature by women include Sophia Hume, *An Exhortation to the Inhabitants of the Province of South-Carolina, to bring their Deeds to the Light of Christ in their own Conscience* (Philadelphia, 1748). Online. *Readex: Early American Imprints, Series 1: Evans*; Ann Martin Taylor, *Practical Hints to Young Females, On The Duties of a Wife, a Mother, and a Mistress of a Family* (Boston, 1816); and Lydia Maria Child, *The Mother's Book* (Boston, 1831). The first medical manual published by an American woman was by Mary Hunt Palmer Tyler, *The Maternal Physician; A Treatise on the Nurture and Management of Infants, from the Birth until Two Years Old. Being the Result of Sixteen Years' Experience in the Nursery* (New York, 1811). Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*.

²¹ William Cadogan, *An Essay upon Nursing and the Management of Children, from their birth to three years of age* (London, 1750), 3. This work was originally published in London in 1748 and subsequently reprinted in America, including a Boston edition (1772) and a Philadelphia edition (1773).

mothering, an allegedly instinctual practice that women supposedly did not attend to with due diligence.

Prescriptive authors initially focused on two central issues, one physical and one moral. They expressed concern for maternal and infant health and criticized women for thwarting God and Nature by refusing to nurse. As one author wrote, “A Woman must be very unnatural, who can part with her own Child.”²² At times overtly critical of mothers’ “inhumane Treatment of our tender little Ones,” these early prescriptive authors encouraged women to nurse by stressing the dictates of health and nature.²³ They argued that women’s bodies—even elite women’s—were naturally suited to the task of suckling and that to neglect this duty was to thwart the laws of nature, not to mention divine ordination. The English physician William Cadogan served as the Governor of the London Foundling Hospital in the 1750s and made maternal breastfeeding his particular cause. His text on childrearing was one of the first and most influential of such texts and it circulated in numerous editions in both England and America in the mid- and late eighteenth century. He made his case for maternal breastfeeding by emphasizing mother and infant health and the authority of nature: “If we follow Nature,” he wrote, “instead of leading or driving it, we cannot err.” Using pragmatic medical concerns to promote maternal breastfeeding, he insisted that by nursing, “the Mother would likewise, in most hysterical nervous cases, establish her own health by it . . . as well as that of her offspring.”²⁴ Concerned in particular with the health of infants, British physician Hugh Smith lamented that he was “heartily sorry the present manner of bringing up children

²² *The Nurse’s Guide: or, the right method of bringing up young children* (London, 1729), 23.

²³ Hume, *An Exhortation*, 120.

²⁴ Cadogan, *Essay*, 13, 17.

puts me, in some measure, under the necessity of proving milk to be the best food that can be given them.”²⁵

Prescriptive authors particularly vilified elite mothers for their alleged inattention to maternal duty. They evinced a belief that elite women were perpetually out paying calls, enhancing their wardrobes, going to parties, and attending the theater rather than remaining in the nursery to watch over their children with unwavering tenderness and concern. One female author complained that fashionable women declined to breastfeed for only the most frivolous reasons, lest it “prevent some little Delicacy in our Shape or Dress, or detain us from making unedifying and impertinent Visits, etc. we consign the poor Innocent into the Hands of a Stranger, to be foster’d by Women, often-times, of savage Tempers, and vile Affections.”²⁶ Other authors likewise harped on the neglectful tendencies of elite mothers, who in England did in fact often send their children to be wet nursed in the countryside throughout the eighteenth century. “Compare the opulent with the rustic,” Hugh Smith urged his readers, “the success is still exceedingly different. How many children of the great fall victim to prevailing customs, the effects of riches! How many of the poor are saved by wanting these luxuries!”²⁷ How many American mothers similarly neglected to breastfeed is difficult to ascertain. The practice of hiring a wet nurse appears to have been less common among American elites, although Janet Golden explains that, at least early in the eighteenth century, it was relatively common for well-

²⁵ Hugh Smith, *The Female Monitor, consisting of a series of Letters to Married Women on Nursing and the Management of Children* (Wilmington, DE, 1801), 61. Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*. Originally published in London in 1767, the first American edition followed in 1792 and it continued to be reprinted into the 1830s.

²⁶ Hume, *An Exhortation*, 120.

²⁷ Smith, *Monitor*, 67.

to-do Bostonians to send their children to the surrounding countryside to be nursed.²⁸ Similarly, elite whites in the south had the option of employing enslaved women as wet nurses, though the extent to which this occurred is difficult to measure. Golden shows that women either chose not to breastfeed or were prevented from breastfeeding for a number of reasons including disease, breast infections or abscesses, fatigue, and stress. These circumstances, as well as maternal mortality, meant that some infants had to be fed either by hand or at the breast of another woman.²⁹

While criticizing elite mothers for neglect, prescriptive authors also romanticized the natural mothering they imagined prevailed in the more rustic homes of country folk and the working classes:

The Mother who has only a few Rags to cover her child loosely, and little more than her own Breast to feed it, sees it healthy and strong . . . while the puny Insect, the Heir and Hope of a rich Family lies languishing under a Load of Finery. . .abhorring and rejecting the Dainties he is crammed with, till he dies a Victim to the mistaken Care and Tenderness of his fond Mother.³⁰

While proponents of maternal breastfeeding singled out elite women for their pride and vanity, they also wrote scornfully of poor women whose bad morals and uncouth ways made them unfit to nurse. In particular, they worried about the dangerous effects of wet nurses, whose “savage Tempers, and vile Affections” could corrupt the constitutions and morals of the infants in their charge.³¹ The figure of the wet nurse could be seen either as

²⁸ Janet Lynne Golden, *A Social History of Wet Nursing in America: From Breast to Bottle* (Columbus: Ohio State University Press, 2001), 22.

²⁹ For a history of infant feeding practices in Europe and Colonial America see chapter one Golden, *Social History of Wet Nursing*. Golden stresses the variation in maternal mortality depending on geographic location. Death rates were generally lower in New England than in the South, and Golden estimates an overall range of 6 to 20 deaths per 1,000 births (p. 19).

³⁰ Cadogan, *Essay*, 7.

³¹ Hume, *An Exhortation*, 120.

a savior in cases of dire need or as a vice- and disease-ridden interloper into the sanctity of the genteel domestic sphere. Jean-Jacques Rousseau, whose writings on motherhood and education were popular in England and America well into the nineteenth century, pointed out that “The woman who nurses another’s child in place of her own is a bad mother; how can she be a good nurse?”³² Thus it seems that only women who occupied the middle ground between fashionable excess and vice-ridden poverty could possibly embody the perfect mother. It is perhaps not surprising, given the rising prominence and influence of the bourgeoisie in eighteenth-century England, that maternal advice manuals were largely written by and for the middle class, and that prescriptive authors tended to elevate the virtues of middle-class women over the extremes of either poverty or wealth.

In addition to criticizing mothers and emphasizing the healthful effects of breastfeeding, early and mid-eighteenth-century authors hinted at the concept of pleasure that was to become a central method of persuasion by the end of the eighteenth century. As one author intimated while recommending maternal breastfeeding, “’Tis true indeed, there is a considerable deal of Trouble to be undergone in the bringing up of a Child; but then that Trouble is sweeten’d and rewarded by a Pleasure and Satisfaction not to be conceiv’d.”³³ William Cadogan explained that women who refused to nurse their children did not understand that, “were it rightly managed, there would be much Pleasure in it.”³⁴ Jean-Jacques Rousseau pressed his case more strongly. He proposed that, “when mothers deign to nurse their own children, then will be a reform in morals; natural feeling will revive in every heart,” for “in the cheerful home life the mother finds her sweetest duties

³² Rousseau, *Emile*, 13.

³³ *Nurse’s Guide*, 24-25.

³⁴ Cadogan, *Essay*, 27.

and the father his pleasantest recreation.”³⁵ In his discussion of the maternal role Rousseau explored the Enlightenment view that humans were naturally moral and that their understanding of right and wrong came from the natural emotions they experienced. The British physician Hugh Smith evoked an emotional understanding of pleasure when he worried that the few women who were physically unable to nurse were “thus deprived of a happiness, only known to those who enjoy it.”³⁶ Cadogan, Rousseau, and Smith, whose works were frequently reprinted and cited into the nineteenth century, illustrated the transitional nature of ideas of motherhood in this period. Smith in particular combined new sentimentalism with the old criticism by emphasizing both medical exigencies and the affective ties of motherhood, thus ensuring the continuing popularity of his work well into the nineteenth century.

Like their earlier counterparts, late eighteenth- and nineteenth-century authors were at times critical of mothers, believing that the ability and desire to breastfeed was a part of human nature that had been corrupted by fashion. The British reverend Thomas Searle lamented the fact that some women gave up breastfeeding in favor of other pastimes: “But alas! there are some, who, without any reason but their own indolence, the indulgence in other scenes and occupations, unnaturally assign the care of their infants to other hands.”³⁷ William Buchan insisted that “savage” women were more dutiful mothers, and he urged: “Let the mother in civilized society, who, from motives of selfish ease and imaginary pleasure, denies her infant the vital stream with which she is

³⁵ Rousseau, *Emile*, 13.

³⁶ Smith, *Monitor*, 71.

³⁷ Thomas Searle, *A Companion for the Season of Maternal Solitude* (New York: Moore & Payne, Collins & Hannay, 1834), 202-203.

abundantly supplied for its sustenance, think of the poor savage, and start with horror at her own unnatural depravity.”³⁸ Like their predecessors, such authors were certain that women who neglected to breastfeed must be unnatural mothers and were deserving of chastisement. As William Dewees, a prominent Philadelphia physician and obstetrician in the early nineteenth century, proclaimed, those “women who may stifle this strong maternal yearning . . . have ever been the subject of the satirist’s lash, and the object of the moralist’s declamation.”³⁹ One female author did mitigate these criticisms by suggesting that middle-class women were more likely to breastfeed their own children and thus could provide a positive example for those beneath them in society. She explained, “although the influence of good example in the middle ranks can be but small upon those which are more elevated; yet it descends like a kindly shower upon such as are beneath them.”⁴⁰

Some authors did recognize that breastfeeding could involve discomfort and difficulty. The body of the nursing mother was not always as cooperative in life as it was on paper. American mother Ann Allen described breastfeeding as “a pleasing, although a painful sensation,” but urged women not to be deterred, for, “if you would be a happy mother. . . be a faithful mother, and you will be rewarded daily.”⁴¹ The popular domestic author Catharine Beecher asserted that “Many a mother will testify, with shuddering, that the most exquisite sufferings she ever endured, were not those appointed by Nature, but

³⁸ Buchan, *Advice*, 31.

³⁹ William Dewees, *A Treatise on the Physical and Medical Treatment of Children* (1825) (Philadelphia, 1847), 54.

⁴⁰ Taylor, *Practical Hints*, vi.

⁴¹ Ann Allen, *The Young Mother and Nurse’s Oracle: For the benefit of the uninitiated* (Cincinnati, OH: E. Mendenhall, 1858), 62.

those, which, for week after week, have worn down health and spirits, when nourishing her child.”⁴² Even William Buchan who rapturously promoted breastfeeding acknowledged the possibility of discomfort. But, he argued, “a little pain is easily surmounted, and is followed by lasting pleasure.”⁴³ Pleasure and pain converged in the maternal breast, signifying that mothering represented both a sacrifice and a peculiar privilege for women. Regardless of pain or pleasure, however, breastfeeding was also a very practical function. As one author noted, “happy the mother who *can* suckle her infant; she who has not the power to do so is deprived of one of the greatest maternal pleasures, while her toils and anxieties are more than doubled.”⁴⁴ Breastfeeding could be painful or enjoyable, but in either case the ability to breastfeed saved mothers the anxiety of entrusting their infants to wet nurses or the struggle of feeding them by hand. Furthermore, some authors suggested that women were wise to breastfeed in order to prevent them from becoming pregnant again too soon. As the midwife Mary Watkins explained, “a woman who does not nurse her own child has, generally, a present every year; this quickly exhausts her constitution.”⁴⁵ There were thus a number of practical reasons for which women should overcome their reluctance to suckle their children.

By the late eighteenth century prescriptive writers developed a fully sentimental vision of motherhood that emphasized the tenderness, sensibility, and overall perfection of the ideal mother. In the context of this vision, the language of pleasure became a

⁴² Catharine E. Beecher, *A Treatise on Domestic Economy, for the use of young ladies at home and at school*, (Boston: Marsh, Capen, Lyon, and Webb, 1841), 19.

⁴³ Buchan, *Advice*, 32.

⁴⁴ Mrs. J. Bakewell, *The Mother's Practical Guide in the Early Training of her Children Containing Directions for their Physical, Intellectual, and Moral Education* (New York: Published by G. Lane & P.P. Sandford for the Methodist Episcopal Church, 1843), 31.

⁴⁵ Watkins, *Maternal Solitude*, 8.

primary vehicle for promoting maternal breastfeeding. Advice manual authors evoked the emotional pleasure of the good mother as she suckled her child. William Dewees insisted that the mother “*must not delegate to any being the sacred and delightful task of suckling her child.*”⁴⁶ William Buchan argued that nursing was “an obligation so strongly enforced by nature, that no woman can evade the performance of it with impunity. But cheerful obedience to this sovereign law is attended with the sweetest pleasures of which the human heart is susceptible.”⁴⁷ The American physician Thomas Ewell wondered “how any woman could be so lost to the feelings of nature, as to give up the pleasure of this undertaking.”⁴⁸ The feelings of nature to which he referred could mean both the allegedly instinctive love of a mother for her child as well as the physical drive to nourish it, underscoring the ways in which breastfeeding was both a physical and an affective act. Natural instinct led a mother to cherish her infant and nurture it in both emotional and physical ways.

By highlighting pleasure as an inherent part of nursing, proponents of maternal breastfeeding naturalized a particular vision of the ideal mother whose happiness and beauty depended on an intimate physical connection with her infant. As one author exclaimed, “what a delightful employment it is to *suckle a beloved child*, who repays the kindness it receives with the sweetest caresses!”⁴⁹ The beloved nineteenth-century sentimental writer Lydia Sigourney, renowned as the “sweet singer of Hartford,” waxed

⁴⁶ Dewees, *Treatise*, 45.

⁴⁷ Buchan, *Advice*, 61.

⁴⁸ Thomas Ewell, *Letters to Ladies, detailing Important Information, Concerning Themselves and Infants* (Philadelphia: Printed for the Author 1817), 219.

⁴⁹ Mrs. Dawbarn, *The Rights of Infants, or, a Letter from a Mother to a Daughter Relative to the Nursing of Infants* (Wisbech, UK: John White, 1805), 11.

poetic on the pleasures of the nursing mother and exhorted women to fulfill their natural role in order to bask in the joys of motherhood:

Were I to define the climax of happiness which a mother enjoys with her infant, I should by no means limit it to the first three months. The whole season while it is deriving nutriment from her, is one of peculiar, inexpressible felicity. Dear friends, be not anxious to abridge this halcyon period. Do not willingly deprive yourselves of any portion of the highest pleasure of which woman's nature is capable.⁵⁰

Sigourney placed the experience of nursing at the center of maternal happiness and encouraged mothers to embrace and extend this source of joy. If pleasure was an inherent part of nursing, then good mothering must be by definition a pleasurable experience. A popular women's magazine corroborated this idea in a didactic sketch of the ideal mother:

she takes her child to her breast, and imparts that nourishment which the Creator has designed for its sustenance; and in so doing she is conscious of a new principle of delight, physically and morally. The turbulence of love is past, and she has now that tranquil enjoyment best adapted to her health and her moral and intellectual growth.⁵¹

In obeying the dictates of God and Nature, the good mother derived a new form of joy that permeated her body and spirit. No longer tumbled about by the passions of romantic love, she attained the highest state of womanhood and could enjoy the physical and emotional pleasures of maternity.

These representations of maternal pleasure culminated in an emphasis on the direct connection between the pleasure of the mother and the physical mother-child bond. Only by nursing, cradling, and embracing a child could a woman be a true mother. As Lydia Sigourney illustrated, these intimate acts were the key to maternal bliss. She spoke

⁵⁰ Lydia H. Sigourney, *Letters to Mothers* 2 ed. (New York, 1839), 29.

⁵¹ Mrs. Seba Smith, "Anxious Mothers," *The Mother's Assistant and Young Lady's Friend* 2, no. 12 (1842): 265-266.

directly to American mothers, writing:

You are sitting with your child in your arms. So am I. And I have never been as happy before. Have you? How this new affection seems to spread a soft, fresh green over the soul. Does not the whole heart blossom thick with plants of hope, sparkling with perpetual dew-drops? What a loss, had we passed through the world without tasting this purest, most exquisite fount of love.⁵²

In Sigourney's vision of motherhood, the bond between mother and child superseded all other affective ties and demonstrated women's moral superiority and positive influence in society. Moreover, the botanic images in her portrait of maternal bliss emphasized the naturalness of this vision of motherhood. Maternal love and pleasure grew like woodland flowers, watered with fountains of love. Indeed, the phrase "fount of love" was a particularly apt metaphor, for the lactating breast was consistently described as abundant and fount-like, a site where, as William Cadogan wrote decades earlier, milk "is poured forth from an exuberant, overflowing Urn, by a bountiful Hand, that never provides sparingly."⁵³ More pragmatically, medical writers also described mothers with milk ready to "gush from her nipples."⁵⁴ Thus Sigourney's emphasis on the fount of maternal love also brought forth images of the nursing mother whose body represented most clearly the perfection of the mother-child bond.

Prescriptive texts also made a connection between the physical fulfillment brought by motherhood and the development of perfect female beauty, implying that the emotional and physical satisfaction offered by nursing could physically transform the mother. Early authors had given mixed reviews of maternal beauty; William Cadogan, for instance, equivocated as to whether breastfeeding might lessen the loveliness of the

⁵² Sigourney, *Letters*, vii.

⁵³ Cadogan, *Essay*, 18.

⁵⁴ Buchan, *Advice*, 30.

maternal bosom. He recommended breastfeeding for “every Woman that can prevail upon herself to give up a little of the Beauty of her Breast to feed her Offspring,” but then insisted that “this is a mistaken Notion, for the Breasts are not spoiled by giving suck but by growing fat.”⁵⁵ But by the end of the century, sentimental views of breastfeeding were effusively optimistic about the effects of nursing on the female form. As one article in a ladies’ magazine insisted, “Blooming Health is the most precious attribute of Beauty, and is justly reckoned among the number of advantages resulting from maternal nurture. The delightful brightness which sheds its lustre over this delicate, and, at the same time, this most feeling and amiable part of the creation, is never more manifest than during the time of nurture.” Indeed, the author explained that while breastfeeding, “the woman undergoes a kind of happy metamorphosis, which almost renders her difficult to be known. Her skin becomes fine, soft, and fair; her features are refined into an uncommon degrees of sweetness, under the influence of this new regimen. The too-ardent carnation of her cheeks, tempered by the milky revolution, assumes a milder tint.”⁵⁶ Simply by breastfeeding, the ordinary woman was transformed, for “The young wife, whom languor held captive before her marriage, feels animation increasing with increase of person, and, becoming a nurse, acquires the bloom of the rose, instead of the paleness of the lily, that faded on the virgin cheek.”⁵⁷ The act of nursing made the mother the loveliest of all creation; her skin, features, movement, voice, and figure surpassed the beauties of the virgin, who paled in comparison to the exquisite lactating mother. Such effusive discussions of the benefits of breastfeeding fed into advice authors’ evocations of

⁵⁵ Cadogan, *Essay*, 27.

⁵⁶ “The Advantages of Maternal Nurture,” *Ladies’ Monthly Museum* (1799): 184.

⁵⁷ “The Advantages of Maternal Nurture,” *Ladies’ Monthly Museum* (1799): 184.

pleasure by positing a correlation between maternal pleasure and superlative feminine beauty.

But not all descriptions of the nursing mother's body emphasized the link between nursing and exquisite physical beauty. William Dewees joined a long tradition of writers who fixated on the body of the wet nurse when he quoted the following verses on choosing a good nurse:

Choose one of middle age, nor old nor young,
Nor plump, nor slim her make, but firm and strong:
Upon her cheek let health refulgent glow,
In vivid colors, that good humor show.
Long be her arms, and broad her ample chest,
Her neck be finely turned, and full her breast:
Let the twin hills be white as mountain snow,
Their swelling veins, with circling juices flow;
Each in a well projecting nipple end,
And milk in copious streams from these descend.⁵⁸

Although this description, originally from the pen of a sixteenth-century French lawyer, resembled the preceding portrait of female beauty in its evocation of a graceful neck and full figure, this portrait was manifestly more utilitarian than sentimental. The woman pictured here was robust, rosy, and built for nursing. Her breasts may have been "white as mountain snow," a nice aesthetic touch, but they also had swelling veins and large nipples to enable her to succeed as a wet nurse. Physical health, rather than feelings such as happiness or fulfillment, seemed to be the order of the day. The difference between these two portraits, one of the ideal nursing mother and one of the ideal wet nurse, demonstrates that the ideology of sentimental motherhood did not apply to all women.

⁵⁸ Quoted in Dewees, *Treatise*, 167-168. These verses came from *The Paedotrophia*, a poem in Latin written in three books about pregnancy, childbirth, and child care by Scevole de Ste. Marthe, a French lawyer, in 1584. It was translated into English by Dr. Tyler in 1797 and was subsequently reprinted many times. See P.M. Dunn, "Perinatal Lessons From the Past: Scevole de Ste Marthe of France (1536-1623) and *The Paedotrophia*," *Archives of Disease in Childhood* 67 (1992): 468-469.

The wet nurse was not sentimentalized as a good mother, though she was praised for the utility of her physical attributes. Indeed, the description of the body of the wet nurse indicates that breastfeeding provided a context in which social status could be articulated on and around the maternal body. Descriptions of the ideal sentimental mother established a distinction between women who were considered “true” mothers and those who were merely (re)productive bodies, a theme which will be taken up more fully in the following chapter.

The act of breastfeeding was more than a symbol of ideal motherhood: writers’ effusive descriptions also raised the issue of sensual and even sexual pleasure. Marilyn Yalom argues that Western culture has been marked by two visions of the breast: the sacred and the sexual. As she writes, “These sacred and sexual aspects represent two different tugs at the breast. The mandate to nurse and the mandate to titillate are competing claims that continue to shape women’s fate.”⁵⁹ Ruth Perry offers a similar evaluation of the female breast, arguing, based on her readings of eighteenth-century English texts, that “It was as if this organ became the site of the struggle over the maternal definition of women, staged in opposition to the sexual definition of women.”⁶⁰ Indeed, there is a long (and continuing) history of tension between motherhood, breastfeeding, and female sexuality. In the seventeenth and early eighteenth centuries it was believed that sexual intercourse was detrimental to the flow and quality of breast milk; abstinence was considered the appropriate choice for lactating mothers.⁶¹ As Perry

⁵⁹ Yalom, *History of the Breast*, 5.

⁶⁰ Ruth Perry, “Colonizing the Breast: Sexuality and Maternity in Eighteenth-Century England,” *Journal of the History of Sexuality* 2, no. 2 (October 1991): 218.

⁶¹ Paula Treckel, “Breastfeeding and Maternal Sexuality in Colonial America,” *Journal of Interdisciplinary History* 20, no. 1 (1989): 31.

argues, particularly in the eighteenth century, “maternity came to be imagined as a counter to sexual feeling.”⁶² The good mother was too moral to be subject to base sensuality and sexual feeling. Although this dichotomy of the good and bad breast, the maternal and the sexual, held true in many contexts (and continues to act in American society today), I argue that prescriptive discussions of breastfeeding from the late eighteenth century to the early nineteenth century took a very different approach by uniting the sacred *and* the sexual in the breast of the sentimental mother. As one writer explained, it was a woman’s “*maternal* relations which most of all endear the wife to her husband, besides making her love him inexpressibly more for being the *father of her idolized children*.”⁶³ The sacred duties of motherhood thus reinforced the romantic attachment of husband and wife. In the context of breastfeeding, physicians and domestic authors emphasized the physical delights of nursing and created a vision of desire and pleasure that could flourish within the safe confines of motherhood and matrimonial affection.

Scholars have tended to treat motherhood and sexuality as separate phenomena with distinct histories, despite the obvious fact that, biologically speaking, they are necessarily linked. One reason for this disinclination to consider sexuality and motherhood in tandem, I believe, is our own cultural uneasiness with anything that allows for slippage between that which is maternal and that which is sexual. In the twenty-first century we do not like to think simultaneously about parenting and sex. Yet the female body that gives birth may also be the body that experiences and creates desire, receives

⁶² Perry, “Colonizing the Breast,” 209.

⁶³ O.S. Fowler, *Love and Parentage, applied to the improvement of offspring* (1834) (New York: Fowlers & Wells, 1850), 58.

and gives pleasure. Another reason that it is so difficult to understand maternity and sexuality in tandem is that historians often cling to a rigid understanding of sexuality in terms of (primarily heterosexual) intercourse, without considering the complex play of desires and sensations that constitute the human experience of sexuality. We need to be more flexible in our understanding of both motherhood and sexuality in order to see the full complexity of the past and of our own present. Focusing on the rhetoric of pleasure in discussions of breastfeeding brings these two concepts and their respective historiographies together and adds new insight to our understanding of the trope of sentimental motherhood that came to dominate American culture by the nineteenth century. Perhaps it will also prompt us to reexamine the ways in which American culture and society today consistently places the sexual body and the maternal body at odds with one another.

Enthusiastic descriptions of maternal pleasure in prescriptive literature located both maternal virtue and sexual pleasure in the act of breastfeeding, revealing a complex understanding of the relationship between maternity and sexuality. This complexity is borne out particularly in scholarly debates about the nature of sexual ideology in the eighteenth and nineteenth centuries. Was sexuality—female sexuality in particular—firmly repressed? Or was it joyously expressed? Or something in between? Just as scholars have shown that the period from the late eighteenth century to the early nineteenth century was a transitional moment for ideas about motherhood, historians have argued that this period also saw changes in sexual ideology. Nancy Cott was one of the earliest scholars to posit a change in female sexual ideology that occurred over the course of the eighteenth century. Prior to that period, women were defined as particularly lustful

and driven by sexual passion, but by the nineteenth century more weight was given to women's moral nature and their capacity for sexual desire was deemphasized by a rhetoric of "passionlessness."⁶⁴ Richard Godbeer's more recent examination of courtship narratives in late eighteenth-century New England corroborates this narrative, explaining that, "whereas earlier writings had often emphasized the untrustworthiness of women, didactic literature now portrayed them as natural guardians of virtue and depicted men as morally depraved."⁶⁵ Not all historians, however, emphasize the growing sexual repression of women in eighteenth-century America. Clare A. Lyons's study of sexuality in Philadelphia uncovers a rich culture of sexual expression that extended to women and men of diverse class and race backgrounds. She argues that this permissive sexual culture gave women a surprising degree of autonomy in their sexual lives and flourished from the mid-eighteenth century to the turn of the nineteenth century. Only at the beginning of the nineteenth century did middle-class Philadelphians begin to redefine and restrict appropriate sexual expression, with particular repercussions for women.⁶⁶

Like Clare A. Lyons, many historians have marked the beginning of the nineteenth century as a turning point in the history of sexuality, ushering in a period of growing restraint in sexual ideology and practice. While there is good evidence for this interpretation, other scholars have rightly questioned what Michel Foucault refers to as the "repressive hypothesis." Foucault's foundational study of nineteenth-century

⁶⁴ Nancy F. Cott, "Passionlessness: An Interpretation of Victorian Sexual Ideology, 1790-1850," *Signs* 4, no. 2. (Winter 1978): 221.

⁶⁵ Richard Godbeer, *Sexual Revolution in Early America* (Baltimore: Johns Hopkins University Press, 2002), 15

⁶⁶ Clare A. Lyons, *Sex Among the Rabble: An Intimate History of Gender and Power in the Age of Revolution, Philadelphia, 1730-1830* (Chapel Hill: University of North Carolina Press, 2006), esp. chapter 8.

bourgeois sexuality argues that rather than being an era of repression, the nineteenth century in fact saw a vast multiplication of sexual discourses and identities. Although medical, religious, and cultural discourses sought to create and enforce a normative vision of bourgeois sexuality, Foucault argues that, “the nineteenth century and our own have been rather the age of multiplication: a dispersion of sexualities, a strengthening of their disparate forms, a multiple implantation of ‘perversions.’” Carroll Smith-Rosenberg has explored this “dispersion of sexualities” in nineteenth-century America. Her classic article on intimacy and love among women sheds light on the passionate, even sexual, relationships possible among women, while her analysis of sex in Jacksonian America acknowledges the culture of sexual restraint that dominated Victorian sexual ideology, but suggests that “pornography, venereal disease rates, prostitution, and widespread abortion point to a society actively engaged in the pursuit of real and of fantasied sexual pleasures, both within and without conjugal confines.”⁶⁷

More recent scholarship has shifted from sexual ideology to a new focus on sexual practices and attitudes among nineteenth-century Americans, revealing much greater openness and enthusiasm for sexuality than previously suspected. John D’Emilio and Estelle Freedman’s comprehensive survey of American sexualities argues that in the nineteenth century “the reproductive moorings of sexual experience gradually gave way

⁶⁷ Michel Foucault, *The History of Sexuality: An Introduction (La volonté de savoir)* (1976), Robert Hurley, trans. (New York: Vintage Books, 1990), 37. Carroll Smith-Rosenberg, “The Female World of Love and Ritual: Relationships Between Women in Nineteenth-Century America,” *Signs* 1, no. 1 (Autumn 1975): 1-29. Carroll Smith-Rosenberg, “Sex as Symbol in Victorian Purity: An Ethnohistorical Analysis of Jacksonian America,” *The American Journal of Sociology*, 84 (1978): S212. For similar studies of sexual repression versus expression in Europe, see for example Peter Gay, *The Education of the Senses*, vol. 1 of *The Bourgeois Experience: Victoria to Freud* (New York: Oxford University Press, 1984) and *The Tender Passion*, vol. 2 of *The Bourgeois Experience: Victoria to Freud* (New York: Oxford University Press, 1984); Steven Marcus, *The Other Victorians: A Study of Sexuality and Pornography in Mid-Nineteenth-Century England* (New York: Basic Books, 1966). For a nuanced critique of debates about repression, see Steven Seidman, “The Power of Desire and the Danger of Pleasure: Victorian Sexuality Reconsidered,” *Journal of Social History* 24 (1990): 47-67.

to a new constellation of meanings, in which both love and intimacy became increasingly important.” As married couples began to exercise control over childbearing, sexuality came to have a life of its own apart from reproduction, although women’s lives continued to be heavily determined by the work of childbearing and rearing. Moreover, D’Emilio and Freedman argue that “during courtship and in marriage, sexuality came to be more deeply associated with the emotion of love and the quest for interpersonal intimacy.” More recently, Karen Lystra has taken up the question of romantic love and sexual intimacy. Exploring the attitudes of women and men toward one another and toward love, marriage, and sex, Lystra argues that in the nineteenth century “both men and women saw sexual desire as the natural physical accompaniment and distillation of romantic love . . . Under the right circumstances, sex might be viewed as a romantically inspired religious experience, a sacrament of love.”⁶⁸ In this view, sex enhanced the affective bonds that were at the heart of the domestic sphere, indicating that locating female sexual pleasure in the context of motherhood was not perhaps as anomalous as it might initially seem. Pleasures, both maternal and conjugal, might blend and merge to reinforce the strength of family affections.

Thinking about motherhood and sexuality in tandem pushes us to think more flexibly about the category of sexuality, and what we mean when we speak of sexual pleasure. Most adult women in the eighteenth and nineteenth centuries could not separate sexuality from motherhood in the way that we do in twenty-first century America, where the widespread availability of effective contraception disengages the assumed link between sex and parenthood. In earlier eras sexual intercourse almost inevitably led to

⁶⁸ John D’Emilio and Estelle B. Freedman, *Intimate Matters: A History of Sexuality in America*, 2nd ed. (Chicago: University of Chicago Press, 1997), 56. Karen Lystra, *Searching the Heart: Women, Men, and Romantic Love in Nineteenth-century America* (New York: Oxford University Press, 1989), 59.

motherhood, and women who survived until menopause likely spent a large percentage of their married lives either pregnant or lactating. Their sexual lives were thus inextricably entwined with their experiences as mothers, a fact which should push us to examine what it meant to be a simultaneously maternal and sexual body. Kathryn Schwarz signals the need to view the maternal breast as a possible site for female sexual pleasure, in the context of the “erotic dyad of mother and child,” and “still more disruptively,” to consider the ways in which “the eroticized maternal breast might always prove to be *self-satisfying*, self-contained in its economy of desire.”⁶⁹ Thus it is important to read eighteenth- and nineteenth-century prescriptive discussions of breastfeeding with an eye toward the maternal breast as a locus of female pleasure while also considering it as a center for the pleasures of both infant and husband.

Advice manuals linked women’s emotional satisfaction to the bodily experiences of maternity by portraying this mother-child bond as a profoundly physical experience that offered the mother sensual pleasure. By focusing on the physical sensations of breastfeeding, many writers came to describe nursing as an erotic practice. In order to make sense of these eroticized depictions of breastfeeding, it is important to note the characteristics of more recognizably erotic texts. In her study of eighteenth-century English erotica, Karen Harvey usefully defines erotica as “material about sexual pleasure which depicted sex, bodies and desire through illusions of concealment and distance: bodies were represented through metaphor and suggestion, and depictions of sexual

⁶⁹ Kathryn Schwarz, “Missing the Breast: Desire, Disease, and the Singular Effect of Amazons,” David Hillman and Carla Mazzio, eds., *The Body in Parts: Fantasies of Corporeality in early Modern Europe* (New York: Routledge, 1997), 155.

activity were characterized by deferral and silence”⁷⁰ The concepts of suggestion, deferral, and silence are particularly useful here in considering the erotic in maternal advice literature. Such texts of course have never been classified as erotica, nor should they be; they were above all intended as practical and ideological guides for mothers and families. Yet to notice in representations of breastfeeding the suggestion and deferral of sexual pleasure between husband and wife, the silence surrounding the possibilities of autonomous female pleasure centered on the breast, and the satiety of the nursing infant as a possible metaphor for or displacement of sexual satisfaction, is to comprehend the enormous complexity of ideas about sexuality and motherhood in the eighteenth and nineteenth centuries.

Explicitly erotic texts sometimes created a rhetorical link between breastfeeding and sexual desire. Thomas Stretzer’s *A New Description of Merryland* (1740), part of a genre of geographic erotica that portrayed the female body topographically, dwelt fondly on the charms of the female body, including lactating breasts:

There are two other pleasant little Mountains called BBY, which ‘tho at some Distance from MERRYLAND, have great Affinity with that Country, and are properly reckoned as an Appendage to it. These little Mountains are exactly alike, and not far from each other, having a pleasant Valley between them; on the Top of each is a fine *Fountain*, that yields a very wholesome Liquor much esteemed, especially by the younger sort of People.⁷¹

Stretzer’s text indicated that the breasts and their fine fountains of milk were as much a part of the erotic topography of the female body as any other part, indicating that there was little distinction between the maternal breast and the uniquely sexual breast. One

⁷⁰ Karen Harvey, *Reading Sex in the Eighteenth Century: bodies and Gender in English Erotic Culture* (Cambridge: Cambridge University Press, 2004), 20.

⁷¹ Thomas Stretzer, *A New Description of Merryland: Containing, a topographical, geographical, and natural history of that country*, 10th ed. (London: E. Curll, 1742), 37-38.

might easily become the other, with little change in its status as part of the wonderfully desirable female body.

Some early prescriptive texts also offered explicitly sexualized discussions of the physiology of breastfeeding. The sixteenth-century French royal physician, Ambroise Paré, described the act of breastfeeding as explicitly sexual, for he explained that, “as the breast is tickled, the womb is aroused and feels a pleasurable titillation, since that little tip of the breast is very sensitive because of the nerves that end there.” This titillation provided an incentive for “the female to offer and exhibit her breasts more willingly to the child, who tickles them sweetly with its tongue and mouth, from which the woman derives a great delectation.”⁷² Paré was obviously aware, at least to a certain extent, of the physiological link between suckling and sexual arousal. Writing in the mid-eighteenth century, the British physician John Burton was equally specific, describing how the reproductive organs were connected by nerves to other parts of the body and using this fact to explain “why some [women] are so fond of giving Suck, and why Tickling the Nipples occasions an agreeable Sensation in the *Clitoris*.”⁷³

Prescriptive authors in the late eighteenth and nineteenth centuries were not shy in dwelling upon the erotic pleasures of the lactating mother and her nursing infant, though they were generally less precise than their predecessors about the exact physiology of such pleasures. More than two centuries after Paré, William Buchan insisted that “all nurses concur in declaring, that the act itself is attended with sweet, thrilling and delightful sensations of which those only who have felt them can form any idea,” and

⁷² Quoted in Yalom, *History of the Breast*, 71.

⁷³ John Burton, *An Essay Towards a Complete New System of Midwifery, Theoretical and Practical, together with the Descriptions, Causes, and Methods of Removing or Relieving the Disorders Peculiar to Pregnant and Lying-in Women, and New-born Infants* (London, 1751), 10-11.

gushed that “the mental raptures of a fond mother at such moments are far beyond the powers of description or fancy.”⁷⁴ Breastfeeding was indeed a stimulating subject, prompting Buchan to refer on two separate occasions to the “thrilling sensations” of breastfeeding.⁷⁵ Buchan’s reference to thrilling sensations clearly marks the enduring influence of Enlightenment ideas about sensibility, invoking the belief that the stimulation of the nerves also prompts a correspondingly intense emotional response.⁷⁶ Thus the physical pleasures of breastfeeding logically stimulated corresponding emotional pleasures. William Dewees’ *Treatise on the Physical and Medical Treatment of Children* contained an entire section on breastfeeding “*As a Pleasure*.” He offered therein a strikingly erotic description of the physical pleasures of lactation:

If we can believe the *fond mother* upon this point, there is no earthly pleasure equal to that of suckling her child—and if any reliance can be placed upon external signs, she is every way worthy of belief. This pleasure does not seem to be the mere exercise of social feeling while the mother is witnessing the delight of the little hungry urchin, as it seizes upon the breast—nor from the rapturous expression of its speaking eye, nor the writhing of its little body from excess of joy—but from a positive pleasure derived from the act itself; for most truly it may be said, when

‘The starting beverage meets its thirsty lip,
‘Tis joy to yield it, as ‘tis joy to sip.’⁷⁷

If Dewees was to be believed, breastfeeding was a physically pleasurable experience for both mother and infant that was tinged with eroticism. The raptures of the mother and her infant centered on the breast, a symbol of both motherhood and sexuality. In Dewees’s

⁷⁴ Buchan, *Advice*, 31, 61.

⁷⁵ For the second reference to “thrilling sensations,” see Buchan, *Advice*, 61. “The thrilling sensations, as before observed, that accompany the act of giving suck, can be conceived only by those who have felt them.”

⁷⁶ For more on the connection between nerves and emotions in Enlightenment thought, see Burnstein, *Sentimental Democracy*, esp. chapter 1.

⁷⁷ Dewees, *Treatise*, 55-56.

vision, the mother did not enjoy nursing her child merely because in doing so she fulfilled her social duty, but because the connection between her body and that of her infant created a physically pleasurable bond. Another physician, Frederick Hollick, suggested that the infant also derived sensual pleasure from suckling: “The graceful swell of the fully developed breast is, however, a matter of positive utility, as well as of beauty, because it better adapts it to the use of the child, and probably also adds to its *pleasure*, as anyone may readily conceive who will observe the delight with which an infant, even when not nursing, will often caress it.”⁷⁸ Dewees and Hollick seemed to hint at what Sigmund Freud would much later make explicit in his work on child sexuality—that the experience of sexual satisfaction begins with taking nourishment from the breast. As Freud wrote, “No one who has seen a baby sinking back satiated from the breast and falling asleep with flushed cheeks and a blissful smile can escape the reflection that this picture persists as a prototype of the expression of sexual satisfaction in later life.”⁷⁹

Breastfeeding was seen as a physically pleasurable, even arousing, act for both mother and infant. Yet to view breastfeeding solely in terms of the bond between mother and child evades the fullness of breastfeeding as an affective and an erotic act. In addition to highlighting the bond between the nursing mother and her infant, advice manual authors emphasized the link between maternal breastfeeding and marital happiness. Hugh Smith insisted that “a charming offspring will assuredly contribute to unite parents in the lasting bond of friendship.” He also suggested that the healthful effects of breast milk on the infant would in turn solidify the marital union, uniting mother and father in their pride

⁷⁸ Frederick Hollick, *The Matron's Manual of Midwifery, and the Diseases of Women During Pregnancy and in Child Bed* (New York: T.S. Strong, 1848), 79.

⁷⁹ Sigmund Freud, *On Sexuality: Three Essays on the Theory of Sexuality*, translated by James Strachey, edited by Angela Richards (New York, 1977), 98.

and love for their thriving child.⁸⁰ Others evoked a more sensual relationship between husband and wife, proclaiming that “there is no enjoyment in nature which affords such exquisite pleasure as is felt by a tender mother, when she is nourishing her infant at her breast, and beholds her husband smiling in approbation.”⁸¹ Although in this scene the husband ostensibly communicates his approval of his wife’s virtue as a mother, the gaze of the husband and the “exquisite pleasure” of the mother signaled other dimensions of their relationship. Smith evoked more clearly the implications of this scene for the matrimonial relationship. Rapturously describing how a husband must feel upon seeing “a dear little cherub at your breast,” he wrote that, “How ardent soever such an one’s affections might be before matrimony, a scene like this will more firmly rivet the pleasing fetters of love.”⁸² Moreover, he insisted that, “though a beautiful virgin must ever kindle emotions in a man of sensibility, a chaste, and tender wife, with a little one at her breast, is certainly to her husband the most exquisitely enchanting object upon earth.”⁸³ Other authors agreed, for

Who but a flint-hearted gelding, emasculated of every manly virtue and feeling, can ever cease to love her who has borne him even but one child, and love her more and more by every new object of parental love? Certainly, who not riddled of every masculine feeling, but will be doubly enamored of her maternal charms, and chant anthems of perpetual love to her, while carrying within her the sacred casket of all his joys and treasures?⁸⁴

Drawing a connection between true masculinity and passion for the charming mother,

⁸⁰ Smith, *Monitor*, 45.

⁸¹ Dawbarn, *Rights of Infants*, 11.

⁸² Smith, *Monitor*, 71.

⁸³ Smith, *Monitor*, 76.

⁸⁴ O.S. Fowler, *Maternity, or the Bearing and Nursing of Children* (New York: Fowler & Wells, 1848), 128.

this author made it clear that maternity only enhanced female charms and masculine desire. Overall, prescriptive writers agreed that women only became more appealing when they became mothers and that the passion created by parenthood (properly experienced within marriage, of course) outstripped young love.

These descriptions of breastfeeding, moreover, accentuated parallel pleasures invoked by the touch and the gaze. Whereas descriptions of the mother and infant emphasized the importance of reciprocal touching, here the gaze of the husband took center stage and intimated that the sight of breastfeeding might provide as much pleasure as the physical experience itself. The husband took pleasure from watching his wife, while the wife took pleasure both from her physical contact with her infant *and* from perceiving her husband's gaze. Karen Harvey explores the notion that visual connoisseurship was a specifically "masculine endeavor," especially when concerned with the female form. Indeed, the anxieties expressed in the nineteenth-century medical texts examined in the previous chapter, for instance, articulated a unique connection between sexual desire and the male gaze.⁸⁵ American physicians such as William Dewees and Joseph Warrington insisted that male midwives examine their female patients by touch only, keeping their eyes averted and the body of the woman entirely covered from sight so as to avoid any indelicate possibilities.⁸⁶ The professional touch of the physician was less dangerous, less potentially erotic than the sight of a woman's flesh. It is no wonder that the sight of a woman breastfeeding might contain erotic possibilities: her flesh was evocative of both motherhood and sexuality, and the gaze of her husband

⁸⁵ Harvey, *Reading Sex in the Eighteenth Century*, 71.

⁸⁶ See for instance Joseph Warrington, *Obstetric Catechism; Containing Two Thousand Three Hundred and Forty-Seven Questions and Answers On Obstetrics Proper* (Philadelphia, 1854), 113-114.

encompassed and enjoyed both aspects of her corporeality.

An article in a ladies' magazine excerpted from the *Philosophia de l'univers* (1796), by the French economist and writer Pierre Samuel Dupont de Nemours, described the ideal woman's physical attributes and explicitly attested to fact that the maternal breast was always also a sexual breast. Exploring the intersection of motherhood and sexuality, the author proclaimed:

Let her enchanting bosom represent the celestial globes, of which a rose-bud shall form the magnetic pole. Let it offer to desire its first enjoyment—its first nourishment to infancy; and let man ever remain in doubt whether it has most contributed to the happiness of the father or the son.⁸⁷

Here, the infant's pleasure and that of the husband (and perhaps the mother too) intertwined around the enchanting breast. The author emphasized that the first use of the breast was for the fulfillment of sexual desire, secondly the fulfillment of maternal duty. Which of the two was more important, the author could not quite decide, but his coy conclusion suggested that male sexual desire may have been foremost in his thoughts even as the sexual overtones of the phrases were mitigated by parenthood. Whatever his interest in the female breast, he brought together motherhood and sexuality in one clear image.

In the descriptions of advice manual authors, breastfeeding was a three-way site of familial pleasure. The maternal breast became the focal point of the scene in which mother and infant enjoyed the tenderness of mutual caresses while the husband bore rapturous witness to their pleasures. The erotic tones in the writings of authors such as

⁸⁷ "Woman," *Ladies' Literary Cabinet, Being a Repository of Miscellaneous Literary Productions, both Original and Selected, in Prose and Verse* 7, no. 1 (Saturday, December 21, 1822): 5. The introduction to the article reads: "The following idea of the formation of Woman, is extracted from a Treatise, entitled *Philosophia de l'Univers*, written by Dupont De Nemours.—Perhaps a more eloquent and delightful description never came from the pen of man."

Smith, Buchan, Dawbarn, Sigourney, and Dewees revealed that maternity and sexuality were meant to go hand in hand in the context of marriage. Certainly if they had wanted to desexualize maternity and reinforce women's passionlessness, words such as *exquisite*, *ardent*, *thrilling*, *caresses*, *delight*, *rapturous*, *writhing*, and *excess* were infelicitous choices. Yet the tension between words that emphasized maternal purity—*chaste*, *tranquil*, *tender*, *friendship*—and those that explored eroticism did attest to a certain ambivalence toward female sexuality and its relationship to motherhood. The frequent mixture of both restrained and exuberant vocabulary implied a drive to embrace pleasure while remaining within the safe bounds of genteel restraint.

In their descriptions of the beauty, desirability, and virtue of nursing mothers, writers also claimed that breastfeeding created important familial ties that restrained male sexuality. As the British physician Hugh Smith argued, "By these powerful ties, many a man, in spite of impetuous passions, is compelled to continue the prudent, kind, indulgent, tender husband."⁸⁸ By insisting on the respect due a virtuous mother, these authors envisioned a way of controlling men's carnal urges and privileging female purity. We could read the sensual descriptions of breastfeeding as a way of concealing female sexual pleasure within the more chaste physical enjoyment of maternity and controlling men's sexual appetite by emphasizing the respect due the pure mother. Yet to assume that advice manual authors sought only to disguise and restrain sexuality too readily accepts scholarly assumptions about sexual repression in this time period.⁸⁹ Instead, we might

⁸⁸ Smith, *Monitor*, 70, 45.

⁸⁹ Carroll Smith-Rosenberg has aptly noted that "sexual repression has most fascinated scholars of the 19th century" (S212). In "Sex as Symbol in Victorian Purity: An Ethnohistorical Analysis of Jacksonian America" (*The American Journal of Sociology*, 84 (1978), S212-S247. As discussed earlier in this chapter, while some of Smith-Rosenberg's own work as well as more recent work by other scholars such as Karen

view the pleasures of breastfeeding as part of the ascendancy of romantic love in American culture, by which sex became an acceptable and even sacred component of a loving relationship. Karen Lystra writes that “Properly sanctioned by love, sexual expressions were read as symbolic communications of one’s real and truest self, part of the hidden essence of the individual.” Moreover, Lystra argues that Americans saw children as precious symbols of romantic love.⁹⁰ Indeed, we might see the eroticized triad of mother-infant-father as a means of retaining sexual desire and expression within the bounds of the home, offering a safe realm of sexual expression for virtuous women while drawing men away from the world of vice and into the bosom of the family. Thus motherhood and sexuality were not necessarily incompatible, for sexual enjoyment could be justified and sanctified by romantic love and by parenthood.

Representations of breastfeeding and its connection to loving marital relations hinted at this evolving attitude toward sexuality and romantic love in the late eighteenth and early nineteenth centuries. Descriptions of the nursing mother’s sensual enjoyment opened an avenue for acknowledging women’s physical pleasure while still remaining within the proper bounds of sentimental and domestic imagery. The erotic tones in advice manuals implied willingness, eagerness even, to explore women’s capacity for erotic enjoyment in the context of sentimental motherhood. At times these authors offered descriptions of the pleasures of breastfeeding in which the husband’s enjoyment was situated in his gaze. As we have seen, writers like William Dewees imagined scenes in which the viewer enjoyed the “external signs” of the mother’s physical pleasure, while

Lystra has expanded to consider other attitudes toward sex, the concept of sexual repression still looms large in our historical imaginings of the nineteenth century.

⁹⁰ Lystra, *Searching the Heart*, 59, 77.

the mother appreciated the “writhing” of the infant at her breast from “excess of joy.”⁹¹ Hugh Smith’s evocation of maternal bliss pointed even more explicitly to the enjoyment of the husband gazing at his nursing wife, “the most exquisitely enchanting object upon earth.”⁹² Whether these men understood that breastfeeding could in fact stimulate some of the same sensations as sexual activity, or whether they merely applied the same erotic possibilities to the lactating breast as to the explicitly sexualized breast is unclear.⁹³ Nevertheless, their descriptions of breastfeeding evoked inescapably erotic dimensions.

These erotically charged descriptions add important nuance to our understanding of the trope of the ideal sentimental mother. While historians might be inclined to ask whether the script of sentimental motherhood could be ideologically reconciled with visions of a robust female sexuality, perhaps a better question might be, did maternity and sexuality *need* to be reconciled? The language of pleasure employed by advocates of maternal breastfeeding performed important work in the cultural production of the sentimental maternal ideal by emphasizing the role of breastfeeding in cementing familial bonds and demonstrating maternal virtue. But descriptions of breastfeeding also valorized sensual pleasure and eroticized the figure of the mother without tarnishing her claims to virtue. It seems that maternity and sexuality could coexist easily and naturally, rhetorically as well as in real life. Seamlessly invoking the joys and duties of motherhood

⁹¹ Dewees, *Treatise*, 55-56.

⁹² Smith, *Monitor*, 76.

⁹³ Recent scholarship in disciplines including sociology, anthropology and medicine has identified a physiological correlation between sexual arousal and the physical stimulation of breastfeeding. In *Bearing Meaning: The Language of Birth* (Urbana: University of Illinois Press, 1995), Robbie Pfeufer Kahn explains that the hormone oxytocin stimulates labor, is released by nursing, and “also triggers orgasm, which results in rhythmic contractions of the uterus for as long as twenty minutes after lovemaking and during breastfeeding” (233-234).

and wifehood, William Buchan perhaps best summarized the multiple rewards of good mothering. Interestingly, his words seem to be borrowed nearly verbatim from the English midwife Martha Mears, whose advice manual for childbearing women was published in 1797, revealing the extent to which such ideas were shared and reproduced.⁹⁴ In Buchan's view, the nursing mother

ensures the fulfillment of the promises made by the best writers on this subject—speedy recovery from child-bed, the firm establishment of good health, the exquisite sense of wedded joys, the capacity of bearing more children, the steady attachment of her husband, the esteem and respect of the public, the warm returns of affection and gratitude from the objects of her tender care, and after all, the satisfaction to see her daughters follow her example and recommend it to others.⁹⁵

Buchan's ideal maternal script connected the "exquisite sense of wedded joys" to other facets of motherhood and marriage. Although he left to the reader's imagination the exact nature of *wedded joys*, he implicitly tied together the sexual enjoyment of the husband and wife and the satisfaction of the good mother. The concept of maternal sexuality was thus not the oxymoron it might seem, but an important part of the sentimental maternal ideal.

In many ways, these advice manual authors were well ahead of their time in acknowledging the potential for physical, even erotic, pleasure while breastfeeding. Only in the late twentieth century did a few American women begin to embrace the many kinds of pleasure implicated in the act of breastfeeding. American feminist poet Alicia Ostriker was one of the first women openly to discuss sexual arousal during breastfeeding. Ostriker described breastfeeding in the following verses:

Greedy baby
sucking the sweet tit

⁹⁴ See Martha Mears, *The Pupil of Nature; or Candid Advice to the Fair Sex* (London, 1797), 140.

⁹⁵ Buchan, *Advice*, 61.

your tongue tugging the nipple tickles your mama
your round eyes open appear to possess understanding
when you suckle I am slowly moved
in my sensitive groove
you in your mouth are alive, I in my womb.⁹⁶

Adrienne Rich has explored similar connections between breastfeeding and sexuality.

“The act of suckling a child,” she writes, “like a sexual act, may be tense, physically painful, charged with cultural feelings of inadequacy and guilt; or, like a sexual act, in can be a physically delicious, elementally soothing experience, filled with a tender sensuality.”⁹⁷ But in the United States today any hint of sexual pleasure in the context of a maternal act conjures up the specter of sexual abuse in the public imagination, and the consequences for women who have admitted to feeling physical pleasure have been dire. Marilyn Yalom describes a case in which a child was taken away from its mother because she admitted to a feeling of arousal during breastfeeding. Yalom writes, “Apparently, from at least one reported incident, it is horrible for a mother to admit that she becomes aroused while nursing.”⁹⁸ It seems likely that an eighteenth- or nineteenth-century audience would have been perplexed and outraged by the actions of the court. But now at the beginning of the twenty-first century most Americans recoil at the thought that breastfeeding affords the mother any pleasure other than the satisfaction of a duty well done. In contrast, eighteenth- and nineteenth-century prescriptive authors created a rhetorical framework in which women could experience physical pleasure as an integral

⁹⁶ Alicia Suskin Ostriker, *The Mother/Child Papers* (Boston: Beacon Press, 1980), 18.

⁹⁷ Adrienne Rich, *Of Woman Born: Motherhood as Experience and Institution* (New York: W.W. Norton & Company, 1986), 36.

⁹⁸ See Yalom, *History of the Breast*, 254-255. Cindy Stearns also discusses the tension in today’s society between the maternal and the sexual breast and cites the case of Karen Carter who similarly lost custody of her child for more than a year for voicing her concerns about feelings of sexual arousal when breastfeeding. See Cindy Stearns, “Breastfeeding and the Good Maternal Body,” *Gender and Society* 13, no. 3 (June 1999): 309.

part of ideal motherhood.

Yet embracing women's physical pleasure in the context of motherhood was not meant to liberate women from the confines of feminine virtue. Indeed, by locating physical pleasure within that most symbolic act of mothering, prescriptive authors bound women to a single identity. The biology of women's bodies designated them as child bearers and nurses, and popular representations of motherhood in the late eighteenth and early nineteenth centuries likewise came to equate *woman* and *mother*. As popular author Lydia Sigourney explained,

The love of children, in man is a virtue: in woman, an element of nature. It is a feature of her constitution, a proof of His wisdom, who, having entrusted to her the burden of the early nurture of a whole race, gave that sustaining power which produces harmony, between her dispositions, and her allotted tasks.⁹⁹

Prescriptive authors described the experience of mothering as one of unmitigated joy and importance for the individual, the family, and society. Women were meant to derive pleasure—even erotic pleasure—from the maternal role, but this pleasure was circumscribed within very clear limits. Women, or at least good women, fulfilled naturally and instinctively the role of the sentimental mother, who exemplified “true domestic bliss,/The fountain of maternal love,/Welling with happiness.”¹⁰⁰ To step beyond this role was to leave the safety of domesticity and to expose oneself to the scorn and derision of society—to become unnatural and monstrous.

By focusing on one facet of the body of the ideal mother—her beauty, and her pleasures in the context of breastfeeding—medical and prescriptive writers privileged a single physical act as the symbol of ideal sentimental motherhood. Unlike medical

⁹⁹ Sigourney, *Letters*, 46.

¹⁰⁰ Mr. E.W. Robins, “On a Mother and Her Infant,” *The Mother's Assistant and Young Lady's Friend* 6, no. 6 (1845): 107.

representations of pregnancy and childbirth that concealed the mother's body, discussions of breastfeeding embraced maternal corporeality as a positive and necessary aspect of the good mother. By emphasizing the positive nature of women's physicality, writers opened a new avenue in which to celebrate mothers by virtue of their bodies. Yet in doing so, they created a clearly delineated category to which not all women could belong. Not all women could display a beautiful, desirable, pure, white, middle-class, pleasure-filled body, and those who couldn't could be castigated as unnatural mothers. Not only was the ideal sentimental mother morally and spiritually superior, but she also embodied feminine perfection.

CHAPTER FOUR

Good Mothers and Wet Nurses: Breastfeeding and the Fracturing of the Sentimental Maternal Ideal

“Who fed me from her gentle breast,
And hush’d me in her arms to rest,
And on my cheek sweet kisses press’d?
My mother.”¹

Just as the maternal bosom was at the center of prescriptive discussions of motherhood, the experience of childrearing for many mothers initially revolved around the pleasures and difficulties of breastfeeding. Middle-class and elite women wrote often in their journals and correspondence about breastfeeding, but their discussions rarely imitated the glowing, pleasure-filled portraits of maternal nursing that filled advice manuals from the late eighteenth century on. Instead, they balanced the pleasures of breastfeeding with the pain and frustration that often attended the practice. Women’s attitudes toward breastfeeding were more contradictory than their attitudes toward pregnancy and childbirth. Women agreed that childbearing was an unpleasant and potentially terrifying process, a physical trial that was the foundation of their identity as mothers. Breastfeeding, on the other hand, could be alternately delightful, tiring, uncomfortable, or even exquisitely painful—and sometimes all these at once. It was a delightful duty, for many women enjoyed the intimate connection with their infants and took satisfaction from a job well done; but even the pleasures of such intimacy could not

¹ [Anonymous], *Filial Recollections* (New York: Samuel Wood, 1804). Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*.

overcome the raw physical discomfort that was a regular part of nursing for many women. Pain tempered the pleasure they derived from caring for their children, resulting in ambivalence toward the physical act of breastfeeding. But in spite of their ambivalence, women agreed that breastfeeding was practically and ideologically crucial to the identity of the good mother. On a practical level, maternal breastfeeding promoted the health and survival of their offspring more surely than either wet nursing or hand-feeding; on a symbolic level, breastfeeding was perhaps the most important aspect of performing their role as virtuous and dutiful mothers.

Because the act of breastfeeding was so important both to the practical work of mothering and to the idealization of motherhood, by the beginning of the nineteenth century it became a central issue around which the very definition of the mother became fractured along lines of race and class. Any woman who bore a child was, in a literal sense, a mother. Yet culturally and socially the category was far more nuanced, and not all women who bore children were considered true mothers according to the ideals of sentimental motherhood. As the physician William Dewees explained in an 1825 treatise, “To constitute a mother, in the best sense of the term, much more is required than giving birth to progeny—it requires qualities both rare and estimable.”² The more important the mother became as a source and symbol of morality and order in American society, the more carefully she was defined and circumscribed by class- and race-specific tropes of feminine virtue. As the United States evolved in the first half of the nineteenth century into a more ethnically diverse, urban, and market-driven society, the middle class increasingly relied on domestic and feminine culture to provide a reassuring center of

² William Potts Dewees, *A Treatise on the Physical and Medical Treatment of Children*, 9th ed. (Philadelphia: Lea & Blanchard, 1847), viii.

gentility and morality, symbolized by the domestic sphere. The reshaping of the extensive rural colonial family into the nineteenth-century ideal of the intimate nuclear family elevated the virtuous white middle-class mother to the position of ruling goddess of the home, making the distinction between the good and bad mother a crucial measure of social order or disorder.³

In white middle-class and elite women's private writings, fissures in the category of the mother appeared most clearly in their discussions of hired wet nurses, who by the nineteenth century became widely perceived as reproductive and productive bodies rather than as true mothers. A wet nurse produced a valuable commodity which, in the case of free women, enhanced her ability to support her family. But in doing so she forfeited her claim to true motherhood by failing to devote her body to her own infant. Because wet nurses were lower class, immigrant, or enslaved women, the definition of the good mother came to have a clear race and class bias in the writings of more privileged women. By the beginning of the nineteenth century, middle-class and elite white mothers began to articulate in their personal writings a distinction between women who were true mothers and women whose bodies produced a valuable commodity. Although middle-class and elite white women saw their corporeal experiences as the foundation of their identity as mothers, they did not see themselves as solely defined by their corporeality; lower class and non-white mothers, however, were perceived to be nothing but bodies, and socially and ideologically disruptive ones at that.

Most scholarship on breastfeeding in the late eighteenth and early nineteenth century has focused either on changing practices of infant feeding, including the use of

³ For more on the changing composition of the American family in the early nineteenth century see for example Mary P. Ryan, *Cradle of the Middle Class: The Family in Oneida County, New York, 1790-1865* (Cambridge: Cambridge University Press, 1981).

wet nurses, or on the meaning of breastfeeding and the role it played in prescriptive discussions of motherhood as a social role.⁴ The work of defining the ideal mother was conducted by women and men alike in diverse venues such as medical texts, prescriptive literature, and popular literary and visual culture. Yet mothers themselves also had strong opinions about breastfeeding—both as a bodily function and as a practice imbued with meaning—that they shared in their letters and diaries. Few scholars have probed the complexity of women's experiences with breastfeeding to highlight their ambivalence to the act of breastfeeding and their simultaneous reliance on it as a measure of maternal virtue. This chapter seeks to explore more fully the complexities and contradictions that characterized women's attitudes toward and beliefs about breastfeeding and to show how their understanding of breastfeeding helped shape a maternal culture which excluded many childbearing women.

In spite of the practical and ideological importance of breastfeeding in the eyes of mothers, much of the time it was a part of women's lives that required neither dramatic commentary nor sentimental expression. Elizabeth Drinker of Philadelphia wrote rather complacently in 1763 that she “began this Morning to Ween my Sally,— the Struggle seems now (April 2) partly over.—tho it can scarcely be call'd a Struggle she is such a

⁴ See for instance Valerie A. Fildes, *Breasts Bottles and Babies: A History of Infant Feeding* (Edinburgh: Edinburgh University Press, 1986); Valerie A. Fildes, *Wet Nursing: A History from Antiquity to the Present* (Oxford; New York: Basil Blackwell, 1988); Janet Lynne Golden, *A Social History of Wet Nursing in America: From Breast to Bottle* (Columbus, OH: Ohio State University Press, 2001); Sylvia D. Hoffert, *Private Matters: American Attitudes Toward Childbearing and Infant Nurture in the Urban North, 1800-1860* (Urbana: University of Illinois Press, 1989); Sally G. McMillen, *Motherhood in the Old South: Pregnancy, Childbirth, and Infant Rearing* (Baton Rouge: Louisiana State University Press, 1990), esp. chapter five; Marylynn Salmon, "The Cultural Significance of Breastfeeding and Infant Care in Early Modern England and America," *Journal of Social History* 28, no. 2 (1994): 247-269; Paula A. Treckel, "Breastfeeding and Maternal Sexuality in Colonial America," *Journal of Interdisciplinary History* 20, no. 1 (1989): 25-51.

good-natur'd patient Child.”⁵ Caroline Laurens of South Carolina wrote with similar tranquility about weaning her son in 1825:

John was weaned from his mother's breast. She, finding herself 4 months gone in pregnancy, was obliged to do—he was easily weaned. Whenever he woke at night, he would ask for 'tee tee' his mother would tell him it was all gone. He would repeat the words 'all gone' . . . and go quietly to sleep.⁶

Physicians generally advised women to cease breastfeeding if they became pregnant, for they believed that pregnancy could contaminate or decrease the quality of the breast milk, so it was not uncommon for women like Laurens to cease breastfeeding only when they found themselves pregnant again. For many women lactation was a process that went smoothly and caused little complaint. Narcissa Prentiss Whitman, pioneer and missionary to Oregon, wrote of the birth of her daughter in 1837 and commented with pleasure that the infant “sleeps all night without nursing more than once sometimes not at all.”⁷ Such casual references to nursing showed that the cycles of breastfeeding and weaning were regular parts of women's childbearing lives that were important enough to make note of but warranted little fuss or ceremony, as long as things went smoothly.

Often, however, women indicated that their experiences of breastfeeding were painful and damaging, far from the pleasurable process that advice manuals promised. Elizabeth Drinker lamented the situation of her adult daughter Nancy, for “it is one of her breasts that the fever has fallen in, as she suckles; poor dear girl, her baby so lately

⁵ Elizabeth Sandwith Drinker, March 31, 1763, in *The Diary of Elizabeth Drinker: The Life Cycle of an Eighteenth-Century Woman*, Elaine Forman Crane, ed. (3 vols., Boston, 1994), 1: 99.

⁶ Caroline Olivia Laurens Diary 1823-1827, December 30, 1825, SHC.

⁷ Narcissa Prentiss Whitman, March 30, 1837, in *Where Wagons Could Go: Narcissa Whitman and Eliza Spalding*, vol. 1 of *First White Women Over the Rockies*, Clifford Merrill Drury, ed. (3 vols., Glendale, CA, 1963), 126.

recover'd, her mind as well as body afflicted.”⁸ Nancy was not alone in her afflictions, for inflammation in the breast was a complaint that appeared regrettably often in women’s private records, in addition to problems such as sore nipples and abscesses. Following the birth of her child, Mary Walker Richardson, a native of Maine and missionary to Oregon, recorded on a daily basis the pain and difficulty she experienced attempting to breastfeed. “Nipples very sore. Worry with my babe. Get all tired out,” she wrote one day, only to continue the next with, “Milk so caked in my breasts, have apprehensions of 2 broken breasts.” By the end of the week, she complained of “Very little strength on account of suffering so much with my breasts.”⁹ For several weeks, Richardson continued to write of her discouragement and ill health. Although Richardson had greater success with her next child, her later diary entries continued to expose the grim difficulties faced by many nursing mothers.

Most women wished to breastfeed their own children in spite of discomfort or difficulty, and they sought and shared with one another remedies that might ease the process. Maine midwife Martha Ballard, for instance, spent much of her time in the late eighteenth-century delivering babies and tending to the health of new mothers whose breasts became painful and inflamed.¹⁰ These were common complications that prevented women from enjoying the act of nourishing their infants. It is hard to know exactly what caused the difficulties of women such as Mary Cox Chestnut, who had repeated problems with painful breasts. She corresponded frequently with her mother, who sent her advice

⁸ Drinker, August 25, 1796, *The Diary of Elizabeth Drinker*, 2: 836.

⁹ Mary Walker Richardson, Tuesday, December 11, 1838; Wednesday, December 12, 1838; Friday, December 14, 1838, in *On to Oregon: The Diaries of Mary Walker and Myra Eells*, vol. 2 of *First While Women Over the Rockies*, Clifford Merrill Drury, ed. (3 vols., Glendale, CA, 1963), 136.

¹⁰ Martha Ballard, *The Diary of Martha Ballard, 1785-1812*, Robert R. McCausland and Cynthia McAlman McCausland, eds. (Rockport, ME, 1992). See for example entries for June, 1793, and May, 1797.

on how to manage her tendency to lumps and infections. When Chestnut bore a little girl in 1797, her mother encouraged her to breastfeed if she could: “I sincerely hope you may be able to perform the Mother’s part by Suckling her yourself. Nothing will contribute more to your own health—Yet sometimes the Pain, in instances like yours is too much to bear, and then it must be given up.”¹¹ Unfortunately, with each subsequent child Chestnut did struggle with breast pain. In 1801 her mother excitedly announced a remedy discovered by Chestnut’s sister:

Tis the salve, which she says you must have spread thin upon a linnen or leather & lay all over that breast that has the hardness in it soon after you are brought to bed—I believe I told you before what great things it had done for her, & that by experience she can advise your trying to Suckle with both breasts.¹²

But when the child was born Chestnut’s trials did not abate and breastfeeding continued to be a painful and difficult process. Many women struggled time and again to breastfeed each of their children, only to be defeated by chronic breast problems. Did these mothers have bad luck or chronic poor health, or were they simply not as stoical as women who persevered in spite of pain and weakness? For women such as Mary Walker Richardson and Mary Cox Chestnut, breastfeeding never became the physically pleasurable maternal duty that advice manuals promised it would be, and they wrote with disappointment but without apology about their physical inability to fulfill this maternal duty.

Although mothers who could not breastfeed were often disappointed by this fact, they did not express guilt, suggesting that in their estimation physical incapacity did not render them bad mothers; only the willful rejection of maternal duty defined the

¹¹ Esther Bowes Cox to Mary Cox Chestnut, November 9, 1797, folder 4, box 1, Cox-Chestnut Family Papers, SCL.

¹² Esther Bowes Cox to Mary Cox Chestnut, March 7, 1801, folder 6, box 1, Cox-Chestnut Family Papers, SCL.

unnatural and bad mother. Indeed, although mothers hoped to breastfeed successfully, they were practical in recognizing insurmountable difficulties. Elizabeth Drinker was disappointed in 1771 when her ill health made it necessary to substitute a wet nurse: “Dr. D. says I must wean my little Henry or get a nurse for him, either seems hard—but I must submit.” Several days later she found nurse for him, but noted that she felt “lost without my little dear.”¹³ Although she longed to breastfeed her child, she recognized and submitted to the physical realities of her condition. Interestingly, Drinker’s case also shows that although most physicians insisted on the healthful effects of breastfeeding in their published writings, it was often they who recommended that women stop breastfeeding for the sake of their health. Prescription evidently could not always stand up to lived experience. Mary Walker Richardson, who had endured so much pain attempting to breastfeed, wrote plaintively one day, “Try very hard to invent artificial nipples. Do not succeed. Feel very much unreconciled to the idea of being unable to nurse my babe.” But by the next day she indicated satisfaction with her decision to try hand feeding instead:

Find my health in a good measure restored. Babe in good health, no appearance of sore mouth. Nurse him mostly with a bottle. Feel more reconciled than I did yesterday. Tho the dispensations of Providence often appear dark, yet they are in the [end] for the best. How do I know but the want of means to nurse my babe may be the greatest of blessings?¹⁴

Richardson noted the improvement in her own health and the continuing good health of her infant and was satisfied that she had made the right decision in switching from breastfeeding to bottle feeding. Women were practical and they made compromises calculated to preserve their own health and that of their children, showing that making

¹³ Drinker, July 13, 1771 and July 22, 1771, in *The Diary of Elizabeth Drinker*, 1: 162, 163.

¹⁴ Richardson, December 29, 1838; December 30, 1838, in *On to Oregon*, 139.

good decisions for themselves and their children was an important part of motherhood, even if it meant occasionally going against prescription.

Women often explained or justified their actions by disagreeing with the idea, so often professed in the prescriptive literature, that breastfeeding was healthful for both mother and child.¹⁵ Instead, many women portrayed breastfeeding as debilitating to the mother, producing weight loss, weakness, and a host of other complications. As Eliza Middleton Fisher wrote to her mother in 1841:

You will be glad to hear I daresay, what I am quite sorry to tell you—that I am about weaning dear Baby—I found that Nursing her 6 & 7 times a day weakened me so excessively, that I have had her fed oftener lately--& now my milk is diminishing so much that I cannot look forward to having enough to supply her during the summer.¹⁶

Three years later, again with a young infant to nurse, Fisher was still unable to breastfeed without diminishing her own strength. She wrote to her mother, “I am sorry to find by y^r last letter that you are making yrself unhappy at my indisposition—which I assure you is nothing serious, but D^r Meigs says entirely owing to the exhausting process of nursing—which he has strongly urged me to discontinue.”¹⁷ Most women attributed vague or general health problems to breastfeeding, as did elite Virginian Eleanor Parke Custis Lewis when she wrote that her daughter “is better and I trust improving rapidly—she has

¹⁵ Advice manual authors in both the eighteenth and nineteenth centuries insisted that breastfeeding promoted maternal health. The British physician Hugh Smith, for instance, even asserted that failure to breastfeed could result in dire consequences such as fever, tumors, breast cancer, and asthma, to name a few. See Hugh Smith, *The Female Monitor* (Wilmington, Delaware: Peter Brynberg, 1801), 70. Online. *Readex: Early American Imprints, Series 1: Evans*.

¹⁶ Eliza Middleton Fisher to Mary Hering Middleton, April 8, 1841, in *Best Companions: Letters of Eliza Middleton Fisher and Her Mother, Mary Hering Middleton, from Charleston, Philadelphia, and Newport, 1839-1846*, Eliza Cope Harrison, ed. (Columbia, 2001), 202.

¹⁷ Eliza Middleton Fisher to Mary Hering Middleton, September 12, 1844, in *Best Companions*, 401.

been very weak and thin, and almost destroy'd herself by nursing."¹⁸ Frances Kemble, celebrated British actress and unwilling plantation wife, agreed that breastfeeding could be debilitating for women. She criticized a plantation mistress for continuing to breastfeed her child after two and a half years and concluded: "I attribute much of the wretched ill health of young American mothers to over nursing; and of course a process that destroys their health and vigour completely must affect most unfavorably the child they are suckling."¹⁹ Some women made implausible connections between breastfeeding and specific ailments, as did Elizabeth Drinker when she recorded in her diary in 1802 that "Molly Rhoads was here forenoon, she has made a beginning to wean her Son, having a great weakness in her Eyes . . . she has been told it is owing to her suckling such a strong lusty boy—and was told of a person who lost her sight by it—that after her child was wean'd, her sight was restored."²⁰ Although with today's medical knowledge it seems highly improbable that breastfeeding could damage the woman's eyesight, Drinker's testimony did attest to the fact that women—and sometimes their physicians too—often saw breastfeeding as a threat to maternal health.

Only when the body did not intrude with pain and debility did women think about breastfeeding in less corporeal and more sentimental terms. By the early decades of the nineteenth century, when sentimental representations of motherhood had reached their height, women did sometimes appropriate the script of sentimental motherhood to highlight the joy and pleasure they received from the act of breastfeeding. Georgina

¹⁸ Eleanor Parke Custis Lewis to Elizabeth Bordley, April 27, 1827, in *George Washington's Beautiful Nelly: The Letters of Eleanor Parke Custis Lewis to Elizabeth Bordley Gibson, 1794-1851*, Patricia Brady, ed. (Columbia: University of South Carolina Press, 2006), 188.

¹⁹ Frances Anne Kemble, April 1, 1839, in *Journal of a Residence on a Georgian Plantation in 1838-1839* (New York: Harper and Brothers, 1864), 254.

²⁰ Drinker, December 7, 1802, *The Diary of Elizabeth Drinker*, 2: 1597.

Lowell of Boston enthused that “no one who has not tried can tell what delight it is for a mother to nurse her own offspring—I am more grateful for the blessing every day—for as the child increases in age & size, the pleasure increases.”²¹ Many women noted specifically the importance of the physical bond between mother and infant that was an inherent part of breastfeeding. Writing in her diary in 1857, southern mother Rebecca Turner expressed her attachment to nursing when she wondered, “How am I to relinquish so sweet an office—that of giving nourishment to my darling? Are these foolish tears that dim my eyes when I think of the times, when he will no longer nestle in my bosom through the silent watches of the night?”²² Even in the midst of their discussions of breast problems, Esther Cox still referred to breastfeeding as a pleasure when she wrote to her daughter, Mary Chestnut: “I rather think you . . . will be forced to relinquish the pleasure of giving Nourishment from your own breasts to the dear little Sally.”²³ Judging from previous and subsequent letters, breastfeeding had never been much of a pleasure for Chestnut, for it had always brought pain and difficulty, yet her mother still retained the sentimental trope of pleasure, showing that it had at least some rhetorical currency with mothers. Sometimes women even feared that the joys of breastfeeding might cause their friends or relatives to persist in nursing even if ill health rendered it inadvisable, thus combining sentimental assumptions about breastfeeding with fears of debility. Harriet Allston of South Carolina advised her sister to avoid breastfeeding, insisting that

²¹ Georgina Margaret Amory Lowell to Mrs. Ann Tracy, September 9, 1827, folder 2.7, box 2, John Lowell Papers, MHS.

²² Rebecca Allen Turner, “Little Jesse’s Diary,” August 29, 1857, in Jesse Turner Sr. Papers, Manuscript Department, William R. Perkins Library, DU.

²³ Esther Bowes Cox to Mary Cox Chestnut, April 21, 1805, folder 11, box 1, Cox-Chestnut Family Papers, SCL.

“to nurse her when you are not at all able would be a selfish gratification entirely.”²⁴ No doubt the act of nursing a beloved infant was often a source of gratification and joy—but the image of maternal breastfeeding that emerges from women’s private writings is distinctly less rosy.

Such sources show that representations of breastfeeding in the personal writings of white middle-class and elite women rarely corresponded to the ideals presented in prescriptive literature. Breastfeeding was a repeated and prolonged physical experience with which they were intimately acquainted—more so certainly than male advice authors—and women writing between 1750 and 1850 remarked frequently on nursing, weaning, and wet nursing and the effects of these practices on the bodies of mothers and infants. They harbored no illusions about the ease and pleasure with which they might nurse their children; experience told them that the reality might be grim. Yet just as nineteenth-century prescriptive literature became more effusive and sentimental about breastfeeding, women letter-writers and diarists in the nineteenth century were more likely to adopt the rhetoric of sentiment than their eighteenth-century counterparts. Even so, sentimental comments were always tempered by women’s fears and frustrations. Women in both the eighteenth and nineteenth centuries wrote with greatest frequency about the difficulty, discomfort, and frustration attending nursing. In this sense, women’s references to breastfeeding remained remarkably consistent over the century in question. Although breastfeeding was an allegedly natural and simple act, women’s bodies did not always cooperate. The physical work of nourishing and then weaning an infant could be difficult and taxing. Occasionally, women did indicate that they derived some pleasure

²⁴ Cited in Sally G. McMillen, “Mother’s Sacred Duty: Breast-Feeding Patterns among Middle- and Upper-Class Women in the Antebellum South,” *Journal of Southern History* 51, no. 3 (1985): 346.

from the practice, but more often they recorded matter-of-fact statements of the daily cares of a nursing mother or enumerated their struggles and their suffering.

A woman's ability to breastfeed, or her failure to do so, could provoke either praise or criticism from those around her. A mother who breastfed successfully epitomized the ideal mother, but those who didn't—or couldn't—could find their maternal virtue in question. Gertrude Meredith exemplified maternal virtue by sacrificing her health to that of her infant, writing to her husband that she was “better than I have been this summer, but extremely thin notwithstanding, Mama tells me this is owing to my suckling my child—she is very anxious that I should wean her, but this I cannot think of doing, as I am confident that if I did, I should sacrifice her health which is infinitely dearer than my own.”²⁵ In both her words and actions, Meredith identified herself as a good mother, although her own mother's wish that she wean the child signaled that there were reasonable limits to what good mothers needed to do for their children. Not all mothers were so exemplary as Meredith, as Sarah Cary intimated in her inquiry to a friend: “Tell me, my dear, if you intend, like other town ladies to sacrifice the pleasure of nursing the dear one to *fashion*? If you do I pity you, for you are possessed of too much sensibility to do it without giving yourself great pain.”²⁶ Just as some advice manual authors criticized women for caring more for the comeliness of their bosom than for its nurturing capacity, Cary identified fashion as a destructive influence that prevented mothers from fulfilling their duty. Indeed, a truly maternal body could not be a fashionable body, for tight stays and heavy clothing might deform the breast and nipple

²⁵ Gertrude Gouverner Ogden Meredith to William Meredith, June 28, 1798, folder 1, box 51, Meredith Family Papers, HSP.

²⁶ Sarah Cary to Polly Gray, March 29, 1785, in *The Cary Letters*, Caroline G. Curtis, ed. (Cambridge, 1891), 67.

and interfere with a woman's ability to breastfeed. As the physician Samuel Bard insisted, "above all things, a loose dress is absolutely necessary; and particular care should be taken not to press the nipple into the breast, by which it has been sometimes really obliterated, so as to render it impossible to suckle."²⁷ Other women could be even more critical than Cary of mothers who did not or could not nurse their children. "She has a sweet good babe," wrote Eleanor Parke Custis Lewis of a mother and her newborn, "but she is a helpless Mother, she cannot suckle it, and knows very little about the care of children. I hope you will see *my* little treasure next autumn, and his *devoted* Mother."²⁸ Lewis drew a clear connection between breastfeeding and maternal devotion. Thus even if breastfeeding was often destructive to the mother's body and peace of mind, women did see it as central to good mothering and to their identity as mothers. Although women may have felt ambivalent about the physical experience of breastfeeding, they believed that good mothers nourished their children from their own bodies, a form of both pleasure and sacrifice that marked a woman as virtuous and competent in the maternal arts.

The corporeal nature of maternal virtue was so important that some women found a means of visually highlighting breastfeeding as both a practical and symbolic physical act. A daguerreotype from 1848, one of a few breastfeeding portraits from the antebellum era, showed a mother seated with one breast exposed and her child in the act of nursing

²⁷ Samuel Bard, M.D., *A Compendium of the Theory and Practice of Midwifery* (New York: Collins and Perkins, 1807), 75. Online. *Readex: Early American Imprints, Series 2: Shaw-Shoemaker*. Bard furthermore recommended rubbing the breasts and nipples during pregnancy and breastfeeding with olive oil, fresh lard, or butter, and, in cases of flattened nipples, placing a wax ring around the nipple to prevent clothing from pressing upon it (75, 190).

²⁸ Eleanor Parke Custis Lewis, Letter to Elizabeth Bordley, June 24, 1827, in *George Washington's Beautiful Nelly*, 191.

(fig. 4.1).²⁹ Although mother-child portraits were common with the advent of photography in the late 1830s, most displayed the mother with her child in her arms or at her side. The frank display of this mother's bare breast is surprising to the twenty-first-century viewer, yet by visualizing the intimate physical connection between mother and child, this portrait privileged the same physical mother-infant bond that nineteenth-century domestic culture idealized and that many women themselves treasured. The mother in the photograph verified her maternity by nursing the infant rather than merely holding it—she was a mother, the real thing, and this image provided enduring evidence that she fulfilled her duty to nourish her child from her own body. Portraits such as this spoke to the practical and symbolic importance of breastfeeding at this time. But what did the portrait mean to the mother? Unfortunately, her identity is lost, and with it the possibility of knowing her story. Based on the middle-class appearance of the woman's clothing and accessories and the fact that they had their portraits taken, I am working from the assumption that this woman was not a wet nurse but was in fact the mother of the infants she nursed. Did she choose to pose in this way or did someone else decide for her? What did it mean to her to have a permanent image of her suckling the child? Perhaps it was a reminder of duties faithfully fulfilled, of maternal love, of past pleasures and intimate moments. But perhaps it was also a reminder of the trials of maternity, of hard work and self-sacrifice. Whatever her story, it is significant that this image captured the mother in the very act of performing that maternal duty which, more than anything,

²⁹ "Portrait of an unidentified woman breastfeeding a baby," Daguerreotype ca. 1848, PC136-1z, SL. For similar images see also "Woman Breast-feeding Her Infant," Daguerreotype ca. 1845, Visual Collections - Slides and Digital Images, PAA82 1843A 70(a)), Harvard Fine Arts Library; "Portrait in profile of an unidentified woman breastfeeding a baby," Daguerreotype ca. 1850, PC140-1z, SL; and "Portrait of an unidentified woman breastfeeding a baby," Daguerreotype ca. 1860, PC140-2z, SL. Unfortunately, the lack of identification for these photographs means that they raise more questions than they answer.

legitimated her as a good mother by showing the appropriate use of her body.



Figure 4.3. "Portrait of an unidentified woman breastfeeding a baby" (c. 1848).
The Schlesinger Library, Radcliffe Institute, Harvard University.

If the definition of a good mother was one whose body provided life and nourishment for her child, the very function of a wet nurse was antithetical to good mothering. As the French philosopher Jean-Jacques Rousseau remarked in the mid-eighteenth century, "The woman who nurses another's child in place of her own is a bad mother."³⁰ Of course, a mother who was so unfortunate as to be unable to breastfeed could not be blamed for hiring a wet nurse, as long as she had done everything in her power to protect and promote her ability to breastfeed. In hiring a nurse, she was simply

³⁰ Jean-Jacques Rousseau, *Emile* (1762), translated by Barbara Foxley (London, 1966), 13.

fulfilling her duty by proxy. The wet nurse herself, on the other hand, because she sold her milk instead of devoting it to her own infant, became by definition an unnatural mother. The very commodification of breast milk went against all notions of the sanctity of the maternal body and of maternal duty by placing a literal price on the lactating breast.

Throughout the eighteenth and early nineteenth century, breast milk was in high demand. Ernest Caulfield has argued that in the eighteenth century, “breast milk was the most frequently advertised commodity in American newspapers.”³¹ Advertisements for wet nurses abounded in local newspapers, announcing, with little variation, that “A certain person wants a wet nurse into the house, to suckle a child.”³² Many women also advertised their own services, proposing that “A young woman with a new breast of milk, wants a place in a genteel family, as wet nurse.”³³ These advertisements did not share the reasons for which a woman’s services were needed or offered, but they did expose the economic value of mothers as producers. The cost of hiring a wet nurse meant that providing such a service offered needed income for poor mothers, while middle-class and elite families were more likely to be able to hire a wet nurse to replace the productivity of the mother. Wet nursing was thus an economic exchange based around the maternal body. Indeed, descriptions of the wet nurse’s body were at the heart of such advertisements, which sought or proposed the services of a “hearty” and “perfectly healthy” nurse with a “fresh” or “good” breast of milk, or even a “good full young breast

³¹ Ernest Caulfield, “Infant Feeding in Colonial America.” *Journal of Pediatrics* 41 (1952): 677.

³² Classified advertisement, *Boston News-Letter*, November 15–22, 1714, no. 553: 2. Online. *Readex: America’s Historical Newspapers*.

³³ Classified advertisement, *New York Daily Advertiser*, January 30, 1795, no. 3108: 4. Online. *Readex: America’s Historical Newspapers*. Thousands of advertisements for wet nurses can be found in colonial and early American newspapers, although numbers declined in the nineteenth century.

of milk.”³⁴ Interestingly, until roughly 1820, newspaper advertisements for wet nurses highlighted the quality of the lactating breast in question, whereas subsequently they were more likely to focus on the overall health or heartiness of the wet nurse. Such a shift most likely reflected growing concerns about immigration and the health of the poorer inhabitants of urban areas and the perceived risk of bringing unsavory and unsanitary characters into the middle-class home.

The challenging realities of childbearing and childrearing meant that wet nursing was a common aspect of family life in America from the early colonial era to the late nineteenth century, though it has since been marginalized in historical studies of motherhood.³⁵ It is difficult to calculate the extent to which middle-class and elite American mothers relied on wet nurses in the eighteenth and nineteenth centuries. Maternal mortality, illness, breast pain, and the numerous stresses on mothers that could prevent their milk from flowing, all contributed to the need for a substitute feeding method.³⁶ Sometimes a wet nurse was only needed for a short period of time while the mother recovered from illness or from childbirth complications, or she may have been needed only sporadically to supplement a mother’s scant supply of milk. In an era without refrigeration, it was difficult to keep a baby alive on animal milk, which was

³⁴ See for example Classified Advertisement, *Southern Patriot*, January 23, 1846, 55, no. 8264: 3. Online. *Readex: America’s Historical Newspapers*; Classified Advertisement, *New York Gazette, and Weekly Mercury*, February 12, 1770, no. 955: 4. Online. *Readex: America’s Historical Newspapers*.

³⁵ Few scholars have explored in-depth the history of wet nursing, with several notable exceptions. See for example Valerie A. Fildes, *Wet Nursing: A History from Antiquity to the Present* (Oxford: Basil Blackwell, 1988), and Janet Lynne Golden, *A Social History of Wet Nursing in American: From Breast to Bottle* (Columbus, OH: Ohio State University Press, 2001). For more on wet nursing and its decline in the late nineteenth and early twentieth centuries, see Wolf, Jacqueline H. *Don’t Kill Your Baby: Public Health and the Decline of Breastfeeding in the Nineteenth and Twentieth Centuries* (Columbus: Ohio State University Press, 2001), esp. chapter five.

³⁶ For more on the causes of failed maternal breastfeeding, see Golden, *Social History of Wet Nursing*, 17-20.

often spoiled and unhealthy, so that hand feeding was an even less desirable method of infant nurture than wet nursing.

Rates of wet nursing most likely corresponded to a certain extent to maternal mortality rates. In cases when a mother died during or shortly after delivery, but the infant survived, an informal or hired wet nurse would have to be found. In the north, maternal mortality rates were relatively low. In Newport, Rhode Island, for instance, between 1760 and 1764 the Reverend Ezra Stiles recorded ten deaths out of 1,600 deliveries, while the midwife Martha Ballard of Maine delivered 998 babies between 1777 and 1812 and recorded only five maternal deaths during lying-in.³⁷ Most mortality studies have focused on specific communities or small regions so it is difficult to generalize about the whole of British America in the eighteenth century, but historian Janet Lynne Golden shows that maternal mortality rates probably ranged from six to twenty deaths out of one thousand births, with higher rates occurring primarily in the south, probably due to complications from malaria.³⁸ As a point of comparison, an Amnesty International report recorded 13.3 maternal deaths out of 100,000 live births in the United States in 2006, a high rate compared to other developed nations and double the rate in 1987, but still significantly lower than in the eighteenth century.³⁹ In the nineteenth century, overall rates of mortality climbed in urban areas, particularly among the urban poor, but the 1850 census reported that only about two percent of the deaths of white women occurred during childbirth, with Florida having the highest percentage at

³⁷ Richard W. Wertz and Dorothy C. Wertz, *Lying-In: A History of Childbirth in America* (New York: Free Press, 1977), 20. Laurel Thatcher Ulrich, *A Midwife's Tale* (New York: Knopf, 1990), 373, note 7.

³⁸ Golden, *Social History of Wet Nursing*, 18-19.

³⁹ Amnesty International, "Deadly Delivery: The Maternal Health Care Crisis in the USA," (London: Amnesty International Secretariat, 2010), 1.
<http://www.amnestyusa.org/sites/default/files/pdfs/deadlydelivery.pdf>. December 1, 2011.

5.4 and New Hampshire having the lowest at 1.2 percent.⁴⁰

Although prescriptive literature in both England and America from the eighteenth to the nineteenth century routinely criticized “fashionable” mothers for neglecting to breastfeed their own children, it seems that most well-to-do mothers who survived childbirth were the primary nurses for their children, though they may have received temporary assistance from a friend, relative, or hired wet nurse shortly after delivery or in cases of breast pain, infection, or scarcity of milk. Maternal mortality and debility—not disinclination to nurse—drove the demand for wet nurses. Daniel Blake Smith explains that “In the eighteenth century, even though a larger number of families could afford to hire wet nurses, most women, except when ill, seem to have continued to nurse their own children.”⁴¹ Sally McMillen argues that in the antebellum south, even in the case of elite mothers who had ready access to black wet nurses, only about twenty percent employed them.⁴² Sylvia Hoffert argues that women in the antebellum north saw breastfeeding as an important source of authority and self-worth and a central part of mothering.⁴³ Thus advice manuals that insisted on the merits of maternal breastfeeding were most often preaching to the choir. But the very real dangers and difficulties of childbearing and rearing ensured that there was always a market for wet nurses.

Economic necessity drove women to seek employment as wet nurses, work which

⁴⁰ McMillen, *Motherhood in the Old South*, Appendix I, Table III.

⁴¹ Daniel Blake Smith, *Inside the Great House: Planter Family Life in Eighteenth-Century Chesapeake Society* (Ithaca, NY: Cornell University Press, 1980), 35.

⁴² McMillen, *Motherhood in the Old South*, 118.

⁴³ Sylvia D. Hoffert, *Private Matters: American Attitudes toward Childbearing and Infant Nurture in the Urban North, 1800-1860* (Urbana: University of Illinois Press, 1989).

often paid women more than they could have earned for other kinds of domestic labor.⁴⁴ As one newspaper advertisement for a wet nurse promised, “A wet nurse with a good Breast of Milk . . . will receive good wages.”⁴⁵ Some wet nurses had lost their infants and thus had superfluous milk, others were able to care for their own children as well as other infants simultaneously, but many were forced to leave babies behind or to wean them prematurely so as to give the majority of the milk to the privileged child. At a time when hand-fed infants died in much greater numbers than those who were breastfed for at least twelve months, it is not surprising that mortality rates were high for the infants of wet nurses. This created a trap for poor women who, in turning their breast milk into additional income for their families, lessened their infants’ chances of survival.⁴⁶

Hired wet nurses were of course not the only mothers to be commodified in American society and culture. The most significant commodification of human bodies occurred in the context of American chattel slavery. A rich and abundant literature has sprung up around the perception and use of the slave body in the antebellum south. Much of this scholarship has highlighted the ways in which female slaves experienced the commodification of their bodies differently than men because of their ability to reproduce. Enslaved women’s bodies provided labor, but they also produced new laboring bodies.⁴⁷ In spite of the emphasis slaveholders placed on enslaved women’s

⁴⁴ For information on the variations in wet nurse wages, see Golden, *Social History of Wet Nursing*, 28-31

⁴⁵ Classified Advertisement, *Independent Ledger*, August 14, 1780, 3, no. 114: 3. Online. *Readex: America’s Historical Newspapers*.

⁴⁶ For a discussion of infant mortality related to wet-nursing see Golden, *Social History of Wet Nursing*, 14.

⁴⁷ See for instance Jennifer Morgan, *Laboring Women: Reproduction and Gender in New World Slavery* (Philadelphia: University of Pennsylvania Press, 2004); Lars Schroeder, *Slave to the Body: Black Bodies, White No-Bodies and the Regulative Dualism of Body-Politics in the Old South* (Frankfurt: Peter Lang, 2003); Marie Jenkins Schwartz, *Birthing a Slave: Motherhood and Medicine in the Antebellum South*

ability to bear children—their capacity to “breed”—they did not emphasize enslaved women’s identity as mothers in the fullest sense of the word. Instead, their bodies were forced to produce three key commodities: work, infants, and breast milk. They were never awarded the social and cultural capital that American society granted to white mothers. This is not to say that enslaved mothers did not engage in the emotional and social functions of motherhood as did their white counterparts. Indeed, scholarship shows that enslaved mothers struggled on a daily basis to maintain the integrity of their affective relationships and, on a more practical level, to protect the health and happiness of their children. But in spite of the extraordinary emotional and physical work these women accomplished, their humanity and maternal identity were articulated and defended only in abolitionist literature and propaganda. In other social and cultural realms they were relegated to corporeality.

Unfortunately, we know little about enslaved women’s attitudes toward breastfeeding and wet nursing, but we do know that the seemingly basic practice of nursing an infant became extraordinarily difficult for enslaved mothers. The system of slave labor demanded that women work long hours at their appointed tasks, but simultaneously expected them to raise healthy children to bring increased wealth to the slaveholder. Weakened by heavy labor and nutritional deficiency during pregnancy and unable to breastfeed at sufficient intervals during the work day, slave mothers faced nearly insurmountable difficulties in their efforts to raise their children through the first year of life. Anecdotally, we know that rates of infant mortality among enslaved populations were high. Frances Kemble’s journal of antebellum plantation life, for

(Cambridge: Harvard University Press, 2006); Deborah Gray White, *Ar’n’t I a Woman?: Female Slaves in the Plantation South*, Revised Edition (New York: W.W. Norton & Company, 1999).

instance, recorded a litany of petitions from desperate slave mothers seeking some small alleviation in their burden of labor during pregnancy and after delivery. Collectively, twelve women had borne a total of nearly one hundred children and they had lost more than half of these children.⁴⁸ One statistical study of a large South Carolinian family's slave population found a thirty-five percent infant mortality rate between the 1830s and 1861, less than the rates found in Kemble's narrative but still very high, especially when compared with mortality rates for white and free black children in South Carolina for 1850, estimated at 5.7 percent for children under one year of age and 12.9 percent for children up to five years of age.⁴⁹

It is hard to say to what degree insufficient breastfeeding contributed to these high rates of infant mortality, but the references to breastfeeding made by former slaves attest to the fact that for many enslaved mothers it was nearly impossible to provide adequate nutrition to their infants. One former slave recalled, "My father was crippled and couldn't work in the field, and I remember he used to carry the children out to the field to be suckled."⁵⁰ In this case the slave mothers were able to feed their children without leaving work, but it is unlikely that they were able to stop often enough or long enough to give sufficient nourishment. Many other enslaved mothers did not have the advantage of having their children brought to the fields. As another former slave remembered:

I 'member how mother tole me de overseer would come ter her when she had a young child an' tell her ter go home and suckle dat thing, and she better be back

⁴⁸ Kemble, *Journal of a Residence*, 190-191, 196, 199-200, 204.

⁴⁹ John Campbell, "Work, Pregnancy, and Infant Mortality Among Southern Slaves," *The Journal of Interdisciplinary History* 14, no. 4 (Spring, 1984): 795. McMillen, *Motherhood in the Old South*, Appendix I, Table VII.

⁵⁰ Willie Wallace, *Arkansas Narratives*, Vol. 2, Part 7. Online. *Born in Slavery: Slave Narratives from the Federal Writers' Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

in de field at work in 15 minutes. Mother said she knowed she could not go home and suckle dat child and git back in 15 minutes so she would go somewhere an' sit down an' pray de child would die.⁵¹

The image of this mother praying for the death of her child puts the act of breastfeeding in a very different light than the discussions of breastfeeding recorded by white women. Breastfeeding was of little practical utility because the slave mother could never have enough time to give sufficient nutrition to her child, nor could it be an act of sentimental or affective importance because it would only prolong the uncertain and unhappy existence of her child. Unlike the white mothers discussed earlier, breastfeeding could not easily become a source of pride or maternal identity for many enslaved women. They could not dictate the uses to which their bodies were put and so they could not perform their identity as mothers through the correct and virtuous dedication of their bodies.

For many enslaved women maternity and forced labor collided when they were required to nurse white infants in addition to, or instead of, their own. As one former slave remembered, "My massa had 15 chillun and my mamma suckled every one of dem, 'cause his wife was no good to give milk."⁵² In such cases, enslaved mothers provided a valuable and life-giving commodity for a child who was not their own. Yet there were also instances in which white slaveholding women served as wet nurses for their own slaves. One former slave, born in 1855, told how the white mistress, "Miss Viny Cannon suckled me and her son Henry at de same time, me on one knee and Henry on t'other."⁵³

⁵¹ Celia Robinson, *North Carolina Narratives*, Vol. 11, Part 2. Online. *Born in Slavery: Slave Narratives from the Federal Writers' Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

⁵² Jeff Calhoun, *Texas Narratives*, Vol. 16, Part 1. Online. *Born in Slavery: Slave Narratives from the Federal Writers' Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

A white Virginian mother whose child was stillborn in 1850 also served as a wet nurse to an enslaved baby as a way of dealing with her surplus milk. She explained in her diary, “my chief trouble is having such a quantity of milk, I am forced to have one of the servant’s children to nurse. I fear I shall become too much attached to the little fellow! He is a sprightly little fellow of 3 Months old perfectly black . . . My children seem much astonished to see me with the little Ebony fellow, but they are becoming very fond of him.”⁵⁴ A surprising reversal of the role of wet nurse, such instances demonstrate that while wet nursing was above all an act that turned the maternal body into a literal commodity, it could also in special circumstances be a practical gesture that spoke less about the politics of the body and more about the exigencies of daily life.

Indeed, hired or coerced wet nursing was by no means the only context in which a woman might nourish a child who was not her own. Informal, that is, unpaid, wet nursing also occurred between friends and relatives in both the eighteenth and nineteenth centuries. Sometimes a mother simply needed a little assistance while she recovered from childbirth or from an illness, or sometimes a woman’s milk was a little slow in coming in or was not quite sufficient in quantity. In such cases a friend or sister who was lactating might take over suckling the child sporadically or for a short period of time. Southern mother and grandmother Caroline Clitherall, for instance, found herself in the unusual position of acting as wet nurse to her own grandchild. As she explained in her diary, when her daughter Eliza’s child was born, “my Alexr was a baby; Eliza was so ill, I

⁵³ [“Timber”] Cannon, *South Carolina Narratives*, Vol. 14, Part 2. Online. *Born in Slavery: Slave Narratives from the Federal Writers’ Project, 1936-1938*. Library of Congress. <http://memory.loc.gov/ammem/snhtml/snhome.html>.

⁵⁴ Diary of Lucy Cocke, Wednesday, July 3, 1850, Box 138, Papers of John Hartwell Cocke/Papers of the Cocke Family, UVA.

performed for Georgena the office of Wet-Nurse—it does not often occur, that the G[rand]d-child is suckled by the Gr[an]dmother.”⁵⁵ Although it would have been more common for sisters or friends to share the task of suckling a new baby, Clitherall’s story does reveal the ways in which women sometimes shared the burden of infant nurture on an informal basis.

Caroline Clitherall told another story of informal wet nursing that simultaneously emphasized the importance of breastfeeding in distinguishing good and bad mothers. “I was spending the day at Mrs. Geo. Smith’s,” she wrote, and “by her side, was a Basket, containing an Infnt of 7 or 8 months old-dreadfully emaciated—Mrs. S. rais’d it, & I observ’d several blue & green marks, & its little bones barely cover’d with flesh only.” The father of the infant arrived on the scene and told how his wife refused to care for the child. “Three times has my wife cast this helpless Babe away,” he explained “& upon my again missing it, when I came home, she swears, if ever [it] is brought back—she will kill it—She has starv’d him for a whole day-if he moans, she beats & pinches him.” At the time Clitherall was nursing a child of her own and reported that “I took the little skeleton up, & put him to my breast—he was too weak to draw much at a time, but appear’d reviv’d—I propos’d to my husband, as there were several of the negroes then at home who had infants, to allow me to take this Baby, & until he grew stronger I wou’d nurse him by day & Elsey, or Milly by night—his good humane heart unhesitatingly, said yes-& if I wou’d superintend, he would provide a nurse.”⁵⁶ Clitherall highlighted the monstrosity of the woman who refused to nourish her child and her own virtue as a

⁵⁵ Book 2: Autobiography and Diary of Mrs. Eliza Clitherall, 1751-1860, [date ?], p. 35, volume 7, folder 19, box 2, Caroline Elizabeth Burgwin Clitherall Diaries, SHC.

⁵⁶ Book I: Autobiography and Diary of Mrs. Eliza Clitherall, 1751-1860, [date ?], p. 35-36, volume 5, folder 18, box 2, Caroline Elizabeth Burgwin Clitherall Diaries, SHC.

mother who could nourish her child and also save the poor victim of maternal savagery. One wonders if the abusive mother in question perhaps was suffering terribly from postpartum depression, or if she had been worn to the point of exhaustion and breakdown by too frequent childbearing, but Clitherall either did not know or did not choose to share any details about her. She did show, however, that wet nursing could be a charitable act, rather than an economic one. In such a case, Clitherall's ability to nurse her own child while saving the life of another made her in some sense a super mother who could compensate for the actions of the cruel and monstrous mother.

Although the practice of wet nursing remained a part of American childrearing practices through the nineteenth century, attitudes toward wet nurses underwent an important shift around the turn of the nineteenth century. Scholars such as Janet Lynne Golden have examined a subtle shift in the discussions of wet nurses in prescriptive literature, which revealed a growing fear of wet nurses as a source of moral and physical contagion. But there was also much that remained consistent in prescriptive portrayals of wet nurses from the eighteenth to the nineteenth century. The ways in which middle-class and elite women wrote about their encounters with wet nurses, however, changed dramatically from the eighteenth to the nineteenth century. Whereas the women who employed wet nurses in the eighteenth century wrote of their nurses as part of their community of friends and acquaintances, by the early decades of the nineteenth century women defined their wet nurses as troublesome laboring bodies and highlighted the race and class biases that played an increasingly important role in the way women defined themselves as mothers and how they viewed other women.

Eighteenth-century mothers often mentioned their wet nurses by name and

included them in their roster of friends and acquaintances, indicating a degree of social and emotional proximity. They also sometimes acknowledged the affections of the nurse toward her own children and even toward the children she wet-nursed, thus demonstrating her claims to the affective, as well as physical, bonds of motherhood. Elizabeth Drinker noted in her diary in 1765 that “Molly Worrel with Sitgreaves’s Baby who she Nurses, were also here,” signaling that her social circle included women who worked as wet nurses as well as more well-to-do friends.⁵⁷ Janet Lynne Golden uses the relationship between Elizabeth Drinker and the wet nurse Nanny Harper to explore the close and cordial relations between employer and hired nurse. After nursing her daughter Ann (Nancy) for six months, Drinker, for unknown reasons, sent her to be nursed by Nanny Harper, the wife of a blacksmith. Drinker called often to visit and even sent her carriage to fetch Harper and the baby for visits home. Even after the baby was weaned and returned home, Drinker continued to exchange visits with the Harper family, showing that their relationship extended beyond the economic ties of employer/employee. Yet even in this friendly relationship, Drinker remained apparently blind or unconcerned by the fact that by tending Ann, Harper may have been jeopardizing the health of her own infant, Benjamin.⁵⁸ Thus formal long-term nursing arrangements—even when they occurred between respected acquaintances—almost always implied a hierarchy of importance between the two mothers and their children. Still, it is significant that eighteenth-century mothers and their nurses saw themselves as part of the same community of women who frequented one another’s homes and lying-in chambers.

⁵⁷ Drinker, July 15, 1765, *The Diary of Elizabeth Drinker*, 1: 118.

⁵⁸ Golden, *Social History of Wet Nursing*, 33.

In spite of the fact that both formal and informal wet nursing were common and necessary practices, from the eighteenth through the nineteenth century prescriptive authors uniformly looked with a suspicious eye on both wet nurses *and* the mothers who employed them. Yet eighteenth-century advice manuals generally tended to have a more lenient view of wet nurses. Maternal nursing was ideal, they argued, but in cases of maternal death or debility, a kind nurse with an abundant breast of milk could mean the difference between life and death for an infant. According to the prescriptive literature, it was theoretically possible to find a good wet nurse, “who may be known to be such by her Health; by the good Habit and make of her Body; by her Age; by her Breasts; by her Lying-in; by the Time since her Lying-in, and by her Milk.”⁵⁹ Her character and her sexual habits were of particular concern because writers feared that intemperate passions could affect the infant, while a nurse with venereal disease would bring immorality and infection into the home.

The body and appearance of the nurse were crucial in determining her wholesomeness and suitability, and medical and prescriptive writers consistently offered advice about how to choose a wet nurse based on a host of different physical characteristics. The tradition of describing the ideal wet nurse stretched back much earlier than the eighteenth century. In the seventeenth century the English midwife Jane Sharp recommended a “sanguine complexioned woman” for a wet nurse. She defined the ideal nurse in terms of a litany of physical characteristics:

her milk will be good, and her breasts and nipples handsome, and well proportioned; she is of a mean stature, not too tall, nor too low; not fat, but well flesht; of a ruddy, merry, cheerful, delightsome countenance, and clear skin’d that her Veins appear through it; her hair is in a mean between black, and white and

⁵⁹ [Anonymous], *The Nurse’s Guide: or, the Right Method of Bringing up Young Children* (London, 1729), in *Three Treatises on Child Rearing* (New York: Garland, 1985), 28-29.

red, neither in the extream, but a light brown, that partakes somewhat of them all.⁶⁰

Sharp also explained that all of these desirable physical traits would add up to a pleasant and cheerful disposition, ideal for someone entrusted with the care of young children.

Roughly a century and a half later, the American physician William Dewees offered a nearly identical description. He quoted another authority as saying that the wet nurse should be between the ages of twenty and thirty-five, “she should neither be too fat nor too lean; she should be fresh-colored . . . her hair should not be too black, nor too deep a red . . . her breast should be of moderate size, with a nipple sufficiently projecting and irritable, and yielding milk upon the slightest force.”⁶¹ Added to these physical attributes, she should of course have a good character.

These minute descriptions of the age, hair color, breast size, and nipple quality of the prospective wet nurse exposed an important inconsistency in prescriptive discussions of breastfeeding. Nowhere did prescriptive writers suggest that *mothers* who failed to live up to these standards should not be entrusted with breastfeeding their own children. Not a single writer implied that women with hair too dark or breasts too large should forbear from marrying and having children because they would be poor nurses. These physical standards evidently only applied to wet nurses, not to the mothers to whom prescriptive writers offered their advice. No mother was ever subjected to the same intrusive physical

⁶⁰ Jane Sharp, *The Midwives Book, or the whole art of midwifery discovered* (London: Simon Miller, 1671), in *The Early Modern Englishwoman: A Facsimile Library of Essential Works*. Series 2, *Printed Writings, 1641-1700*. Vol. 4, *Writings on Medicine*, Lisa Forman Cody, ed. (Aldershot: Ashgate Publishing Limited, 2002), 363-364.

⁶¹ Dewees, *Treatise*, 167.

evaluation as her potential wet nurse.⁶² Thus wet nurse were almost entirely defined by their utilitarian physicality, while mothers—as we saw in the previous chapter—were described in terms of idealized beauty, sensibility, sentimentality, and morality. Ultimately, it appears that prescriptive writers did not even consider *the mother* and *the wet nurse* to belong to the same category of womanhood.

Although prescriptive literature in the nineteenth century continued many of the same themes as earlier texts with regard to the use and character of wet nurses, it also took on a more ominous tone. Nineteenth-century prescriptive authors such as William Alcott were generally skeptical as to the existence of a truly good wet nurse. As Alcott explained, “if a nurse could always be procured whose health, and temper, and habits were good, who had no infant of her own, and who would do as well for the infant, in every respect, as his own mother, it would be preferable to have no feeding by the hand at all. But such nurses are very scarce. Their temper, or habits, or general health will often be such as no genuine parent would desire.”⁶³ Janet Lynne Golden argues that as motherhood was reconfigured in the post-revolutionary era, the figure of the wet nurse took on a new and more dangerous meaning. Golden writes, “As she crossed the threshold of her employer’s home, bringing with her the taint of her environment and her flawed character, the wet nurse became a potential threat as well as a possible savior.”⁶⁴ Much of this threat derived from a growing sense of embattlement of the part of the white middle class that reacted to growing urbanization, immigration, and poverty by

⁶² For an interesting analysis of the intrusive examination of the body of the wet nurse in both fiction and prescriptive texts in Victorian England, see Melisa Klimaszewski, “Examining the Wet Nurse: Breasts, Power, and Penetration in Victorian England,” *Women’s Studies* 35, no. 4 (2006): 232-346.

⁶³ William Alcott, *The Young Mother, or Management of Children in regard to health*, 2nd ed. (Boston: Light and Stearns, 1836), 136.

⁶⁴ Golden, *Social History of Wet Nursing*, 38.

withdrawing to the safety of the nuclear family and genteel domestic culture. Indeed, Golden argues that “In the nineteenth century, descriptions of wet nurses became a means for elucidating the maternal deficiencies of poor women, in contrast to the virtues of middle-class mothers.”⁶⁵ A cartoon from a popular nineteenth-century comic almanac illustrated the visions of intemperance and vice attached to wet nurses at the time by portraying a woman casually draped over a chair with her head tipped back to drink from a bottle, the infant sliding out of her lap head first with an expression of shock. Robust, slovenly, and drunkenly neglecting her infant charge, this wet nurse epitomized the fears of the middle class.⁶⁶

Representations of wet nurses helped to reinforce the divide between the true mother and the poor, diseased, and depraved woman whose disorderly body allegedly contrived to populate the slums of the nation’s largest cities with a new generation of inferior women and men. Advice author Mrs. Barwell offered a characteristic description of the intersection between poverty and motherhood in her maternal advice manual:

The poor generally have a good supply of milk, and suckle for many months; tea is their chief beverage. It is true their infants are often fretful; but this is to be attributed to the indulgence of violent passions on the part of the mother, so often found among the ignorant, to exposure to cold, and deficiency of cleanliness and ventilation, rather than to the vitiation of the milk from low living.⁶⁷

In Barwell’s estimation, producing milk was the only thing the impoverished mother was good at; in every other respect she corrupted her children with her passions and destroyed their health with her inability to maintain a proper home. Barwell did not make clear

⁶⁵ Golden, *Social History of Wet Nursing*, 39.

⁶⁶ “Wanted—A Dry Nurse,” *Turner’s 1839 Comick Almanack* (New York, 1838), LCP.

⁶⁷ Mrs.[Louisa Mary Bacon] Barwell, *Advice to Mothers on the Treatment of Infants: with directions for self-management before, during, and after pregnancy. Addressed to Mothers and Nurses* (Philadelphia: Leary & Getz, 1853), 23-24.

exactly why poor women allegedly produced lots of milk, but she implicitly referred to common assumptions that less refined women were more vigorous in body, if less developed in intellect and character, than wealthier and more refined women. Poor mothers were thus reduced to the role of producing a valuable commodity, apparently their only positive contribution to society.

Although prescriptive texts had defined wet nurses differently than mothers by focusing on a host of prescribed physical attributes, it was not until the nineteenth century that middle-class and elite women betrayed in their writings a new perception of wet nurses as a distinct class of mothers who were in fact not real mothers at all, but simply women with reproductive and productive bodies. Unfortunately for the historian, women did not often leave extensive comments about their wet nurses in their letters and diaries, but when they did, they indicated their belief that these women lacked the tender and sentimental instincts of true motherhood. They even represented their wet nurses as more animal than maternal. As Lydia Russell wrote of her use of wet nurses while travelling in Sweden, “I had a kind of jealous repugnance to have my child take anything but from me, but of all animals the human was most obnoxious to my feelings.”⁶⁸ The wet nurses’ bodies were seen as more capable than those of mothers who could not breastfeed, but this very capability shifted the focus away from their value as mothers and toward the function of their bodies. In short, wet nurses were defined by the abilities of their bodies, and this body—or the milk it produced—was commodified in a way that was antithetical to sentimental motherhood. The wet nurse was not a mother, in this view, but merely an occasionally useful and always problematic body.

The case of Eliza Middleton Fisher and the Irish wet nurse she engaged in

⁶⁸ Lydia Smith Russell, October 27, 1818, Lydia Smith Russell Diaries, MHS.

Philadelphia in 1844 is strikingly illustrative of the ways in which by the nineteenth century “othered” mothers were relegated solely to the functions of their bodies and denied the emotional and sentimental privileges of true motherhood. Fisher wrote to her mother that, owing to her sufferings from breastfeeding, she had at last hired a wet nurse:

She is such a remarkably nice looking, goodhumoured person, & brings from Ireland such high recommendations, that I trust she will suit me well & make a faithful nurse for my little darling—She appears perfectly healthy, & the D^r, after examination pronounces her sound in every respect, & thinks I have an excellent prospect in securing her—The only objection to her is that she has an infant of her own, 3 months old, from whom she was very reluctant to part—but she now consents to leave it under the care of her cousin—& will I hope remain several months with me—so that I shall now have a good chance of recovering my strength—by having both mind & body relieved.⁶⁹

Although Fisher’s description of her new wet nurse was a positive one in the sense that she described the woman as good natured and healthy, she tellingly dwelt on the woman’s physical attributes and in such a way as to render her animal-like. She emphasized the nurse’s health and *soundness* (a term frequently associated with animals and slaves) and, in her fixation on the woman’s body, she conveniently ignored the emotional import of the woman’s motherhood. Indeed, the only problem with the nurse, from Fisher’s perspective, was that she was reluctant to abandon her own child. Although Fisher was herself a fond and watchful mother, it did not seem to occur to her that the Irish wet nurse might entertain the same feelings of devotion to her own infant and that she, like any mother of Fisher’s own social status, ought not to be separated from her child. The nurse was allowed and encouraged to be “faithful” to Fisher’s infant, but not to her own. In spite of what we view now as their shared identity as mothers, Fisher seemed unable or unwilling either to empathize or sympathize with the hired nurse. The implicit boundary she drew between the two mothers demonstrated that, in her worldview, one

⁶⁹ Eliza Middleton Fisher to Mary Hering Middleton, September 12, 1844, in *Best Companions*, 401.

woman truly merited the name “mother,” while the other was merely a woman whose body could replace Fisher’s feebler one.

Several months later Fisher wrote again at some length about her wet nurse and revealed even more clearly the distinction between true mothers and reproductive women. This distinction was based on a hierarchy that placed emotionality over corporeality, making emotional mothering more important than physical mothering.

Referring to her own little daughter, Fisher wrote:

The little monkey is beginning to love her Nurse so much better than me that I am quite mortified—which I ought not to be as the preference is as yet purely physical, and when her morale is more developed, I need not fear the continuance of it—therefore as long as she continues to thrive so well with the Alderney I must therefore not let my jealousy get the better of me.

Fisher tellingly exposed her insecurity that, in spite of her best efforts, she was perhaps not perfectly fulfilling her maternal role because her little daughter seemed to prefer the Irish wet nurse. Yet she quickly corrected herself by asserting that the infant’s preference was purely physical, not emotional, and that therefore Fisher herself was still the true mother. Indeed, the wet nurse was nothing more than an Alderney, a dairy cow whose bounty allowed the infant to thrive. But this did not make her a real mother, only a commodity. In Fisher’s estimation *she* was the real mother who had borne the child and then set aside her own preferences so that her daughter could be fully nourished. Though she could not, in the case of breastfeeding, do the physical work of nursing the child, her emotional investment served to sustain her maternal virtue.

Eliza Bellows had a similar blind-spot in the way she understood her own role as mother as compared to that of her wet nurse. She bore a daughter in 1846, who unfortunately found “no sufficient nurse in her Mamma, but is so fortunate as to have her

deficiencies supplied in a most satisfactory personage.”⁷⁰ Although Bellows could not breastfeed her own daughter, she was in all other respects a devoted and doting mother whose diary focused almost exclusively on the activities and welfare of her beloved children. A few months after the birth of her daughter, Anna, Bellows “Went to town with Anna & her nurse, on account of the illness of nurse’s child. Found the little creature very low. Remained in town until nearly morning, the poor little child having been released from suffering during the preceding night.”⁷¹ It is impossible to know why the nurse’s child died, but its own access to its mother’s milk had been curtailed by her employment as a wet nurse and this would have lessened the infant’s chances of survival due to imperfect nutrition and a potentially weaker immune system. Although Bellows expressed pity for the deceased infant, she wrote nothing of the bereaved mother. The death of an infant was hardly uncommon in the mid-nineteenth century, yet if one of her own children had died Bellows would have been distraught. Tellingly, she did not consider the emotions of the bereaved wet nurse to be worthy of note.

Although many women who procured wet nurses, especially those living in the urban north, hired white women from the lower classes and from immigrant populations, race could often be a compounding factor in the differentiation of “true” mothers and reproductive women. Mary Walker Richardson, for instance, a missionary to Oregon and one of the few white women in the region at the time, procured an Indian woman to nurse her first child when it became apparent that she would be unable to breastfeed the baby. She remarked in her diary, “Am glad my babe can be supplied with milk tho it comes

⁷⁰ Eliza Nevins Townsend Bellows, March 26, 1845, Eliza Nevins Townsend Bellows Diary, MHS.

⁷¹ Eliza Nevins Townsend Bellows, July 3, 1845, Eliza Nevins Townsend Bellows Diary, MHS.

from a black breast.”⁷² Although appreciative of the service the woman provided, she essentialized the nurse both in terms of her race and in terms of the physical attribute that was most significant to Richardson—the breast. Such a description left no room for the personhood, or even the motherhood, of the Indian woman. Emily Judson, wife of an American missionary to Burma, similarly wrote of her wet nurse as if she were less than human, defined entirely by her physical nature and with no presence of intellect or emotion. Indeed, in her description of the nurse she applied a mechanical notion of breastfeeding that had nothing to do with the tenderness of sentimental motherhood. “I am all alone,” wrote Judson in 1848, “All alone? Bless me, how indifferent we can be brought to feel to the presence of humans! There is Granny Grunter (alias wet-nurse, alias Mah Bya), who does nothing but eat and sleep alternately (she is eating now) during the twenty-four hours, and who would invent a machine to lift the child and carry it to her breast if she were a Yankee.”⁷³ In spite of the presence of the wet nurse, Judson saw herself as alone, denying the importance of the woman and negating any possible relationship between them. She further othered the wet nurse by describing her only in terms of three bodily functions: eating, sleeping, and suckling. Moreover, she implied that—with the necessary intelligence and Yankee ingenuity—the nurse would happily mechanize the act of breastfeeding, effectively removing either the labor or sentiment that might be bound up in the act of nursing. In Judson’s view, the wet nurse lacked the traits of a true woman—even her personhood seemed questionable—and Judson joined other middle-class and elite women such as Fisher and Bellows in representing her hired

⁷² Richardson, January 6, 1849, in *On to Oregon*, 141.

⁷³ Emily Chubbuck Judson to Jane A. Kelly, February 7, 1848, in *The Life and Letters of Mrs. Emily C. Judson*, Asahel C. Kendrick, ed. (New York: Sheldon & Company, 1860), 288. Online. *Alexander Street Press: North American Women’s Letters and Diaries*.

wet nurse as bound and defined exclusively by her physicality.

Although women rejoiced when they hired a wet nurse whom they found wholesome and agreeable, they generally echoed prescriptive literature in seeing wet nurses as a regrettably necessary evil. As Ellen Coolidge wrote after the birth of her twins in 1830,

I am still as feeble as a child, unable to go into company and much taken up with the care of my young family . . . the arrival of the young gentlemen has compelled me to add a domestic to my establishment, in the person too of a wet-nurse, the most troublesome of all inmates. I am tolerably supplied, having a country girl, strong healthy & good-humoured, whose fall from virtue is a less grievous offence in my eyes than the airs & insolence of an honest woman.⁷⁴

In Coolidge's eyes, the wet nurse was not even a mother, but a "country girl" whose main virtue was her robust health and, perhaps, the robust sexuality that helped put her in a position to work as a wet nurse. She did not specifically explain why she viewed a wet nurse as inevitably "the most troublesome of all inmates," but her opinion corresponded with the attitudes of prescriptive authors who, by the nineteenth century, consistently castigated wet nurses as immoral, diseased, and unwomanly.

Maternal advice authors writing in the eighteenth and nineteenth centuries were consistently suspicious of wet nurses, though earlier writers tempered their suspicions by acknowledging the benefits a good wet nurse could bring to an infant and its family. By the nineteenth century, however, growing urbanization, immigration, and geographic and economic separation between the middle and upper classes and the poor contributed to a shift in perceptions of the wet nurse. She came to be seen as a contaminant, threatening the sanctity of the genteel home with her immorality and diseased body. As sentimental motherhood became increasingly important to notions of ideal womanhood, the wet nurse

⁷⁴ Ellen Wayles Randolph Coolidge to Mrs. Nicholas P. Trist, October 15, 1830, box 2, Correspondence of Ellen Wayles Randolph Coolidge, UVA.

no longer had any place as a wholesome partner in the work of mothering. Women's own reactions to their hired wet nurses roughly followed this trend in the prescriptive literature. Middle-class and elite women writing in the eighteenth century were matter-of-fact about the use of wet nurses and saw them as part of the community. In fact, they were somewhat less suspicious of nurses than advice manual authors, most likely because the women they hired were often acquaintances and even friends. By the nineteenth century, however, women were more likely to hire wet nurses from very different social circles and even from different parts of town, and women's remarks about their wet nurses became even more blatant than prescriptive texts in defining wet nurses as useful bodies rather than women or mothers.

Indeed, women's personal writings revealed the full extent to which the identity of the mother became fractured by the beginning of the nineteenth century. A woman who bore a child was not necessarily a true mother; she had to exhibit other abilities and virtues to claim that status. The physical act of breastfeeding provided a focal point around which women defined and judged one another as mothers. Middle-class and elite mothers did not perceive their wet nurses as fellow mothers, but as capable bodies that produced a necessary commodity. They drew a line between women who were mothers in the fullest sense—both physically and emotionally present for their children and revered for their tender maternal love—and those women who were mere reproductive bodies. Breastfeeding could be both a physical and an affective act for true mothers, but for other women it was a bodily function that could be bought and sold. Breastfeeding thus became more than a practical ability and symbolic facet of ideal motherhood; it allowed women to redefine the community of mothers along lines of race and class.

CHAPTER FIVE

The Fantasy of the Transcendent Mother: Bodies and Spirits in Nineteenth-Century Sentimental Poetry

“You have no Body just now . . . your Spirit has absorb’d it all.”¹

Nowhere did the idealization of motherhood come through more clearly than in the sentimental poetry produced by women and men alike during the first half of the nineteenth century. Sentimental authors, whose works were widely disseminated in popular magazines, newspapers, giftbooks, and collected volumes, portrayed the mother as an essentially moral and Christian character whose innate virtue transformed her into more of a spiritual force in society than a human agent. Indeed, by the 1830s and continuing through the 1860s, sentimental poems about motherhood were remarkable for the consistent and nearly perfect disembodiment of the mother. Freeing her from the constraints of materiality, sentimental writers portrayed the mother as a spirit, a smile, a memory, a voice, an essence of everlasting and infinite love and piety; only occasionally did she arrive at a moment of corporeality when her hands, lips, or breast connected to the body of her beloved child in a perfect gesture of maternal affection. The disembodiment of the mother and her corresponding spiritualization elevated her to “a higher place in the scale of being,” a position of nearly deity-like power and influence by

¹ Samuel Richardson, *Pamela: or, Virtue rewarded, In a Series of Familiar Letters from a Beautiful Young Damsel to her Parents: and afterwards, in her exalted condition, between her, and persons of figure and quality, upon the most important and entertaining Subjects, in Genteel Life* (4 vols., London: Printed for S. Richardson, 1742), 3: 300.

which she surpassed the limits of ordinary human existence and influence.² But such a position came at a cost: leaving behind the flesh in favor of the spirit required the ultimate sacrifice of personhood and agency. Sentimental poetry presented an image of the transcendent mother as a sacrificial figure who relinquished life and self in the attainment of an ethereal ideal.

I use the concept of the “transcendent mother” to signify sentimental culture’s preference for the spirit over the flesh. The ideal mother was defined not by her materiality, but by her spirituality; she surpassed ordinary humanity and became almost angelic. As one poet wrote, “And often, in my dreams, she stands, an angel to my sight,/ Glowing in all the nameless charms of Heaven’s eternal light.”³ She was also transcendent in the sense that her most important traits—her love and Christian influence—were not limited by time, space, or mortality. She was both everywhere and nowhere. But the concept of transcendence also brings to mind the universality of this vision of ideal motherhood; sentimental culture did not define the mother in terms of material particulars. She seemingly transcended social boundaries, or rather, rendered them insignificant. Yet, as I will show, this ostensible universality was incompletely realized; it could not quite transcend the race and class distinctions that defined American society. The frequency with which the trope of the transcendent mother appeared in sentimental culture suggests that she filled an important need in American society. Thinking about motherhood in these terms allowed individuals to elide the aspects of maternity that challenged prevalent feminine ideology. As we have seen, the physical difficulties of childbearing made many women ambivalent to motherhood, while the very

² Lydia H. Sigourney, *Letters to Mothers*, 2nd ed. (New York: Harper & Brothers, 1839), 9.

³ “Autumn Thoughts,” *The Boston Literary Magazine* 1, no. 7 (November 1832): 307.

existence of the reproductive body raised the specter of disorderly sexuality and pathology. Motherhood in real life was not easy or unproblematic, but both women and men had considerable stake in idealizing women's influence as mothers.

By the 1830s the figure of the mother also became a mainstay of antislavery literature and propaganda. Unlike the ostensibly universal but implicitly white middle-class mother in the sentimental poetry of popular middle-class culture, the slave mother was bound to her corporeality by the physical torments of slavery—most often symbolized by the lash and by hard labor—even as these torments drove her to yearn for a higher spiritual realm for herself and her children. Although antislavery poems used sentimental rhetoric to appeal to a common bond between mothers, enslaved and free, they did not invoke the same fantasy of the spiritual mother in their representations of enslaved mothers. Antislavery authors used the common tropes of white middle-class culture to generate “a state of heightened feelings” which would lead their readers to understand intuitively and emotionally the common humanity of the enslaved.⁴ But in the end the contrast between poems about idealized white motherhood and antislavery poems exposed and perpetuated a culturally entrenched race-based division between (white) spiritual mothers and (black) mothers who were ensnared by earthly and corporeal realities. Even the morally-driven realm of antislavery poetry denied enslaved mothers the same transcendent status granted to white mothers; they could never entirely leave their bodies behind and ascend to the pinnacle of maternal perfection.

The sentimental cult of motherhood was not exclusive to the realm of poetry; popular novels, visual culture, slave narratives, and didactic writings often drew on the

⁴ Joy S. Kasson, *Marble Queens and Captives: Women in Nineteenth-Century American Sculpture* (New Haven: Yale University Press, 1990), 37.

trope of the ideal sentimental mother to highlight feminine virtue and discuss women's role in American society. But sentimental poetry is particularly useful from the perspective of the historian in part because of the sheer volume of poetry produced and consumed by Americans at this time. As the literary scholar Max Cavitch writes, "Lots of people in the early United States read novels, but very few wrote them. Poetic forms, on the other hand, were at least as widely produced as they were consumed—and they were consumed voraciously."⁵ Sentimental poetry by popular, often female, authors such as Lydia H. Sigourney, Frances Sargent Osgood, and the English poet Felicia Hemans reached a large audience, for it was widely disseminated in popular periodicals such as *Godey's Lady's Book*, which had a circulation of 150,000 by the 1850s, in local newspapers across the country, and in giftbooks and collected volumes of poetry.⁶ Enjoying a wide readership, such poems would also have been shared aloud, transmitted in letters, and adapted and preserved in diaries and albums by avid readers.⁷ Thus sentimental poetry provides a useful window into the cultural imagination of nineteenth-century Americans. Motherhood poems in particular highlighted the ways in which sentimental culture offered women and men a highly visible context in which to define and illustrate what the figure of the mother meant. These poems are especially interesting because of the remarkable consistency of imagery and message, particularly among those

⁵ Max Cavitch, *American Elegy: The Poetry of Mourning from the Puritans to Whitman* (Minneapolis: University of Minnesota Press, 2007), 85.

⁶ For more about *Godey's*, see Sarah Mitchell, "A Wonderful Duty: A Study of Motherhood in *Godey's Magazine*," in *Seeking a Voice: Images of Gender and Race in the Nineteenth-Century Press*, David B. Sachsman, S. Kittrell Rusing, and Roy Morris Jr., eds. (West Lafayette, IN: Purdue University Press, 2009), 172.

⁷ See for example Mary Louise Kete's discussion of *Harriet Gould's Book*, an album of verse written by friends and family for a New England woman in the antebellum period. The album contains original verse as well as copies and adaptations of published poems. Mary Louise Kete, *Sentimental Collaborations: Mourning and Middle-Class Identity in Nineteenth-Century America* (Durham, NC: Duke University Press, 2000).

published in magazines and newspapers between roughly the 1830s and the 1860s, which form the primary focus of this analysis.⁸ In spite of her obvious removal from the realities of mothering, the transcendent mother they envisioned provided a compelling, if abstract, vision of women's power and influence in American society.

In using the term "sentimental" to describe the corpus of poetry and related texts that constitute the focus of this chapter, I follow a relatively small but vibrant body of scholarship in the fields of literature, history, and art history that explores the importance of emotion and empathy in the construction of the self and in the act of storytelling in late-eighteenth- and nineteenth-century America.⁹ I rely heavily on Mary Louise Kete's understanding of sentimentality not as a literary genre, but "as a mode akin to irony, tragedy, or comedy, in that it can inflect any genre and in that it has some small set of shared, identifiable characteristics."¹⁰ This sentimental modality used images of domestic life and familial affections to evoke a sense of shared belonging to an intimate world in which joy and loss could be shared by writers and readers alike. Loss in particular was an

⁸ The literary emphasis on ideal motherhood declined, however, after the 1860s as the idealization of domesticity gradually came under suspicion by women and men who sought greater freedom and opportunity for women in American society. For more on the shift in feminine literature in the second half of the nineteenth century see Paula Bernat Bennett, "'The Descent of the Angel': Interrogating Domestic Ideology in American Women's Poetry, 1858-1890," *American Literary History* 7, no. 4 (Winter 1995), esp. 593; Paula Bernat Bennett, *Poets in the Public Sphere: The Emancipatory Project of American Women's Poetry, 1800-1900* (Princeton and Oxford: Princeton University Press, 2003); Sarah Mitchell, "A Wonderful Duty: A Study of Motherhood in *Godey's Magazine*," in *Seeking a Voice: Images of Gender and Race in the Nineteenth-Century Press*, David B. Sachsman, S. Kittrell Rusing, and Roy Morris Jr., eds. (West Lafayette, IN: Purdue University Press, 2009), esp. 175.

⁹ See for example Martha Tomhave Blauvelt, *The Work of the Heart: Young Women and Emotion 1780-1830* (Charlottesville, VA: University of Virginia Press, 2007); Ann Douglas, *The Feminization of American Culture* (New York: Knopf, 1977); Joy S. Kasson, *Marble Queens and Captives: Women in Nineteenth-Century American Sculpture* (New Haven: Yale University Press, 1990); Marianne Noble, *The Masochistic Pleasures of Sentimental Literature* (Ewing, NJ: Princeton University Press, 2000); Shirley Samuels, ed. *The Culture of Sentiment: Race, Gender, and Sentimentality in Nineteenth-Century America* (New York: Oxford University Press, 1992); Jane Tompkins, *Sensational Designs: The Cultural Work of American Fiction, 1790-1860* (New York: Oxford University Press, 1986); Mary McCartin Wearn, *Negotiating Motherhood in Nineteenth-Century American Literature* (New York: Routledge, 2008).

¹⁰ Kete, *Sentimental Collaborations*, xiv.

important theme in sentimental literature, and the popularity of elegiac verse spoke to the work that sentimentalism performed in the memorialization of both the lost loved one and the feelings experienced by the mourners. But sentimental culture played a much larger role in American society than simply enriching the affective lives of individuals; it was also instrumental in creating and defining the middle class.¹¹ As Kete explains, “It is through sentimental collaboration that those who would become increasingly identified over the course of the nineteenth century as the authentic representatives of ‘We, the People’ established the parameters by which they would be known and by which they would know themselves.”¹² The language of sentiment created a particular way of feeling and being in society that communicated a sense of mutual belonging among those who participated in its values and emotions. In theory, the culture of sentiment offered a potentially utopian vision of belonging for any and all who could inhabit and reproduce its nuances, but as we shall see this utopian potential was foreclosed by the incomplete deployment of sentimental imagery in antislavery literature.

In spite of its sheer abundance and its importance in the daily lives of nineteenth-century Americans, sentimental poetry has garnered relatively little scholarly attention, especially when compared with the number of works devoted to the canon of nineteenth-century literary greats. As Paula Bennett has noted, magazine poets in particular have typically been dismissed as “an eminently forgettable horde whose contributions to the

¹¹ For more on the culture of the middle class in America see for example Karen Halttunen, *Confidence Men and Painted Women: A Study of Middle-Class Culture in America, 1830-1870* (New Haven: Yale University Press, 1982); John F. Kasson, *Rudeness and Civility: Manners in Nineteenth-Century Urban America* (New York: Hill and Wang, 1990); Mary P. Ryan, *Cradle of the Middle Class: The Family in Oneida County, New York, 1790-1865*. (Cambridge: Cambridge University Press, 1981).

¹² Kete, *Sentimental Collaborations*, 54.

enrichment of American literature were negligible at best.”¹³ Yet what scholarship there is leaves no doubt as to the importance of sentimental poetry in American culture and society. Sentimental poetry evoked situations and emotions that belonged to everyday life and offered readers both elevated ideals and messages of comfort and inspiration. Moreover, popular literary forms opened new avenues for women to participate in the production and consumption of literature, particularly in the context of popular magazines. Patricia Okker’s study of female magazine editors, for example, demonstrates the professional opportunities created for women by the magazine industry and also testifies to their ability to influence the direction of literary production. Okker argues that as editor of *Godey’s Lady’s Book* beginning in 1837, Sarah Josepha Hale sought to reshape women’s writing by promoting emotionally difficult and socially significant themes in her magazine. Rather than publishing tales of romantic love, the stereotypical theme for feminine literature in the late eighteenth and early nineteenth centuries, much of the poetry and fiction she chose focused on themes such as motherhood, death, family strife, and religion.¹⁴

Sentimental poetry has also fallen to the wayside in scholarly analyses of antislavery literature. In studies of abolitionist writings, more attention has been paid to slave narratives and antislavery novels, sermons, essays, and pamphlets than to

¹³ Paula Bennett, “Not Just Filler and Not Just Sentimental: Women’s Poetry in American Victorian Periodicals, 1860-1900,” in *Periodical Literature in Nineteenth-Century America*, Kenneth M. Price and Susan Balasco Smith, eds. (Charlottesville, VA: University Press of Virginia, 1995), 202.

¹⁴ Patricia Okker, *Our Sister Editors: Sarah J. Hale and the Tradition of Nineteenth-Century American Women Editors* (Athens: University of Georgia Press, 1995), 140-142. For more on Sarah Josepha Hale’s agenda as editor of *Godey’s* see Joseph Michael Sommers, “*Godey’s Lady’s Book*: Sarah Hale and the Construction of Sentimental Nationalism,” *College Literature* 37, no. 3 (Summer 2010): 43-61.

sentimental antislavery poems.¹⁵ Yet these poems, written by both white and black poets, were crucial to the strategies and successes of antislavery activists; moreover, they reveal important fissures in the ostensibly universal nature of sentimentalism. One of the goals of this chapter, then, is to take seriously the rhetoric and implications of sentimental poetry, for this body of literature is rich with the images and ideals that appealed to and inspired American readers at this time.

The literary figure of the mother was not always so ethereal and noncorporeal as she would become in the antebellum period. Indeed, until the early nineteenth century Anglo-American authors embraced and played with maternal corporeality. Although the mother was not as central to literary convention in the eighteenth century, popular early English novels as well as magazine articles, stories, and poems did explore motherhood alongside more typical subjects such as nature, romantic love, marriage, and history. Next to love and female virtue, for instance, motherhood was a central theme in the English author Samuel Richardson's enormously popular epistolary novel, *Pamela* (1740-41), which was enjoyed by British and American readers into the nineteenth century.¹⁶ Pamela, a young servant whose surpassing beauty, purity, and piety made her an ideal heroine, began as an object of lust for her master, the illustrious Mr. B., but ended by overcoming his rakish tendencies with her virtuous example. The first part of Pamela's

¹⁵ Two extensive anthologies testify to the importance of antislavery poetry, but have yet to be joined by equally extensive analyses of the poetry and its role in the antislavery movement. See James G. Basker, ed., *Amazing Grace: An Anthology of Poems About Slavery, 1660-1810* (New Haven: Yale University Press, 2002); Marcus Wood, ed., *The Poetry of Slavery: An Anglo American Anthology* (Oxford: Oxford University Press, 2003). For an analysis of sentiment and the discourse of antislavery that includes some examination of antislavery poetry see Julie Husband, *Antislavery Discourse and Nineteenth-Century American Literature: Incendiary Pictures* (New York: Palgrave MacMillan, 2010).

¹⁶ Richardson, *Pamela* (1742).

adventure is rife with heaving bosoms and thwarted sexual escapades, but by the third volume she is safely married to her erstwhile tormentor and pregnant with their first child. Although Pamela was a sentimental and moral character, she was also always admired by the other characters for her physical charms, a fact which did not change even when her figure became less virgin-like and more obviously maternal. Her body was always on display and subject to comment, more so than other characters, and indeed her body was important because of the ways in which it reflected her interiority. As her father admonished at the beginning of the novel, “It is virtue and goodness only, that make the true beauty,” and the blushing of her face, the humility of her gaze, and the reticence of her posture consistently spoke to her humility and virtue.¹⁷

Yet in spite of her obvious virtue, Pamela was subjected to the ribald bodily humor that was part of even genteel culture in the eighteenth century. When pregnant with her first child, she was the object of humorous and leering comments about her condition, as when her sister-in-law congratulates her on her pregnancy and teases that “What is done in Secret, shall be known on the House-top,” while a young male relative grins and laughs knowingly.¹⁸ In this case her growing belly testified to her newfound sexuality as well as to impending motherhood, and it was generally the former that drew the attention and humor of her companions. Her body was put on display yet again when she impersonated an unmarried girl to an elite but vulgar older man who remarked immediately upon her figure, supposing her to be pregnant, as in fact she was. Her sister-in-law intervened, calling her by her pretend name, “Why, *Jenny*, you are dress’d oddly to Day!—What a Hoop you wear! It makes you look I can’t tell how!” “Upon my Soul,

¹⁷ Samuel Richardson, *Pamela: or, Virtue Rewarded* (London: Penguin Classics, 1985), 52.

¹⁸ Richardson, *Pamela* (1742), 3: 168.

Madam, I thought so,” replied the gentleman, “But ‘tis only the Hoop, I see. . . . You are so slender every where but *here*.”¹⁹ And so saying he put his hand on Pamela’s hip, shaming her by emphasizing the contours of her body, but ultimately believing the ruse that she was a virgin and unmarried. In these scenes Pamela’s body was highlighted because of its maternal shape, which in turn raised the image of robust sexuality. Although Pamela later embroiled herself in a debate about the moral imperatives of maternal breastfeeding, her family and friends, with the exception of her sympathetic and spiritual parents, focused on the corporeal rather than the moral aspects of motherhood.

Another of Richardson’s massive didactic novels, *Clarissa* (1747-48), also highlighted the appeal of the maternal body, while simultaneously placing motherhood and sexuality in tension. Robert Lovelace, who attempted to force the virtuous heroine to marry him by drugging and raping her, effused to his best friend, “Let me perish, Belford, if I would not forego the brightest diadem in the world for the pleasure of seeing a twin Lovelace at each charming breast, drawing from it his first sustenance; the pious task, for physical reasons, continued for one month and no more!”²⁰ Ostensibly focusing on the pleasure which the sight of the maternal body would grant him, Lovelace also refers to more tangible pleasures to be gained from Clarissa; wishing to reclaim his right to sexual intercourse with her, he praises the delights of lactation while limiting them to one month. After that, Clarissa’s body returns to him. Such passages suggest that the body was indeed a very tangible object in eighteenth-century popular literature.

¹⁹ Richardson, *Pamela* (1742) 3: 314. Emphasis in the original.

²⁰ Samuel Richardson, *Clarissa; or, The History of a Young Lady*, Angus Ross, ed. (Harmondsworth, Middlesex: Penguin Books, 1985), 706.

By the late eighteenth-century, literary representations of motherhood had taken a more specifically moral and sentimental turn, but without entirely leaving the body of the mother behind. Balancing ethereal metaphor against the materials that made the mother's body, one essay remarked that

The mistress of creation, when she moulded the fair mother of her fairer family, searched for her richest materials . . . and produced a being inimitably perfect. Her heart was strung to the soft tones of love and compassion; her nerves were composed of the most delicate fibres . . . the fair features of her face were adapted to the fairer features of her mind.²¹

Such a description illustrated that nature had made the mother a perfect, but also embodied, figure—indeed, she embodied perfection. In fact, just as prescriptive arguments in favor of breastfeeding created around the same time a similar image of moral and physical maternal perfection, literary pieces articulated an embodied vision of maternal virtue that endured in popular literary works through the first decade or two of the nineteenth century.

One poem that was reprinted in various publications at the turn of the century offered a sensual portrait of delighted motherhood that underscored its corporeal dimensions and revealed the body of the mother to the reader:

So when the Mother, bending o'er his charms,
Clasps her fair nursling in delighted arms;
Throws the thin 'kerchief from her neck of snow,
And half unveils the pearly orbs below;
With sparkling eye the blameless plunderer owns
Her soft embraces, and endearing tones,
Seeks the salubrious fount with opening lips,
Spreads his inquiring hands, and smiles, and sips.²²

²¹ "Female Severity," *The Massachusetts Magazine; or, Monthly Museum* 3, no. 2 (February 1791): 83. Online. *ProQuest: American Periodicals Series*.

²² [Erasmus Darwin] "Elegant Extracts: From Darwin," *New-Hampshire Sentinel* 4, no. 176 (July 31, 1802): 4. Online. *Readex: America's Historical Newspapers*. See also [Erasmus Darwin], "Maternal Fondness," *The Columbian Phenix and Boston Review* 1 (July 1800): 445. Online. *ProQuest: American Periodicals Series*.

Excerpted from poet and scientist Erasmus Darwin's set of poems, *The Botanic Garden* (1791), these verses playfully unveiled the mother's physical charms and emphasized the enjoyment that mother and infant took from their mutual embrace. Indeed, the infant displayed a proprietary pleasure in caressing the mother's breast that implied a greater emphasis on her physical attributes as a mother than on her moral virtues. But not all poems at this time explored so sensually the maternal body. Another explored the corporeal work of a mother in protecting and entertaining her many children, giving a more pragmatic, if still sentimental, evocation of the daily activities of a mother:

While one with fondness she caresses,
Her gentle hand his little brother
Softly to her bosom presses,
And her knee supports another.
See him climb:--her arms extended
Gives the feeble urchin aid;
While her outstretch'd foot suspended
For his sisters seat is made.²³

The "Good Mother" here was occupied literally hand and foot with the activities of her children. Although the poem gave a sentimental portrait of a mother's duties, appealing to the reader to sympathize with her loving gestures and feel the depth of her maternal love, it also hinted at the real and tiring work involved in mothering a large family.

Another poem offered a rarer reference to the bodily suffering of childbirth when a doting mother spoke to her child: "Welcome, thou little dimpled stranger,/O, welcome to my fond embrace;/Thou sweet reward of pain and danger."²⁴ Juxtaposing the pain of

²³ "The Good Mother," *Lady's Weekly Miscellany* 7, no. 20 (September 10, 1808): 320. Online. *ProQuest: American Periodicals Series*. For almost identical imagery see also "Sonnet, on Divine Providence," *New-York Daily Gazette*, no. 390 (March 27, 1790): 2. Online. *Readex: America's Historical Newspapers*.

²⁴ "The Mother to Her Child," *Lady's Weekly Miscellany* 7, No. 4 (May 21, 1808): 64. Online. *ProQuest: American Periodicals Series*.

childbirth with the pleasure of the maternal embrace, this poem offered a glimpse of the contradictory physical experiences of motherhood.

But by the 1830s the mother developed into a newly disembodied character whose spiritual nature surpassed material existence. Motherhood poems generally came in two types at this time, the elegiac and the celebratory. The elegiac poem was the most common, a narrative of sacrifice and loss that memorialized the debility and death of the mother in order to arrive at a spiritualized vision of maternal perfection and influence. Such poems participated in a larger culture of death and mourning that characterized nineteenth-century American society in which elegies, portraits, and even items made with the hair of deceased loved ones, all attested to the continuing bonds between the living and the dead.²⁵ It is also important to consider the rhetoric and aesthetics of motherhood poems within the context of religious fervor in the first half of the nineteenth century. Having gained considerable momentum by the 1820s, the Protestant revivalism of the Second Great Awakening swept the nation and gave new purpose to those seeking a higher spiritual realm. Predicated on a highly emotional and personalized union with God, evangelical Protestantism and sentimental culture each reinforced the importance of affect and the articulation of intimate relationships. Moreover, both favored the repudiation of the body in favor of the spirit; as Marianne Noble writes, “the destruction of individual autonomy pave[d] the way for a transcendent union with God.”²⁶ The poetic fantasy of the good mother took the most extreme forms of maternal sacrifice—death and

²⁵ See for example Cavitch, *Elegy*; Lucy E. Frank, ed. *Representations of Death in Nineteenth-Century U.S. Writing and Culture* (Aldershot Hants, UK: Ashgate Publishing, 2007); Desirée Henderson, *Grief and Genre in American Literature, 1790-1870* (Farnham, Surrey, UK: Ashgate Publishing, 2011); Kete, *Sentimental Collaborations*.

²⁶ Noble, *Masochistic Pleasures*, 29.

the act of dying—and showed that they were the means to a more powerful end.

Although Noble argues that the disembodiment of the female is evidence of the masochistic tendencies of sentimental literature, it is also important to consider the ways in which the portrayal of the mother as an enduring spirit would have resonated with readers who were painfully aware of the sorrow and danger so often experienced by childbearing women and their loved ones. The spiritual mother may have been a poetic fantasy, but she brought comfort to the bereaved and consolation to mothers who were all too aware of the uncertainty of life.

The celebratory and joyful evocations of motherhood in sentimental poetry lauded the influence of the Christian mother, the joy that mothers and their children took from one another, and the power of maternal love and influence. In these portraits the mother was young and lovely, but her physical attributes were overshadowed by her moral and spiritual virtues. Or, perhaps it is more accurate to say that her beauty was defined by her internal spirit. As the popular prescriptive author, William Alcott, wrote, “there can be no doubt that beauty, or at least, a set of features that interests us, as somewhat agreeable, is generally connected with virtue and piety.” Thus the “morality of beauty,” as Alcott called it, moved beauty away from the specific characteristics of the body, such as those seen above in Erasmus Darwin’s sensuous verses, toward a beauty defined by interiority.²⁷ One celebratory poem gestured briefly to the mother’s physical traits before quickly invoking her interior virtues: “Young mother! On thy fair, majestic brow!/And, amid all its loftiness, revealing/Thy soul’s rich tenderness and depth of feeling.”²⁸ Thus

²⁷ William A. Alcott, “The Morality of Beauty,” *Mother’s Assistant, and Young Lady’s Friend, and Family Journal*, no. 3 (March 1841): 68.

²⁸ Mrs. Norton, “The English Mother,” *Godey’s Ladies’ Book* (September 1831): 182.

her high forehead, a signifier of intellect and virtue, rapidly moved from a significant feature of the mother's physical beauty to the primary indication of her inner beauty.

In both elegiac and celebratory poems about mothers in the antebellum period the focus usually fell not on her physical charms or the work of her body, but on more ethereal and disembodied qualities such as her smile, her voice, and her enduring love. Her "ethereal noncorporeality," to borrow a phrase from Noble, manifested itself in a number of ways.²⁹ In one poem—aptly titled "A Mother's Smile"—the mother was simultaneously absent from the poem and constituted its structural and rhetorical anchor:

But the deepest, darkest sorrow,
Though it sear the heart a while,
Hopes cheering ray may borrow
From a mother's welcome smile.
...
There are scenes and sunny places
On which feeling loves to dwell,
There are many happy faces
Who have known and loved us well;
But 'mid joy or 'mid dejection,
There is nothing can beguile,
That can show the fond affection
Of a mother's welcome smile.³⁰

Enumerating in general terms the grief and trials that characterize adult life, the poem insisted that the key to hope and resilience was the radiance of a mother's smile. Anchoring the end of each stanza, the mother's smile shimmered like a sentimental Cheshire cat, appearing as needed and apparently unattached to any real or tangible maternal figure. A disembodied smile could beguile and reassure, but had little agency

²⁹ Noble, *Masochistic Pleasures*, 32.

³⁰ Carpenter, "A Mother's Smile," *The Young Ladies' Oasis: or, Gems of Prose and Poetry*, N.L. Ferguson, ed. (Lowell, MA: Nathaniel L. Dayton, 1852), 77.

and no personhood, suggesting that the ideal mother was not so much an active participant in the world as she was a cherished but elusive influence.

The trope of the mother's voice offered a similarly noncorporeal vision of maternal influence, although it did offer the literary mother some possibility for self-expressive agency. Existing always as an echo, a memory, or a fantasy, the mother's gentle tones guided loved ones toward greater piety and prompted nostalgia for childhood, as did the verses of one poem from *Godey's* which remembered how the mother's "voice of gentle love first led me up in prayer/To the pure fount of bliss, and bade me quench my longings there."³¹ Her voice could also be a persistent presence, even from beyond the grave:

My mother's voice! how oft doth creep
Its cadence on my lonely hours,
Like healing sent on wings of sleep,
Or dew on the unconscious flowers.
I might forget her melting prayer,
While pleasure's pulses madly fly;
But in the still, unbroken air,
Her gentle tones come stealing by—
And years of sin and manhood flee,
And leave me at my mother's knee.³²

In this poem the voice was as abstract as "healing sent on wings of sleep," yet it held more power and was more enduring than the memory of the mother's prayer. Although her words were apparently forgettable, her voice was eternal. Coming from beyond the grave, a mother's voice, like her smile, was a memory that brought comfort to the sorrowful, for "It was a mother's gentle voice/Communing with a daughter's heart,/While

³¹ P. Kenyon Kilbourn, "To My Mother," *Godey's Lady's Book* 26 (February 1843): 93.

³² Willis, "Mother's Voice," *The Mother's Assistant, and Young Lady's Friend* (June 1851): 86.

bidding that sad one rejoice,/And every sorrowing thought depart.”³³ The trope of the mother’s voice gave her the ability to speak even after death, thus transforming her into a powerful spiritual presence. Her voice served as a guide, leading loved ones along a path of piety and pure living: “a voice is in my heart,” as one poet mused.³⁴ Indeed, such poems illustrated that the mother had more influence as a spirit than as a living member of the family.

The most abstract element of the disembodied maternal presence was the “mother’s love”: “A noble, pure, and tender flame/Enkindled from above,” the essence of sentimental motherhood.³⁵ The mother’s love was not merely an emotion—it had a presence of its own. As one poem mused: “We felt the atmosphere of love,/A mother’s presence brings,/And safe, as if an angel form/Had wrapped us with his wings”³⁶ Indeed, a mother’s love could have a powerful agency of its own—more so perhaps than the mother herself. As the Reverend E.P. Dyer of Massachusetts wrote for an issue of the *Mother’s Assistant*:

In the golden days of childhood, there was one who loved me well;—
One, whose love had mighty power with me, and bound me like a spell;

...

When the shadows round the sunset fall, as day retires to rest,
Then it glitters, like a diamond-pin, upon the evening’s breast;—
With the beauty of that queenly gem, before its beams depart,—
Shines the jewel of Maternal Love, in thee a Mother’s Faithful Heart.³⁷

³³ George Waterman, Jr., “My Mother,” *Godey’s Lady’s Book* 28 (January 1844): 45.

³⁴ L.H.S. [Lydia Huntley Sigourney], “Child at a Mother’s Grave,” *The Farmers’ Cabinet* 34, no. 22 (January 29, 1836): 4.

³⁵ Montgomery, “A Mother’s Love,” *The Christian Journal, and Literary Register* 3, no. 12 (December 1, 1819): 379. Online. *ProQuest: American Periodicals Series*.

³⁶ Mrs. P.P. Sompayrac, “To My Mother in Heaven,” *The Mother’s Assistant, and Young Lady’s Friend* (June 1851): 156.

³⁷ Reverend E.P. Dyer, “Maternal Love,” *The Mother’s Assistant, and Young Lady’s Friend* (January 1850): 6.

Syntactically, the poem elided the presence of the mother by making love the grammatical subject which held “mighty power,” before shifting quickly to ethereal visions of Maternal Love as a jewel, creating vivid visual associations with the heavens. The mother’s love acted powerfully in life, but it gained a new and more heavenly power after death. One poem specifically repudiated the body of the mother in favor of her love and piety:

A Mother’s Love!—Oh! never, sure
Did sweeter, or more holy feeling
A flame from earthly dross so pure,
On this our sinful earth find dwelling;
A coin so free from base alloy:
A love so near to that above;
Angels might covet to enjoy
A pious Mother’s tender Love!³⁸

This was one of the central events in many poems about mothers—the move from earth to heaven. Developing a clear binary between the flesh or earth and the spirit or heaven, the poet drew a powerful parallel between maternal love and divine love. Thus a mother’s love—“free from earthly dross”—was the secret to her everlasting power and influence, but only if she were a pious and virtuous woman whose influence came from her Christian example.

The abstract symbols of maternal virtue—the mother’s smile, voice, and love—emphasized the ethereal and spiritual nature of the good mother and represented her with metaphors of abundance and endurance. The transcendent mother was everlasting in her virtue and influence, for her highest qualities could not be tarnished by time or death. As one poet wrote, “My mother pressed my hand, and *looked* a sad, a last farewell,/And shed

³⁸ Lewis J. Cist, “A Mother’s Love,” *Godey’s Lady’s Book* 20 (March 1840): 109.

a tinge upon my thoughts that time can ne'er dispel."³⁹ Another poem was more specific about the mother's enduring presence: "There's music in a mother's voice,/More sweet than breezes sighing,/There's kindness in a mother's glance,/Too pure for ever dying." Moreover, as the next verses suggested, the qualities of the good mother were infinite and could never be depleted: "There's love within a mother's breast,/So deep 'tis overflowing,/And care for those she calls her own,/That's ever, ever growing."⁴⁰ The metaphor of the fountain became the standard trope for evoking infinite maternal affection—the centerpiece of domestic culture. As one poet mused, "Beautiful, is it not—this sketch,/Of true domestic bliss,/The fountain of maternal love,/Welling with happiness?"⁴¹ Such metaphors brought images of nature—water, fountains, and ever-renewing growth—to the forefront, associating maternal virtue with natural abundance and eternal processes.

In spite of her associations with nature—reminiscent of Enlightenment ideology that associated virtue and purity with nature—the Christian impulse was the single most important characteristic of the sentimental mother. It was this impulse that transformed her from "earthly dross" to a transcendent spiritual figure in sentimental poetry, giving her infinite and enduring qualities a divine aspect. It was also in the context of Christian piety that the nineteenth-century literary mother possessed the most agency and the strongest voice. One poem, entitled "A Mother's Prayer, on the birth of her child," offered up the mother's own voice in prayer for the future piety of her infant:

³⁹ "Autumn Thoughts," *The Boston Literary Magazine* 1, no. 7 (November 1832): 307.

⁴⁰ "A Mother," *The Mother's Assistant, and Young Lady's Friend* 1, no. 2 (February 1841): 38.

⁴¹ Mr. E. W. Robins, "On a Mother and Her Infant," *Mother's Assistant, and Young Lady's Friend* 8, no. 5 (May 1846): 107.

Let me, while thy features viewing,
Breathe to heav'n my fervent pray'r.
Ev'ry worldly thought subduing,
Make an int'rest for thee there.

Not for riches, rank, or beauty,
Shall my hopes ambitious rise;
More essential is the duty
Which a christian's heart should prize.⁴²

This was a common theme in poems about mothers: the mother gained a voice through prayer, and in doing so she—and her loved ones—were drawn up into the spiritual realm. Another poem used the dying mother's "Good-by" to stand in for a whole constellation of Christian teachings:

My mother's "good-by"—it comes to me
Like a peace-be-still to the troubled sea;
And when passions would sway, or temptations entice,
I hear the sound of a warning voice,
"My son, this world is a world of sin,
And there's many a tempting vice therein,
But shun them all, and their presence fly,
And God will protect thee—Good-by, good-by!"⁴³

In the context of prayer or pious didacticism the mother gained a voice, but only in the repetition of conventional Christian sentiments. Her individual personhood and subjectivity disappeared in the spiritual essence of her "good-by."

The feelings and utterances of the Christian mother in sentimental poetry were most often bound up with death and the process of dying. In most motherhood poems it was the mother whose "sands of life were ebbing—/Ebbing—ebbing fast away," or whose grave formed the centerpiece of the poem, but it could also be the death of a child

⁴² "A Mother's Prayer, on the Birth of her Child," *The Lady's Monthly Museum or Polite Repository of Amusement and Instruction* 8 (February 1810): 110-111.

⁴³ Thomas M. Cooley, "My Mother's Good-By," *Godey's Lady's Book* 29 (September 1844): 108.

that gave the poem its emotional impact.⁴⁴ Poems about dead and dying mothers formed the heart of the sentimental poetic corpus. For instance, roughly one third of all the motherhood poems published in *Godey's* between 1830 and 1850 featured deceased or dying mothers.⁴⁵ In poems about deceased mothers the body of the mother was literally absent—replaced in the text by a gravestone or by a specific memory or location. The poem “My Mother’s Grave,” for instance, described the sentiments aroused where “A mound of waving grass was near,/ A grave, made in the clay,/ A holy spot to memory dear,/ Beneath, my mother lay.” In this particular case, Nature replaced the maternal body, for it was Nature who embraced the narrator and “pillowed in her tender arms/ My sad and tearful face.”⁴⁶

Maternal death poems often featured the wasting and disappearance of the mother’s body, which allowed her to become a spiritual figure, unfettered by corporeality. Maternal mortality was, of course, a real and dreaded aspect of life, and many women had relatives and friends who had died in childbirth or from complications following birth. One way of making sense of these losses and of the fears women faced as they anticipated the trials of childbearing was to sentimentalize death and spiritualize the mother. If the essence of the mother in her spirit rather than her material form, then she could never really perish. Motherhood poems emphasized that as the mother herself wasted away, her piety and influence on her children strengthened. A poem by Lydia H. Sigourney featured the mother’s deathbed and her last conversation with her children,

⁴⁴ A.R. Wolfe, “The Memory of My Mother,” *The Mother’s Magazine and Family Monitor* 19 (1851): 254.

⁴⁵ This estimate comes from examining the holdings of the Library Company of Philadelphia, which possesses a nearly complete run of the magazine during this time span for a total of roughly forty volumes (excepting a few missing volumes, each representing six issues).

⁴⁶ “My Mother’s Grave,” *Mrs. Whittelsey’s Magazine for Mothers and Daughters*, 2 (1851): 94.

who “wondered why/Their mother in such feeble whisper spake,/Broken with sighs and why her wasted cheek/Was pale as marble.” The mother’s feeble voice, her pallor and wasted figure, and her glowing eyes all spoke to the slow, genteel disappearance of the body. When the body disappeared, her soul could take flight, as “with a wondrous lustre in her eye,/The last, bright sunbeam of a mother’s love,/Ere it became seraphic, the freed soul,/High o’er the bondage of all earthly ties,/Went forth with hallelujahs, at the call/Of its Redeemer.”⁴⁷ The heart of the poem was her transformation from mortal woman to immortal spirit, from “emaciate hand” to “freed soul.” Indeed, the central message of maternal death poems was the sought-after release from the trials of the flesh. Such poems presumed that the lot of the mother was one of suffering, though such suffering was rarely specifically linked to the physical challenges of childbearing. One poem in *The Mother’s Magazine and Family Journal* told of the hurried baptism of an infant just before the death of his mother; the fact that her death came so soon after his birth signaled that her demise was related to complications of childbirth, but such scenarios were rare in sentimental poems and poets never described the physical complications that led to death or debility.⁴⁸

Thus it was that through death the sentimental mother was transformed into a spirit, a figure of surpassing virtue who had greater power and influence from on high than ever she possessed on earth. As one contemporary put it, “A mother is, next to God,

⁴⁷ Mrs. L.H. Sigourney, “The Mother’s Parting Gift,” *The Mother’s Assistant, and Young Lady’s Friend* 9, no. 4 (October 1846): 80.

⁴⁸ See Meta Lander, “Baptism of the Dying Mother’s Child,” *Mother’s Magazine and Family Monitor* 19 (1851): 60.

all powerful.”⁴⁹ Her memory and the echoes of her voice in prayer could lead loved ones along the path of righteousness, and her grave, a common centerpiece in motherhood poems, remained a symbol of the transformation from flesh to spirit. What was perhaps most remarkable about this ostensibly powerful spiritual figure, however, was her passivity; the sentimental literary mother *did* almost nothing. As one contemporary women’s rights activist critically noted, “‘Woman’s influence’ . . . is held to be of far more importance than woman’s self—her influence being regarded as the end of her being, and herself as an incident only.”⁵⁰ The idealized mother was the object of other forces—illness, grief, pain—but she was rarely an active subject. Disembodied, often voiceless, it was her mere existence that made her powerful and influential, not any action or will of her own.

The tropes and themes that characterized sentimental poetry appeared frequently in prose pieces as well, although these texts showed less uniformity in their focus and imagery. One short piece tapped into the image of the praying mother as a powerful memory and influence in the lives of her children: “I have a vivid recollection of the effect of maternal influence . . . I seemed to hear the very tones of her voice; and when I recollected some of her expressions, I burst into tears, arose from my bed, and fell upon my knees just on the spot where my mother kneeled.”⁵¹ Like the sentimental poems that evoked the voice of the pious mother, this piece envisioned her as a potent memory

⁴⁹ “The Women of Philadelphia,” *Public Ledger and Daily Transcript* (ca. 1848), in *History of Woman Suffrage*, Elizabeth Cady Stanton, Susan B. Anthony, Matilda Joselyn Gage, eds. (6 vols., New York: Fowler & Wells, 1881), 1: 804.

⁵⁰ Mrs. C.M. Kirkland, “General Introduction,” in Mrs. Hugo Reid, *Woman, Her Education and Influence* (New York: Fowlers and Wells, 1848), 12.

⁵¹ Reverend Richard Knill, “A Mother’s Prayers,” *The Mother’s Assistant, and Young Lady’s Friend* 1, no. 1 (January 1841): 6.

whose influence was stronger in death than in life. Similar testimonies appeared regularly, evoking the memory of a mother's voice or touch as a talisman against vice later in life.⁵² Another short piece created an image of perfect maternal love by comparing it to the abundance of flowing water, for the mother "folded the happy babe to her warm and throbbing breast. She felt a gush of pure enjoyment in that sacred moment, such as flows from no spring save that of a *mother's* heart."⁵³ Such images were identical to those found in sentimental poems, but they were often mixed with a diverse array of pragmatic advice about mothering, didactic stories, or dogmatic pronouncements about maternal duty. Indeed, what makes the sentimental poetry uniquely interesting is the consistency in the imagery used to depict the transcendent mother and in the overall message about women's spiritual power and influence. Sentimental poetry condensed an array of ideas and images of motherhood into one densely emotional form.

The sentimental poems that appeared in magazines were often paired with prints and engravings that visually represented sentimental and domestic themes. The *Godey's Lady's Book* was especially popular because of its images, in particular the colored fashion plates that readers eagerly studied and even framed and hung on their walls.⁵⁴ Visual depictions of femininity and domesticity formed an important part of the culture of sentiment by visually reinforcing the messages about true womanhood delineated in

⁵² See for instance "Maternal Influence," *Godey's Lady's Book* 11 (July 1835): 73.

⁵³ Reverend Daniel Wise, "The Bereaved Mother," *The Mother's Assistant, and Young Lady's Friend*, no. 1 (January 1850): 7.

⁵⁴ For more on the importance of fashion plates in *Godey's* see Isabelle Lehuu, "Sentimental Figures: Reading *Godey's Lady's Book* in Antebellum America," in *The Culture of Sentiment: Race, Gender, and Sentimentality in Nineteenth-Century America*, Shirley Samuels, ed. (New York: Oxford University Press, 1992), 73-91.

poetry and prose.⁵⁵ Just as motherhood was a prominent theme in poems, essays, and stories, images of mothers and their children were among the most popular subjects in idealized visual depictions of womanhood. Although such images could not represent the mother without also representing her body, they nevertheless managed to stress the importance of mind and spirit over matter. One such image, “The Empty Cradle,” accompanied a short piece combining poetry and prose that idealized the submission of mothers who grieved the loss of an infant but had faith that it was better off in heaven (see fig. 5.1).⁵⁶ The mother’s bent posture, bowed head, and lowered gaze spoke to her sorrow and submissiveness alike. She was weighted down by grief, physically as well as emotionally, but it was a grief that she was meant to accept with calm resignation. Moreover, the listlessness of her body, her left arm hanging softly down at her side and her bonnet lying forgotten on the floor, emphasized the passivity of one who is lost in spiritual realms, one who “lives in the past, so sweet with human love and hope—in the future, so glorious with heavenly love and joy.”⁵⁷ Embodied yet lost in a more enduring spiritual realm, the grieving mother’s corporeality specifically signified her emotions and her piety.

⁵⁵ For more on definitions of “true womanhood” see Barbara Welter’s classic article, “The Cult of True Womanhood: 1820-1860,” *American Quarterly* 18, no. 2 (Summer 1966): 151-174.

⁵⁶ W.E. Tucker, engraver, “The Empty Cradle,” *Godey’s Lady’s Book* 34 (January 1847).

⁵⁷ “The Empty Cradle,” *Godey’s Lady’s Book* 34 (January 1847): 12.



Figure 5.4. "The Empty Cradle," *Godey's Lady's Book*, 1847.

Another image of a "Mother and Infant" even more explicitly evoked noncorporeal maternity and naturalized the emotional bonds of motherhood.⁵⁸ Accompanying a poem by Mr. E.W. Robins that highlighted maternal love, "Pure, passionate, and deep,"⁵⁹ the only distinct aspects of the image are the mother's face and the infant's head, both highlighted against the dark fuzziness of the forest that engrosses the rest of the scene. The mother here is almost as swaddled in indistinct garments as her infant—the only aspect of her physical presence that stands out clearly is her face, which gazes down at the infant in her arms. Her surroundings are also indistinct, although she is clearly in a wooded area, and her absence from a more typical domestic setting suggests

⁵⁸ "Mother and Infant" [engraving], *The Mother's Assistant, and Young Lady's Friend* 8, no. 5 (May 1846).

⁵⁹ Mr. E. W. Robins, "On a Mother and Her Infant," *Mother's Assistant, and Young Lady's Friend* 8, no. 5 (May 1846): 107.

detachment from the realm of everyday life and duties. The center of her existence is the infant in her arms. Although the accompanying poem spoke of “true domestic bliss” and fountains of maternal love, the image evokes somber feelings rather than celebratory ones. Indeed, the grimness of the surrounding scene illustrates by contrast that maternal love brings safety and reassurance to an uncertain world. The mother looks gravely at her infant, aware of life’s difficulties, while the innocent child playfully reaches toward her face with one small hand. The emotional bond between the two is the only transparent aspect of the image. Such images of mothers were intended to draw in the interest of the viewer not because of any compelling action or personality, but because of the emotional weight of the scene and what it signified for the enactment of ideal womanhood.

A third image, paired with a combination of poetry and prose entitled “Maternal Instruction,” presented a tranquil vision of domestic life that highlighted the importance of maternal involvement in the moral and intellectual education of her children (see fig. 5.2).⁶⁰ Although this image told a story about the concrete daily activities of a mother at home, the picture is in fact rather short on details. The reader cannot really see what the mother is doing—is she teaching her youngest to read or recite? What text?—but the image does convey a sense of the purity and perfection of the mother. The accompanying text began by quoting the popular English author, Mrs. Hemans: “There is not,/In all this cold and hollow world, a fount/Of deep, strong, deathless love save that within/A mother’s heart.” Emphasizing the infinite and enduring qualities of the mother, the text paired these verses and the subsequent essay with an image of maternal diligence.

“Maternal instruction is the purest and safest means of opening the fountain of

⁶⁰ J.C. Timbrell, artist; J. Bannister, engraver, “Maternal Instruction,” *Godey’s Lady’s Book* 30 (March 1845).

knowledge to the young mind,” concluded the essay, and this sentiment was verified by the pure light that fell exclusively on the mother in the image.⁶¹ The dreamy beauty of the image, encompassing the mother’s exaggeratedly high white forehead and her impossible slenderness as well as the pensive china-doll perfection of the older daughter who perhaps contemplates her own future as a mother, offered an idealization of the maternal role that privileged spirituality and intellect over the concrete work of mothering. This was not the robust and sensual mother of early poetic representations, but a mother whose power lay in her tender influence.



Figure 5.2. "Maternal Instruction," *Godey's Lady's Book*, 1845.

Like the women pictured above, sentimental mothers were often represented in visual culture as ethereal and unworldly, showing that they lived in an interior spiritual

⁶¹ "Maternal Instruction," *Godey's Lady's Book* 30 (March 1845): 108.

realm. At a time when American society was changing rapidly and Americans were increasingly gravitating to bustling, diverse, and impersonal urban areas, it is easy to imagine how such images of gentle domestic tranquility would have provided a reassuring reminder of the enduring perfection of maternal influence. Sitting quietly amidst the activity of others, looking gently into the distance rather than engaging directly either with the viewer or with other characters, the sentimental mother was young and beautiful, but her most compelling quality was her aloof passivity and her air of grave contemplation which gave the impression that she lived in but was not entirely of the everyday world. As many of the motherhood poems would suggest, her existence on earth was transitory and subordinate to her enduring spiritual life.

Although their focus was predominantly on the spiritual nature of motherhood, sentimental poems did occasionally encourage readers to imagine the mother's body by offering glimpses of motherly actions such as cradling, nursing, and embracing a child. One poem particularly highlighted the mother's Christian influence, but also evoked poignant visions of the mother-child bond by describing the infant's "cheek, now soft reposing/On thy tender mother's breast."⁶² Occasionally a poem gestured to the work the mother did as a caretaker, for the good mother was always there to "Wipe the cold sweat from off the brow;/The suffering form most gently move."⁶³ Indeed, one poem about a virtuous stepmother emphasized her caretaking role in order to identify her as a mother, though not a biological one: "she sweetly kisses me, and smooths [sic] each straggling

⁶² "A Mother's Prayer, on the birth of her child," *Ladies' Monthly Museum* 8 (1810): 111.

⁶³ Lewis J. Cist, "A Mother's Love," *Godey's Lady's Book* 20 (March 1840): 109.

curl,/And makes me love her when she says, ‘You are my own sweet girl.’”⁶⁴ These moments of physical intimacy generally focused on a single point of connection—such as a kiss—between mother and child that served to evoke the sincerity and selflessness of maternal love. But more often the literary mother was portrayed as a passive, ethereal, and eternal being whose spirit and memory did more work than her body.

This vision of the mother faltered, however, when faced with a different and more culturally problematic maternal subject: the enslaved mother. While sentimental representations of the mother rapidly permeated early nineteenth-century middle-class culture, by the mid-nineteenth century the sentimental poem had also become a tool for antislavery activism. James Basker writes that antislavery poetry from the eighteenth century emphasized reason and moral argumentation, whereas by the early nineteenth century themes such as parenthood, family life, and manhood introduced a new emphasis on emotion and empathy in antislavery poetry.⁶⁵ This sentimental tendency gathered momentum into the nineteenth century and between the 1830s and 1860s a substantial number of sentimental antislavery poems were published by both African American and white authors who sought to evoke the crimes of slavery and appeal to the moral and emotional sensibility of white Americans.⁶⁶ Appearing frequently in antislavery periodicals such as William Lloyd Garrison’s *Liberator*, in antislavery giftbooks such as *The Liberty Bell*, and in religious journals and literary magazines, antislavery poetry reached fewer readers than mainstream sentimental literature but was able nevertheless to

⁶⁴ Dr. Jonathan C. M’Cabe, “The Stepmother,” *Godey’s Lady’s Book* 24 (June 1842): 339.

⁶⁵ Basker, *Amazing Grace*, xl, 641.

⁶⁶ Wood, *The Poetry of Slavery*, xxiv.

spread antislavery sentiment among a larger segment of the population than previously, thanks to the widespread appeal of sentimental themes.⁶⁷

Antislavery literature drew on a variety of familiar themes intended to arouse the emotions of readers and make them viscerally aware of the injustices of slavery. Popular antislavery literature, including fiction, poetry, and the narratives of former slaves, relied heavily on the figure of the mother to emphasize the horror and degradation of slavery and to appeal to white northerners, especially women. One poem about the plight of enslaved mothers exhorted white women to intervene, “Mothers! for mothers intercede./Tell me not your voice is weak—/Speak! ‘tis all I ask you, Speak!”⁶⁸ Drawing on common sentimental tropes of maternal affection and moral and religious feeling, poems featuring the enslaved mother highlighted the violence inherent in the system of slavery, the severing of sacred bonds between mother and child, maternal grief, and the possibility of death as a welcome escape. Highlighting themes such as family and feminine virtue placed antislavery arguments within the broader cultural discourses of domesticity and gentility by which the middle classes invented and regulated their identity, making antislavery arguments both palatable and functional for a wider segment of the population.⁶⁹ Such appeals were part of what Julie Husband calls the “family protection campaign,” which was pioneered by abolitionists beginning in the mid-1830s.

⁶⁷ *The Liberator*, for instance, was published from 1831 through 1865 and had a circulation of about 2,300 by 1834, with a majority of African American subscribers. See C. Peter Ripley, ed. *The Black Abolitionist Papers*, vol. 3: *The United States, 1830-1846* (Chapel Hill: University of North Carolina Press, 1991), 9.

⁶⁸ “The Slave Mother,” *Liberator* 5, no. 2 (January 10, 1835): 8. Online. *ProQuest: American Periodicals Series*.

⁶⁹ By referring to the self-invention and self-regulation of the middle class, I borrow specifically from Michel Foucault’s argument that the middle class turned its technologies of discipline and regulation on itself in order to create and reaffirm its own image, before attempting to reform society at large. See for example Michel Foucault, *The History of Sexuality*, vol. 1, Robert Hurley, trans. (New York: Vintage Books, 1978), esp. 121-124.

Highlighting the destruction of family life under slavery and the unique vulnerability of women and children, this campaign especially sought to appeal to white women and, Husband argues, was responsible for garnering a critical mass of support for the antislavery cause.⁷⁰ But while such direct appeals to the feelings of white readers highlighted a universal vision of human emotion, the rhetoric and imagery that accompanied such appeals did not sustain such a utopian view of human equality.

Poems about enslaved mothers did not demonstrate the same uniformity of rhetoric and imagery found in poems about white mothers, making them more difficult to categorize. Virtually every poem about enslaved mothers featured the separation of mother and child, either by death or by sale, but this moment of trauma was articulated through a variety of images and language. Some poems expressed a degree of raw emotion rarely, if ever, seen in mainstream motherhood poems, which tended to feature tranquil resignation. In one poem an enslaved mother protested to her owner: “Then give me but one little hour—/O! do not lash me so!/One little hour—one little hour—/And gratefully I’ll go./Ah me! the whip has cut my boy,/I heard his feeble scream;/No more—farewell my only joy,/My life’s first gladsome dream!”⁷¹ In spite of her professed willingness (“And gratefully I’ll go”)—enforced by the lash—this mother cried out with an anguish that refused resignation. Yet other poets clung to tamer, though still evocative, imagery that articulated truths about slavery without tugging so fiercely at the emotions of the reader. One poet wrote, “Crushed by rude slavery’s iron hoof,/She stood, a branded

⁷⁰ Husband, *Antislavery Discourse*, 1-2.

⁷¹ Charlotte Elizabeth, “The Slave Mother and Her Babe,” *Liberator* 14, no. 26 (June 28, 1844): 104. Online. *ProQuest: American Periodicals Series*.

thing, aloof,” displaying the facts of enslavement without elaborating its emotional impact.⁷²

By placing enslaved women within sentimental discourse, such representations redefined them as legitimate sentimental subjects. One poem, for instance, articulated an appeal from the enslaved mother to the free mother that relied on typical sentimental language: “let the golden law of love/Guide the decisions of thy heart;/Believe, that in our torn hearts rise/The mother’s tenderest sympathies.”⁷³ Allowing the enslaved mother to deploy such a vocabulary of sentiment brought her into the same rhetorical and affective realm as white mothers. This was an important move in a culture that habitually defined non-white women and men as less intellectual, less spiritual, more embodied, and therefore less sentimental than white Americans.⁷⁴ As William Etter writes, “In the ideology of American slavery disembodiment was figured as the condition of intellectual power and embodiment as the condition of physical subjugation; whiteness and blackness, respectively, were figured as corresponding to each of these poles.”⁷⁵ By placing the enslaved mother within sentimental discourse, antislavery writers created a common ground of language and feeling that justified their appeals to white Americans on behalf of the enslaved.

⁷² “The Slave Mother,” *The Religious Intelligencer* 2 (November 12, 1836): 375. Online. *ProQuest: American Periodicals Series*.

⁷³ “The Slave Mother’s Appeal,” *Zion’s Herald* 8, no. 15 (April 12, 1837): 1. Online. *ProQuest: American Periodicals Series*.

⁷⁴ For a detailed analysis of the mind/body hierarchy and its relation to racial ideology, particularly in the antebellum south, see for example William M. Etter, *The Good Body: Normalizing Visions in Nineteenth-Century American Literature and Culture, 1836-1867* (Newcastle upon Tyne: Cambridge Scholars Publishing, 2010); Lars Schroeder, *Slave to the Body: Black Bodies, White No-Bodies and the Regulative Dualism of Body-Politics in the Old South* (Frankfurt: Peter Lang, 2003).

⁷⁵ Etter, *The Good Body*, 87.

Indeed, some scholars have proposed that one of the functions of sentimental culture was to universalize an ideal feminine identity unfettered by material relations. As Lauren Berlant writes, “From its inception in the late eighteenth century, the sentimental abstraction of the values of ‘woman’ from the realm of material relations meant that interactions among classes, races, and different ethnic groups also appear to dissolve in their translation into sentimental semiosis.”⁷⁶ Sentimentalism ostensibly offered a universal language and way of feeling in which anyone could participate simply by marshaling correct emotions and modes of expression. Scholars have largely allowed this assumption to stand, permitting sentimentalism to stand as an inclusive culture blind to external power structures, yet the representations of enslaved mothers in antislavery poetry bely this presumed universality. Without diminishing the importance of incorporating enslaved women into sentimental culture, I would suggest that the ways in which enslaved women were represented in sentimental literature ultimately served to reproduce rather than transcend racial hierarchies through representations of the body. While it may be true, as Julie Husband writes, that at the center of antislavery literature is “sentimental identification, when bodily suffering, tears, or the loss of a loved one provide transcendent moments of understanding across dramatically different race, gender, and class experiences,” it would be overly optimistic to assume that fleeting moments of empathy necessarily obliterated entrenched racial boundaries.⁷⁷

Instead, antislavery poems combined sentimentalism with a voyeuristic focus on the physical torments perpetrated by slaveholders, and in doing so they bound the slave

⁷⁶ Lauren Berlant, “The Female Woman: Fanny Fern and the Form of Sentiment,” in *The Culture of Sentiment: Race, Gender, and Sentimentality in Nineteenth-Century America*, Shirley Samuels, ed. (New York; Oxford: Oxford University Press, 1992), 269.

⁷⁷ Husband, *Antislavery Discourse*, 5.

mother within a more earthly and corporeal framework than her white counterpart. Whereas the focus of mainstream poetry was the moral influence of the mother, antislavery literature made a spectacle of the oppressed and degraded enslaved body. Thus the sentimental redefinition of the enslaved mother was incomplete. Her inclusion in sentimental discourse did not create a universal and colorblind ideal of the transcendent mother; instead, differing representations of white and black mothers in sentimental poetry subtly reinforced a racialized spirit/body association that granted the literary white mother a higher spiritual identity and linked the enslaved mother to base corporeality. Although antislavery motherhood poems promoted a sympathetic sisterhood of mothers, it was in the end an inherently unequal sisterhood.⁷⁸

Much of the rhetorical power in antislavery motherhood poems came from thwarted sentimental tropes that simultaneously brought enslaved mothers into sentimental discourse and underscored the ways in which slavery destroyed the sentimental order and made the enslaved mother an incomplete sentimental subject. One poem from a volume compiled by the former slave, William Wells Brown, highlighted the slave mother's infinite capacity for emotion, a common trope in mainstream motherhood poems:

O who can imagine her heart's deep emotion,
As she thinks of her children about to be sold;
You may picture the bounds of the rock-girdled ocean,
But the grief of that mother can never be known.⁷⁹

⁷⁸ For more on the different perceptions of black and white mothers, see for example Eva Cherniavsky, *That Pale Mother Rising: Sentimental Discourses and the Imitation of Motherhood in 19th-Century America* (Bloomington: Indiana University Press, 1995).

⁷⁹ "O, Pity the Slave Mother," *The Anti-Slavery Harp; a Collection of Songs for Anti-slavery Meetings*, William Wells Brown, ed. (Boston: Bela March, 1848), 6.

But instead of evoking the typical trope of infinite love, here the author substituted grief to emphasize the perversions of slavery. Unlike poems that worshipfully evoked the infinite tenderness in a mother's heart, antislavery poems described the devastation wrought on enslaved mothers in order to make their moral argument. The subsequent stanza of the same poem deployed several common sentimental tropes, but used them to underscore how slavery blighted even the highest ideals of maternal affection:

The mildew of slavery has blighted each blossom,
That ever has bloomed in her path-way below;
It has froze every fountain that gushed in her bosom,
And chilled her heart's verdure with pitiless woe.⁸⁰

The botanic imagery and recurring image of the maternal fountain brought the enslaved mother within the realm of sentimental motherhood, but by emphasizing the destruction of these sentimental tendencies the poem exposed the maternal prerogatives denied the enslaved mother. Thus the literary enslaved mother existed within the realm of sentimentality, but was ultimately defined both within the institution of slavery and within sentimental culture by her status as a slave rather than by her identity as a mother. Contrary to the real-life examples of many courageously loving enslaved mothers, in this sentimental context the fountain of maternal affection simply could not continue to flow under the brutality of slavery. Such sentimental imagery worked powerfully on the emotions of the reader who was already familiar with the ideals of sentimental motherhood, but they did not communicate the same fantasy of transcendence found in mainstream poems. The literary slave mother was, in the end, a different kind of mother.

Working in tandem with these thwarted sentimental tropes were images of the physical suffering and violence endemic to slavery that drew the reader's attention to the

⁸⁰ "O, Pity the Slave Mother," *The Anti-Slavery Harp*, 6.

corporeality of the enslaved mother. One poem began with the shocking image of a mother forced to dig a grave for her deceased child: “And thou, a woman, scooping out its grave!/The heart of mercy bleeds to see thee fling/The broken earth o’er one thou’dst die to save.” The very idea of a woman performing such work violated middle-class norms of femininity, but the thought of a mother forced to fling clods of earth over the corpse of her child was the height of impossibility: “Yet not thine own!” the poet exclaimed, “no mother could be here,/Interring her own dead.”⁸¹ The presence of the mother and the work she was forced to do wrought such violence on the norms of middle-class society that the witness could scarcely believe his own eyes: surely she *could not be* the mother of the deceased child. Yet he knew that his eyes did not deceive him, and the tale of his encounter projected a searing image of a bereaved mother who toiled at an almost unspeakable task.

The symbol of the lash was ubiquitous in antislavery poetry and it both represented the horrors of slavery and emphasized the corporeality of the enslaved. This kind of spectacle formed part of what Karen Haltunnen has called the “pornography of pain.” She argues that it was not until the eighteenth century that the cult of sensibility redefined pain as unacceptable and repulsive, and this new understanding led to views of pain as “obscenely titillating precisely because the humanitarian sensibility deemed it unacceptable, taboo.”⁸² Descriptions of slavery used the realities of physical pain and punishment to make readers viscerally aware of the injustices of the institution and, as Elizabeth Clark has argued, they contributed to a developing legal discourse about the

⁸¹ E. Jessup Eames, “The Slave Mother,” *National Era* 9, no. 455 (September 20, 1855): 149. Online. *ProQuest: American Periodicals Series*.

⁸² Karen Haltunnen, “Humanitarianism and the Pornography of Pain in Anglo-American Culture,” *American Historical Review* 100, no. 2 (April 1995): 304.

right of the individual to bodily integrity.⁸³ But at the same time these portrayals also put the body of the slave on display in ways that could become obscene and potentially titillating by openly displaying both the uncovered body of the slave and the very moment of violence. One poem poignantly made violence the direct result of virtuous maternal nurture when a mother was punished for her attentiveness to her child: “At noon—O, how I ran! And took/My baby to my breast!/I linger’d—and the long lash broke/My sleeping infant’s rest.”⁸⁴ This poem told a frenzied tale of labor and abuse interspersed with a few stolen moments of maternal tenderness. Defining her body both in terms of its maternal virtues and its victimhood, this narrative of violence and loss emphasized the physicality of the mother and the corporeal nature of her suffering. Her maternal virtue was seen in the act of breast-feeding, while her oppression was underscored by the lash. Another still more gruesome poem framed the violence of slavery in terms of the deliberate murder of an enslaved child by his owner, “Who angrily had caught the boy/And dashed him to the ground.” The child’s mother “wildly raised to heaven her eye,/And shrieked aloud and fell,” a powerful image of despair that was located predominantly in the reactions of the body. The poem concluded with the death of the mother, for “Her spirit took its flight--/And mother and child together lay,/For beasts to eat at night.”⁸⁵ A reader accustomed to the conventions of sentimental poetry might have reasonably expected a comforting, if trite, conclusion about the mother and

⁸³ Elizabeth B. Clark, “‘The Sacred Rights of the Weak’: Pain, Sympathy, and the Culture of Individual Rights in Antebellum America,” *The Journal of American History* 82, no. 2 (September 1995): 463-493.

⁸⁴ Charlotte Elizabeth, “The Slave Mother and Her Babe,” *The Liberator* 14, no. 26 (June 28, 1844): 104. Online. *ProQuest: American Periodicals Series*.

⁸⁵ “The Slave Mother,” *Liberator* 3, no. 48 (November 30, 1833): 192. Online. *ProQuest: American Periodicals Series*.

child's spiritual reunion in heaven. Instead, the reader was left with the gruesome image of desecrated corpses, a grim reminder of the frailty human corporeality.

The image of slaves, both women and men, suffering under the slaveholder's whip was ubiquitous in antislavery visual culture as well as in its literary productions.⁸⁶ One such antebellum broadside offered a series of six scenes of slavery, two of which featured violence against a slave mother, including the threat of whipping (see fig. 5.3). In the first scene, it is unclear whether mother or child has been sold, but the mother struggles with evident desperation against the grasp of a white man while her child pleads on his knees. The second scene is even more brutal, showing an infant torn out of the grasp of its mother who is nearly naked and almost prostrate on the ground, while one man restrains her and another stands over her with his whip.⁸⁷ The physical and psychological violence imagined in these scenes highlighted the moment of physical rupture and loss for mother and child. It also underscored the mother's corporeality, both by exposing and restraining her body in such a way that it thwarted every convention of proper femininity and by emphasizing her body's desperate force and activity. Unlike the passive and still mothers seen earlier whose bodies seem to retreat from notice, in these images of the distraught slave mother it is impossible for the viewer not to notice her body and the violence being done to it.

⁸⁶ For more on the portrayal of slavery in visual culture and high art, see Maurie D. McInnis, *Slaves Waiting for Sale: Abolitionist Art and the American Slave Trade* (Chicago: University of Chicago Press, 2011).

⁸⁷ "Views of Slavery," broadside (New York, c. 1836). Graphics-Print Department-Political Cartoons-1836 Vie P.2003.10, LCP.



Figure 5.3. "Views of Slavery," New York, c. 1836.
The Library Company of Philadelphia

Combined with the specter of violence that haunted antislavery poems, the figure of the wild and raving mother provided a striking foil to the passive mother of mainstream poetry. Indeed, the very word "wild" was one that appeared with frequency in antislavery poems, but almost never in mainstream motherhood poems. Numerous poems deployed the figure of the raving mother in order to underscore the horrors of the slave auction. Juxtaposing the cold rationality of the white spectators and the frenetic despair of the enslaved mother, one poem offered a terrible picture of the abuses of slavery:

‘Twas there was seen a woman sold,
A mother parted from her child;
All hearts around were hard and cold,

While she was raving, frantic, wild.
...
The cruel whip soon made her rise;
And on the table take her place;
While from her wild and blood-shot eyes,
The scalding tears streamed down apace.⁸⁸

Set apart by the vividness of her emotions and the frantic reactions of her body, the slave mother appealed to the emotions of the reader through the actions and reactions of her body. One poem began with a similar image of the ways in which emotion manifested itself on the body: “Negro Woman, o’er thy child,/Chanting low in accents wild . . . Close she hugs him to her breast,/Sighs and moans like one distress,/And lifting high her streaming eyes/To the God of mercy cries.”⁸⁹ The image of agony and fierce emotion in this poem was powerfully evoked by the mother’s body itself—the way she clung to her child, the tears that covered her cheeks, and the audible cries torn out of her by grief and fear. The poem told of her oppression under the institution of slavery, but in spite of her lack of power she was not a passive figure. Indeed, one significant result of the slave mother’s non-ethereal existence was the fact that she remained a far more active figure, even in sentimental discourse, than white literary mothers.

Just as the voice of the transcendent mother was an important trope in mainstream poems, the voice of the slave mother appeared with equal frequency but with a very different significance. One poem bore witness to a slave mother’s troubles, writing, “I saw the burning tear/Run down her dark brown cheek;/It told of wo [sic] and care,” but quickly moved from the voice of the narrator to the voice of the mother herself who

⁸⁸ W.H., “The Slave-Mother,” *Philanthropist* 6, no. 18 (November 3, 1841): 4. Online. *ProQuest: American Periodicals Series*.

⁸⁹ “The Slave Mother,” *Liberator* 5, no. 2 (January 10, 1835): 8. Online. *ProQuest: American Periodicals Series*.

frantically cried out her tale of loss.⁹⁰ While the voice of the white mother was a gentle echo that guided its hearers toward greater piety, the voice of the enslaved mother was a shriek that reverberated with disempowerment and loss. One poem used the echoes of these cries to evoke the depredations of the slave auction:

The harsh auctioneer, to sympathy cold,
Tears the babe from its mother and sells it for gold;
While the infant and mother, loud shriek for each other,
In sorrow and woe.

At last came the parting of mother and child,
Her brain reeled with madness, that mother was wild;
Then the lash could not smother the shrieks of that mother
Of sorrow and woe.

Although the refrain of “sorrow and woe” that ended each stanza in this poem partially restored a sense of order and sentimentality, what stood out in these verses was the imagery of frantic struggle and violence inflicted in a vain attempt to control the mother. The poet sought a visceral response from readers who could feel in their own bodies the shrieks of horror and the futile straining of the mother. The poem ended with the mother raving, bereft of reason, and finally dead. But instead of evoking her spiritual ascension, the poem kept its focus on the land of the living, imploring, “O, list ye kind mothers to the cries of the slave.”⁹¹ The mother’s shrieks were not a distant memory or echo, but a vivid and terrible reality meant to rattle the complacency of the white reader.

A common theme in antislavery literature was the wish for death as a welcome release from hopeless bondage. But poems that evoked this yearning did not explore the spiritual influence of the slave mother after death, as did poems about dying white

⁹⁰ “The Slave Mother,” *Boston Recorder* 19, no. 20 (May 17, 1834): 80. Online. *ProQuest: American Periodicals Series*.

⁹¹ J. Hutchinson, “The Bereaved Mother,” *The Anti-Slavery Harp*, 19.

mothers. One poem created a clear dichotomy between the corrupt world of the “coiling whip,/Whose cruel lashes drip/With gore,” and the world above, “where all is joy, and peace,/And love that cannot cease.”⁹² But although the mother died at the very end of this particular poem, the author merely allowed her to see but never fully inhabit the ethereal realm where the spirit left the tortured body behind. She arrived at its threshold, but unlike the white mothers of mainstream poetry, this mother’s spirituality was absent from the narrative. The fact that the literary slave mother did not become a transcendent figure meant that she could never gain, at least in the rhetoric of sentimental culture, the power and influence of the white mother. Whereas the spiritual mother was credited with perpetuating virtue and morality and strengthening the social order, the enslaved mother was merely an illustrative figure used to display the disorder caused in American society by the institution of slavery. In the end, although the sentimental tropes of motherhood brought the enslaved mother within the same cultural framework as idealized white mothers, they failed to make her equal to the transcendent ideal of sentimental motherhood.

Indeed, comparing representations of the non-corporeal white mother and the corporeal enslaved mother demonstrates that by the antebellum period the concrete presence of the maternal body in literature evoked a sense of social disorder and danger. When the mother was spiritual and transcendent she represented all that was good in American society; when she was embodied her very corporeality highlighted the specter of immorality and disorder. This trend was further elaborated in antislavery stories and personal narratives that consistently linked the maternal body to violence (either physical

⁹² G.S. Burleigh, “The Dying Slave Mother,” *The Liberty Bell* (January 1, 1842): 31-36. Online. *ProQuest: American Periodicals Series*.

or psychological), and often to sexual immorality as well. The short story by Lydia Maria Child, "Slavery's Pleasant Homes," told of a slave woman whose beauty drew the attention of her owner and who was eventually forced to have sexual relations with him. Consistently seeking to avoid his rapacity and preserve the integrity of her love for a fellow slave, she incurred his wrath and "one severe flogging succeeded another, till the tenderly-nurtured slave fainted under the cruel infliction, which was rendered doubly dangerous by the delicate state of her health. Maternal pains came on prematurely, and she died a few hours after."⁹³ The violence in this scenario was made all the more horrific by the fact that she was pregnant and, according to the dictates of domestic culture, should have been afforded all the tenderness and respect due to mothers. Moreover, her pregnancy moved the reader beyond the bare facts of physical violence to consider the consequences of rape and the grim truth of forced childbearing. Another story, this one by Frances Green, told a similar tale of violence against a mother who literally gave birth while flogged at the stake: "She in vain pleaded that fright and agitation had made her very ill—that she could not even stand. She was bound to the stake; and while cruel and vulgar men mocked her agony, there *our babe was born!*"⁹⁴ These stories and many others, such as Eliza's iconic flight over the ice flows in Harriet Beecher Stowe's bestselling antislavery novel *Uncle Tom's Cabin*, highlighted both the corporeality of the slave mother and the vulnerability of her body, and used the physicality of her oppression to underscore the immorality and social disorder wrought by slavery.

⁹³ Lydia Maria Child, "Slavery's Pleasant Homes" (1843), *The Online Archive of Nineteenth-Century U.S. Women's Writings*, Glynis Carr, ed. <http://www.facstaff.bucknell.edu/gcarr/19cUSWW/LB/SPH.html>.

⁹⁴ Frances H. Green, "The Slave-Wife," *Liberty Chimes* (Providence, RI: Ladies Anti-slavery Society, 1845), 103.

Images of violence inflicted on the female body provided powerful emotional arguments against slavery, but they also offered up the enslaved body as a spectacle for the consumption of white Americans, creating what Carolyn Sorisio calls, “a public exhibition of the female slave’s embodied wrongs.”⁹⁵ By picturing the physical anguish of the enslaved such images appropriated pain experienced individually and repackaged it as a shocking but still palatable form of moral and political argumentation. Generalized representations of violence and physical suffering were not as elaborate in antislavery poetry as they were in more detailed prose accounts of slavery, but they did create a system in which the experience of physical violence was translated into a series of stock images that focused the public’s attention on the bodies of the enslaved.

The emphasis on the corporeality of the enslaved mother in sentimental antislavery literature is consistent with what we know about ideas of race, gender, and embodiment in the nineteenth-century United States. Sorisio, for instance, explains that nineteenth-century science used biological essentialism to explain and perpetuate race- and gender-based differences, making the body of the white man the invisible norm against which all others were defined and judged.⁹⁶ Privileging the mind over the body, nineteenth-century intellectuals insisted that the superiority of the white man was evident in the scope of his morals and intellect, while the inferiority of women and non-whites was evident in their childish intellect and their disorderly bodies. Yet as mothers of the supposedly superior race, white women had somehow to be redeemed from base

⁹⁵ Carolyn Sorisio, *Fleshing out America: Race, Gender, and the Politics of the Body in American Literature, 1833-1879* (Athens, GA: University of Georgia Press, 2002), 48.

⁹⁶ Sorisio, *Fleshing out America*. For more on race, gender, and the body see for example Stephen Jay Gould, *The Mismeasure of Man*, Revised Edition (New York: Norton, 1996); Schroeder, *Slave to the Body*.

corporeality; white middle-class culture efficiently did so by emphasizing the transcendent spirituality of the ideal white mother. It was an unattainable fantasy for real mothers—as Marianne Noble writes, “The ideal of female noncorporeality promises the true woman a social position of the first importance . . . but leaves that position ever vulnerable to the incessant assault of her own body”—but idealized images of American mothers nevertheless provided a reassuring image of order and morality.⁹⁷ Enslaved mothers, in contrast, were theoretically the most corporeal of all, and so it comes in many ways as no surprise that their bodies should be emphasized in sentimental literature. Yet the emphasis on their corporeality in this literature poses a serious challenge to the universalizing and utopian vision that has been repeatedly attributed to sentimental culture. Although the intentions of antislavery authors were reformist, race-based assumptions about what it meant to be a truly ideal mother showed through in the ways in which slave mothers were incompletely enveloped in the sentimental sisterhood. In this way, differentiated representations of the maternal body challenge scholars to see the cracks in the polished fantasies of domesticity and womanhood.

⁹⁷ Noble, *Masochistic Pleasures*, 36.

CONCLUSION

Pursuing the Maternal Body: Past, Present, and Future

“Hold still, we’re going to do your portrait, so that you can begin looking like it right away.”¹

Although I have chosen to conclude this study in the 1850s, the history of the maternal body in America cannot properly be said to have an ending. The 1850s provide a convenient end point, for this decade marked a transition into a time when women’s childbearing experiences and opportunities in life began to change more rapidly than ever before. These changes brought about new perceptions of the maternal body, both in public culture and in women’s private writings, although many older ideas and attitudes remained. As the historians Judith Walzer Leavitt and Nancy Theriot have shown, the women who began to bear children in the 1860s and beyond, as well as the medical practitioners who tended them, gradually created a different reproductive world than previous generations had experienced. During the second half of the nineteenth century anesthetized childbirth became increasingly available, particularly for middle-class and elite women, and women did not hesitate to demand it. The possibility of evading the pain of childbirth helped to reshape women’s perceptions of childbearing. Simultaneously, a better understanding of birth control methods made it possible for women to limit their childbearing more effectively than their foremothers had done.

¹ Hélène Cixous, “Laugh of the Medusa,” *Signs* 1, no. 4 (1976): 892.

Average birthrates for white native-born Americans continued to drop, from roughly 5.42 children in 1850, to 4.24 children in 1880, to 3.56 children in 1900, so that many women were no longer spending the majority of their adult lives pregnant and caring for young children. It is important to emphasize, though, that immigrant women and African American women continued to experience higher rates of fertility than native-born white women, suggesting diverse attitudes toward family limitation and varying access to contraceptive methods depending on region, race, ethnicity, and socio-economic status.²

Ideas about women's bodies also began to change. A growing culture of health and physical education pioneered by college women in the late nineteenth century spread to the population at large and offered a new view of women as naturally healthy rather than inherently diseased. As Nancy Theriot writes, "late-century women experienced the cared-for female body as naturally healthy, not feeble, and saw suffering as an aberration not as an inevitable consequence of being female."³ Emphasizing that motherhood was natural and healthy, one female physician wrote in the 1880s, "If woman was made for maternity, then it is evident that the proper exercise of this function should be attended by the highest health, enjoyment and happiness."⁴ Few Americans questioned the fact that women were biologically formed to be mothers, but they did begin to think about motherhood, particularly its physical aspects, in new ways. Women increasingly asserted control over their bodies and reproductive lives. As Nancy Theriot argues, women in the

² For birthrate statistics see John D'Emilio and Estelle B. Freedman, *Intimate Matters: A History of Sexuality in America*, 2nd ed. (Chicago: University of Chicago Press, 1997), 58. See also Judith Walzer Leavitt, *Brought to Bed: Childbearing in America, 1750-1950* (New York; Oxford: Oxford University Press, 1986), 19.

³ Nancy M. Theriot, *Mothers and Daughters in Nineteenth-Century America: The Biosocial Construction of Femininity* (Lexington: The University Press of Kentucky, 1996), 81-82.

⁴ Mrs. P.B. Saur, M.D., *Maternity: A Book for Every Wife and Mother* (1888) (Chicago: L.P. Miller & Co., 1891), 195.

late nineteenth century revised conceptions of femininity from the focus on female suffering that had defined previous generations to a focus on female self-control. As one woman asserted in the 1870s, “Strange that, while the law recognizes rape as a crime punishable by severe penalties, there is no recognition whatever of a married woman’s right to control over her own person.”⁵ Supported by the moral arguments of feminist advocates of “voluntary motherhood,” women increasingly asserted the right to make their own decisions about if and when to bear children.⁶ Claims to women’s right to refuse intercourse, combined with greater awareness and wider availability of contraceptives, made such control increasingly possible.⁷

Women writers, reformers, and medical practitioners were at the forefront of many of the changes that occurred in ideas about reproduction and women’s bodies, but the writings of mothers show that in the privacy of their own lives and homes women were also beginning to think about and describe childbearing in different ways. For over a century women had made the physical aspects of childbearing central to their understanding of motherhood, and this remained true. But whereas previous generations of mothers had written tersely of the suffering they anticipated and endured, indicating a quiet acceptance of circumstances they could not change, by the second half of the nineteenth century women wrote more explicitly and more evocatively of their physical experiences. As one mother wrote of her birth experience in 1885, “Between oceans of

⁵ Mrs. E.B. Duffey, *What Women Should Know; A Woman’s Book About Women* (Philadelphia: J.M. Stoddart & Co., 1873), in *Sex, Marriage and Society*, Charles Rosenberg and Carroll Smith-Rosenberg, eds. (New York: Arno Press, 1974), 117.

⁶ For more on the philosophy of voluntary motherhood, see Linda Gordon, *Woman’s Body, Woman’s Right: Birth Control in America* (New York: Penguin Books, 1990).

⁷ For more on contraceptive technology and availability see D’Emilio and Freedman, *Intimate Matters*, esp. part 2.

pain there stretched continents of fear; fear of death and dread of suffering beyond bearing.”⁸ Many women saw suffering as an automatic part of the reproductive process.

In 1866 the wife of a physician wrote to the *Boston Medical and Surgical Journal* on behalf of childbearing women:

One great reason for the aversion to child-bearing is the thousand disagreeable and painful experiences which attend the long months of patient waiting, and the certain agony at the end—agony which is akin to nothing else on earth—agony which the tenderest susceptibilities and sympathies of the noblest physician can but faintly imagine—agony which, in not one case in a hundred, is mitigated by anesthesia.⁹

Relentlessly emphasizing the pain and suffering of childbearing, this woman boldly articulated the physical trauma that women faced, but suggested that it did not have to be inevitable if the medical profession would step in to do its part. Why did women begin to write more explicitly of pain at a time when the possibility of painless childbirth was increasingly realized? It seems likely that frequent medical discussions of the necessity of suffering in childbirth and the possibility of painless deliveries created a culture in which pain could be discussed more openly than before. Moreover, I would suggest that the very possibility of painless childbirth—the knowledge that suffering was perhaps not inevitable or necessary—freed women to articulate more fully the aspects of childbearing that they most dreaded. Pain and suffering were no longer left veiled and unspoken, but could be discussed, described, and dealt with.

Similarly, it seems that the possibility of better fertility control may have enabled women to speak more directly of their desire not to become mothers or to bear more children. Indeed, in women’s private writings the ambivalence that characterized

⁸ Quoted in Leavitt, *Brought to Bed*, 33.

⁹ Quoted in Richard W. Wertz and Dorothy C. Wertz, *Lying-In: A History of Childbirth in America* (New Haven: Yale University Press, 1989), 118.

previous generations of mothers transitioned in the second half of the nineteenth century into a more outspoken rejection of motherhood when it was undesired. One reluctant mother in Texas wrote bitterly to her husband, “I am so sick of trying to do a man’s business when I am nothing but a poor contemptible piece of multiplying human flesh tied to the house by a crying young one . . . God knows I wish I had been placed in my grave before I ever brought one of my sex in this world.”¹⁰ Her frustration was perhaps heightened by the stresses of the Civil War, but she repeatedly expressed the feeling that her happiness was thwarted by her body and discussed openly with her husband the possibility of preventing pregnancy by various methods. She was more overtly resistant to motherhood than most women writing in the latter half of the nineteenth century, but her words reveal that after mid-century women felt increasingly able to express their greatest fears and desires with respect to childbearing and increasingly empowered to assert control over their fertility.

The words and experiences of such women illustrate that since the late nineteenth century women have increasingly challenged the assumption that “biology is destiny.” In the late nineteenth century women began to question whether motherhood was a necessary fate; today, many women choose not to bear children and find inspiration and fulfillment in aspects of life that were formerly reserved for men. Yet the figure of the mother continues to be a potent symbol in American culture. Conflicts about the appropriate qualities, use, and visibility of the maternal body have demonstrated time and again that diverse perceptions of the maternal body continue to shape our understanding of women’s roles in society. Indeed, we are haunted in America today by the same vision

¹⁰ Lizzie Neblett to Will Neblett, August 25, 1863, *A Rebel Wife in Texas: The Diary and Letters of Elizabeth Scott Neblett 1852-1864*, Erika L. Murr, ed. (Baton Rouge: Louisiana State University Press, 2001), 150-151.

of the maternal body as simultaneously virtuous and disruptive that characterized eighteenth- and nineteenth-century American culture and society. On the one hand, the figure of the mother represents everything that is wholesome; bright images of young affectionate mothers fill magazines, advertisements, films, and television and signal to the viewer that all is well with the world. But when the maternal body is too visible or contradicts assumptions about maternal virtue or is not quite the right kind of body, it signifies a disruption of social order, a source of shame and fear. Just as in the past, women today are continually beset with images and admonitions of how they should look, feel, and act as mothers. Nineteenth-century sentimental culture took the ideal of the spiritual mother to improbable extremes; today's maternal ideal has changed considerably but is no less impossible for real women to attain.

Periodic controversies over breastfeeding illustrate one aspect of the maternal body that has constantly raised tensions in twentieth- and twenty-first-century America. A 2009 article on the *New York Times* website, for instance, reported on Facebook's controversial decision to remove photos of breastfeeding mothers in accordance with their policy forbidding members to post obscene or sexually explicit material. As the article noted, "Facebook has said that it has no problem with breastfeeding, but that photos showing nipples are deemed to be a violation and can be removed."¹¹ As Cindy Stearns asserts, in American society "the prominence of the sexualized breast poses a problem for breastfeeding women and their maternal bodies," for motherhood is seen as a role that is incompatible with sexuality.¹² If the breast is seen as predominantly sexual,

¹¹ Jenna Wortham, "Facebook Won't Budge on Breastfeeding Photos," *New York Times* (January 2, 2009). <http://bits.blogs.nytimes.com/2009/01/02/breastfeeding-facebook-photos/#>. March 22, 2012.

how can mothers make use of it for purposes of nourishment without being exposed to accusations of indecency? The medical profession recommends breastfeeding as the healthiest choice for both mothers and babies, and forty-five states have laws that allow women to breastfeed in any public or private location, yet mothers are often made to feel uncomfortable or unwelcome when they breastfeed in public spaces.¹³ In Stearns's sociological study of breastfeeding mothers in 1999, she discovered that "Women were keenly aware that the activity of breastfeeding in public might result in negative feedback, or worse yet, legal action."¹⁴ Responses to the Facebook incident indicate that few Americans have a problem with the idea of breastfeeding, but they do not want to see it. As one commenter responded online, "I classify breastfeeding as a personal and PRIVATE matter and do not wish to be exposed to such material."¹⁵ In our society the act of breastfeeding signifies good mothering, just as it did in the past; but we no longer embrace the varied pleasures linked to the act of nursing, fearing the confusion of sexuality and parenting. The visibility of the nursing woman's body is problematic; the breast allegedly creates dangerous confusion between maternity and sexuality. Somehow, women are expected to be good mothers while simultaneously keeping the physical aspects of motherhood invisible.

¹² Cindy Stearns, "Breastfeeding and the Good Maternal Body," *Gender and Society* 13, no. 3 (June 1999): 309.

¹³ "Breastfeeding Laws," National Conference of State Legislatures. <http://www.ncsl.org/issues-research/health/breastfeeding-state-laws.aspx>. 22 March, 2012.

¹⁴ Stearns, "Breastfeeding," 311.

¹⁵ Marty, online comment, January 2, 2009, responding to Jenna Wortham, "Facebook Won't Budge on Breastfeeding Photos," *New York Times* (January 2, 2009). <http://bits.blogs.nytimes.com/2009/01/02/breastfeeding-facebook-photos/#>. March 22, 2012.

As pernicious as attitudes toward breastfeeding have become, even more distressing are present-day assumptions about what kinds of bodies are suitable for motherhood. We have seen how the prejudices of eighteenth- and nineteenth-century Americans led them to view women of color and lower class women as useful bodies at best, disruptive bodies at worst; in either case, such women were rarely valued for their social role as mothers. In America today there is an ongoing perception that poor women and women of color are less valuable as mothers and should be subject to reproductive control. African American women in particular have been devalued as mothers and perceived as hyper-sexual, too fertile, and in need of government regulation. Dorothy Roberts has explored the history of efforts to control black women's reproduction, from exploitative pro-natalist practices during slavery, to eugenic sterilization measures in the first half of the twentieth century, to more recent government programs that paid for poor women to receive Norplant, a contraceptive implanted under the skin that was shown to have severe side-effects, but refused to pay for its removal before the five-year expiration period.¹⁶ Such measures continue to make race and class define which women will be valued as mothers. As Roberts writes, "Because women have been defined in terms of motherhood, devaluing this aspect of woman's identity is especially devastating."¹⁷

In American society today there seem to be two conflicting strains of thought about the maternal body. First is the aforementioned assumption that the figure of the mother is virtuous and culturally palatable only when her physical functions are subordinated and veiled by her moral and emotional role. This perception predominates

¹⁶ Dorothy Roberts, *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty* (New York: Pantheon Books, 1997).

¹⁷ Roberts, *Killing the Black Body*, 10.

in mainstream American culture and has its roots in similar visions of motherhood in the late eighteenth and nineteenth centuries. The good mother is imagined primarily in terms of her affective, rather than physical, value. Today's ideal mother does not exactly resemble the spiritualized maternal figure that dominated nineteenth-century sentimental culture, but she does represent a continuing drive to refine the raw physicality of the body. She is healthy, youthful, enthusiastic, has many talents and interests, but ultimately derives her joy and sense of self-worth from the emotional bonds of motherhood. A recent article in an online parenting magazine addressing the concerns of new parents sums up the ideal mother by claiming that expectant fathers worry, "I'm afraid of what having a baby is going to do to our relationship," while ecstatic mothers-to-be think, "It's going to be the best thing in the world!"¹⁸ In many ways, expectations for mothers have changed little since the nineteenth century, for American society still expects women to be child-centered and to find their greatest emotional fulfillment as mothers.

While this more traditional vision of motherhood clearly privileges the affective elements of motherhood, feminist scholars and writers in the aftermath of second-wave feminism have rigorously contested this tendency to evade the fullness of maternal corporeality. Inspired by this feminist impulse, more women have begun explicitly to explore the physicality of experiences such as pregnancy, childbirth, and lactation, both in private and in public texts and images. The feminist poet Alicia Ostriker, for instance, points out the possibilities of pleasure while breastfeeding:

I don't believe I have ever seen a discussion of this experience; or indeed, any mention of the idea that we can be sexually aroused by being suckled . . . Why do we not say this? Why are mothers always represented sentimentally, as having some sort of altruistically self-sacrificing "maternal" feelings, as if they did not

¹⁸ "Modern Family," *Fit Pregnancy* (©2011 Weider Publications, LLC)
<http://www.fitpregnancy.com/motherhood/motherhood/modern-family>. 9 May, 2012.

enjoy themselves? Is it so horrible if we enjoy ourselves: another love that dare not tell its name?¹⁹

Asserting the validity of physical experience over and against sentimental constructions of motherhood, Ostriker's work dwells on exactly those aspects of maternity which tend to cause shame and discomfort. Similarly, the works of the poet Sharon Olds explore the very facets of childbearing that our society most seeks to avoid, describing "my belly big with cowardice and safely,/my stool black with iron pills,/my huge breasts oozing mucus,/my legs swelling, my hands swelling,/my face swelling and darkening." But from the grotesqueness of corporeality Olds moves to celebrate the maternal body, exalting, "I and the other women this exceptional/act with the exceptional heroic body,/this giving birth, this glistening verb."²⁰ In a more scholarly vein, Della Pollock's analysis of childbirth narratives offers a glimpse of the most intimate bodily experiences of childbearing. Pollock describes one mother's tortured memories of her body during pregnancy: "Furious with the instruments and procedures that had repeatedly, painfully penetrated her body to no avail, she also seemed now to want to claw open her belly herself, to break through the uterine wall, to see once and for all this baby and its fate, to *know* what to do."²¹ These feminist texts, among many others, assert the need to view the maternal body without shame and without artifice, proclaiming its centrality to women's experience and insisting on the validity of that experience.

This feminist approach to representations of childbearing represents a radical departure from a long history of efforts to valorize or suppress certain aspects of

¹⁹ Alicia Suskin Ostriker, *The Mother/Child Papers* (Boston: Beacon Press, 1980), 33.

²⁰ Sharon Olds, "The Language of the Brag," in *Satan Says* (University of Pittsburgh Press, 1980), 44-45.

²¹ Della Pollock, *Telling Bodies Performing Birth: Everyday Narratives of Childbirth* (New York: Columbia University Press, 1999), 29.

motherhood without regard for women's own attitudes and experiences. More mainstream visions of motherhood remain a conservative influence on women's lives. The history of the maternal body is one of continual negotiation between lived experience, on the one hand, and social and cultural expectations, on the other. At the center of these negotiations, we find generations of mothers who have borne children both willingly and unwillingly, who have been shaped by the prevailing norms of American society and simultaneously resisted their incursions. It is imperative that we bear in mind the continuities and changes in the history of motherhood that have influenced the experiences of these women. Many aspects of the past are present today, if in altered forms: the privileging of certain kinds of bodies and certain kinds of mothers, the constraint of women's choice and bodily autonomy, uneasiness in the face of female corporeality. The study of past generations should make us mindful of the problems we face today. Ideas about the maternal body continue to pose significant challenges to the autonomy and self-realization of women. These challenges appear so subtle at times as to seem innocuous, yet by tracing their outlines in the more pernicious biases of the past we create the possibility of awareness and change.

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