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Swaddling England: How Jane Sharp’s *Midwives Book* Shaped the Body of Early Modern Reproductive Tradition

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In 1658 the English physician, Percivall Willughby, crept upon his hands and knees into a birthing room and, unobserved by the patient, examined her, made an “erroneous diagnosis of vertex presentation,” and crept out.¹ Although the attending midwife allowed the doctor to creep in, she correctly insisted that the baby’s position was breech.² Dr. Willughby’s furtive entrance into this birth room, and the midwife’s authoritative presence, reflect deeply rooted traditions. Elaine Hobby explains that the birthing chamber was “traditionally a female space: present at birth with the mother would be her midwife and her invited female friends and relatives, her ‘gossips,’ but men were excluded.”³ Ironically, though birthing support during the seventeenth-century was almost entirely the domain of female practitioners, prior to 1671, medical men were the only authors of published midwifery manuals. These male authors were accepted public physician-scholars whose healing focused more upon conversation and speech to diagnose and treat patients than upon touch. In
contrast, birthing with a midwife was a feminized and social practice due to its emphasis on touch, the female body, and the presence of gossips.4

When in 1671 Jane Sharp, the self-proclaimed “Practitioner in the Art of MIDWIFRY above thirty Years,” published The Midwives Book or the Whole Art of Midwifry she ended the gendered silence of women in overt medical text.5 Sharp’s medical manual was a confident trespass into the male world of academic medical tradition and writing and part of an innovative trend in late seventeenth century Europe that eroded boundaries between different types of practitioners.6 Indeed, her early modern male contemporaries were also crossing the lines between medical scholarship and midwifery. Nicolas Culpeper, Daniel Sennert, Thomas Bartholin, and Eucharius Roeslin were academy trained medical authorities who did not have experience seeing and touching the bodies of living women, yet they wrote popular midwifery manuals.7 Unlike these scholar-published midwifery texts that drew authority from an ancient body of midwifery scholarship, Sharp’s work asserts that she is an expert in the physical bodies of actual birthing women. While the historical details of Jane Sharp’s identity, including proof of her gender, remain contested, the construction of Jane Sharp who addresses the reader in the pages of the book is most certainly female.8 Not only does Sharp overtly address her book to her midwife “sisters” as an “affectionate friend,” her text also takes many opportunities to address and contend with broader audiences including young couples, medical men, and anyone who cares for women or young children. Ultimately, Sharp confidently asserts the gendered right of female midwives’ to the birth room and additionally seizes and twists the scholarship and cultural heritage of midwifery to fit her purposes.

I suggest that a metaphorical reading of one of Jane Sharp’s passages furthers the conversation about her expansive significance in England’s midwifery marketplace and
tradition. Book IV Chapter IV of The Midwives Book is titled: Of the Child and explains how to receive a new child into the world, how to examine its health and limbs, and then how to swaddle and care for it. Sharp advises a midwife to:

Take notice of all the parts of [the child], and see all be right; and the Midwife must handle it very tenderly and wash the body with warm wine, then when it is dry roul (sic) it up with soft cloths, and lay it into the Cradle: but in the swaddling of it be sure that all parts be bound up in their due place and order gently, without any crookedness, or rugged folding; for infants are tender twigs, and as you use them, so they will grow straight or crooked.  

This passage presents early modern assumptions about the malleability of infant’s limbs and health and further asserts the authoritative shaping influence of the female midwife. Here we see the power of female touch to strengthen or impair a helpless body. I assert that Sharp’s swaddling passage offers a metaphorical framework to better understand the importance of what Caroline Bicks calls Sharp’s “repudiation of the ancients” and her “reordering of the gendered hierarchy … that underpinned many ancient and early modern anatomical theories.” This metaphor has four elements. First, a child’s malleable limbs represent various components of seventeenth century birthing tradition and custom. Next, Jane Sharp is the attending midwife. Her book is the swaddling, and, finally, the act of swaddling represents how Sharp’s text rhetorically molds and shapes midwifery. Jane Sharp’s The Midwives Book offers her sisters, medical men, young maids and their beaus, and England at large a powerful feminized vision of midwifery tradition. Jane Sharp both attended the birth of English midwifery and shaped its form through her swaddling text.
By turning to the figurative and rhetorical components of medical language, scholars can better understand and “articulate the connection between bodies and ideology.” For instance, Hobby explains that Sharp understood how her male contemporaries often used metaphors “not only to explain function... but to constrain the body within the overarching organization of patriarchal authority” and was able to shape those same metaphors to bring to light ironies and prejudice. Caroline Bicks also explores these connections in “Stones Like Women’s Paps: Revising Gender in Jane Sharp’s Midwives Book.” Bicks points out how Sharp creates a simile comparing men’s stones (testicles) to the kernels of women’s paps (breasts) and thereby reorders the gendered hierarchy of Galen’s “ubiquitous description of women’s reproductive organs as inverted versions of men’s.” Bicks further asserts that this was part of a “larger intervention into the rhetorical constructions of gender and patriarchy in the early modern period.” Other examples of Sharp reshaping the metaphorical landscape of medicine to flatter her womanly position include changing Bartholin’s vagina metaphor away from the gaping “mouth of a tench” fish and instead making the vagina the “head of a tench, or of a young Kitten.” This rhetorical shift “replaces this foul and confining mouth (shadow of the devouring vagina dentate) with an especially disarming image of a kitten. The female anatomy is no longer imagined in relation to the male’s anatomy or to man’s original state of entrapment, but rather in relation to the new life it brings forth.” The language of bodies and birthing is a powerful tool for significantly shaping or reshaping midwifery conceptions.

Jane Sharp’s unique new body of midwifery tradition contains male parts, but its limbs are gently shaped and formed by the midwife’s swaddling. Following Sharp’s advice to “Take notice of all the parts of [the child], and see all be right,” I posit a metaphorical body with four major limbs and a head. The four main limbs that Sharp shapes in her text are Hebraic-
Christian midwifery traditions, the established textual history of medicine, Englishness and otherness, and nature. The unbound head of the child represents empiricism, which of course includes rationality, touch, and the “ocular impulse.” My analysis substantially arises from Elaine Hobby’s edition of The Midwives Book wherein Sharp’s conservative swaddling offers gentle feminized shaping of these limbs.

The Limb of Hebraic-Christian Tradition

Sharp significantly reinterprets biblical narrative in favor of women and also destigmatizes sex and desire. When Jane Sharp addresses “the midwives of England” in the beginning of her text, she claims ancient privilege by “humbly begging the assistance of Almighty God to aid [midwives] in [their] Great Work.” Soon after, Sharp reminds her readers of the “midwives of Israel, who were so faithful to their trust that the Command of a King could not make them depart from it.” Sharp asserts a gendered advantage for herself and her midwife sisters whose honor in their vocation is granted by God and untouched by kings.

Indeed, from a gendered perspective, Hebraic-Christian tradition leaves women space for agitation and action. Most significantly, the Christian Bible simultaneously equates Eve - and, by extension, all women - with the taint of The Fall, and also elevates them as independent thinkers who act beyond their proscribed patriarchal boundaries. The three main examples of biblical women who act independently of patriarchal order include Eve in the Garden of Eden, the midwives of Israel as recorded in Exodus, and Mary, the mother of Jesus whose virgin conception defied both cultural and physical laws. Mary Fissell claims that although early modern women rarely wrote about their bodies as such, “religious belief drew them to their writing desks, shaped their prose and probably structured even their experiences
of their own bodies.” She further asserts that scholars need to “recover the ways in which the Bible and devotional literature formed a lens through which women saw health and illness.”

I assert that whereas male writers in Protestant England traditionally used the Bible to denigrate and subjugate women, Jane Sharp peered through a Biblical lens to see not only the divine right of women to be midwives and healers, but also to see how women can step beyond patriarchal boundaries and act according to their own logic and experience that is independent from men.

The scriptural references in Sharp’s manual are almost entirely drawn from the Old Testament and are presented as infallible authority. Interestingly, Sharp refrains from any mention of Mary’s immaculate conception, or Elisabeth’s remarkable quickening. She also fails to mention the woman who approached Jesus and was healed from an issue of blood. In fact, Sharp refers to scripture fewer than twenty times in her manual. It is possible that as she read and studied the medical manuals for her book, she added religious references that she was most familiar with in order to leave God as the final word in a few unresolved matters. Although we cannot know Sharp’s exact religious views, her silence regarding Mary and her insistence on personal interpretation of the Old Testament suggest that she was a Protestant. In any case, The Midwives Book reflects Protestant English medical tradition that assumes that God is the creator of man, that the Bible is to be taken literally, that medicine and religion can illuminate each other, and that miracles and monsters are historical fact. Furthermore, her proclamation that “God and nature hate idleness” places religion and the body in harmony and in line with the Protestant work ethic.

Sharp gently shaped religious stories with a female hand by altering the traditional definition of Adam and Eve’s punishment, by rewriting the morals of sexual cravings, by
asserting the Protestant value of moderation, and by using God to justify incidents of miracles and monsters. By using God’s words to contradict the writings of medical experts, Sharp mirrors the midwives of Israel who listened to God above kings and were blessed for their efforts. For example, although Hippocrates forbad women to copulate after conception, Sharp claims “I may not wrong the man so much” because “these are the fruits of original sin, for which we ought to humble ourselves in the presence of God.”

Sharp explains that man should not be asked to abjure from sex with his wife for too long because: “Adams first sin lyeth heavy upon his posterity…and for this the curse of God follows them, and inordinate lust is a great part of this curse.”

Regarding Eve, Sharp reforms popular opinion that conception is Eve’s punishment for tasting the forbidden fruit. Sharp claims that to the contrary: “It is not the conception, but the sorrow to bring forth that was laid as a curse. We see that there is in women so great a longing to conceive with child, that oft times for want of it the womb falls into convulsions and distracts the whole body.”

Sharp’s confident reshaping of gendered religious assumptions provides her readers with plausible alternatives to misogynistic conceptions of Eve.

Lust – whether for copulation or for a child – is the curse of Adam, but it should rightly be released in order to maintain health and balance. Men should be true to their wives “because polygamy is forbidden by the laws of God,” and wives often lust after their husbands more during pregnancy because “it was needful for man.”

God gave mankind marriage in order to satisfy sexual lust. This is not to say that God approves all marital sex. Sharp maintains that lust must be controlled during menstruation in order to avoid monstrous consequences. She states: “It is forbidden severely by the Law of God; and Physicians know, that those children that are begotten during the time of separation will be
Leprous, and troubled with an incurable Itch and Scabs as long as they live.”

She pleads with readers to avoid “the mischiefs of intemperance” and “find the blessings of God upon them as a great reward of this virtue of moderation.”

She further calls upon physicians as witnesses to God’s law, thus placing them in a position of subjugation.

For those couples who are unable to conceive, Sharp offers a two-fold cure: follow best medical practice and pray. God, who is beyond medicine, reserves for “himself a prerogative of furthering and hindering conception where he pleaseth, that men and women may more earnestly pray.”

Sharp refers to Psalms then suggests that women follow Biblical examples and pray for the miracle of birth: “love thy children, and the fruit of the womb are an heritage and gift that cometh from the Lord. So Hannah pray’d in the first of Samuel, and gave thanks when God had heard her prayer.” If these prayers do not work, there may be a medical reason for the barrenness. Sharp explains that some couples cannot have children because they are too similar in complexion, they do not love each other enough (no orgasm?), or the woman’s blood has been weakened through improper blood letting. The problem may also be a lack of moderation, women must be careful that they are “not neglecting such natural means, to further conception and to remove impediments that God hath appointed… the good order of the body consists in seasonable moderate eating and drinking of wholesome meats and drinks, moderate exercise…” In response to Galen’s wondering about the opening of the womb, Sharp invites her readers to join the doctor in reverence for God’s creation: “so should we all [wonder], to consider how fearfully and wonderfully God hath made us as the Psalmist saith: The Works of the Lord are wonderful, to be sought out of all those that take pleasure therein.” Here, Sharp seems to be welcoming women and men alike to enjoy the pleasure of their bodies as a way to glorify God — a very Protestant idea.
Sharp’s text illustrates the peaceful coexistence of the miraculous, the magical, and the medical in early modern England. However, *The Midwives Book* assumes the ascendancy of God’s will over medicine and over the medical man. Surprisingly, the only story that Sharp draws from the New Testament – and her only reference to Jesus Christ – is the story of when a blind man is brought to Christ, and the disciples “asked him, who sinned the parent or the child, that he was born blind? Our Saviour replied, neither he nor his Parents, but that the Judgments of God might be made manifest in him” then went about healing the stranger.\(^{34}\) Sharp’s concludes that God also is responsible for the “errors of nature” and “the material or efficient cause of procreation.”\(^{35}\) Sharp clearly agrees with David’s Psalm 139, which she quotes:

> I will give thanks unto thee for I am fearfully and wonderfully made: marvelous are thy works, and that my soul knoweth right well; my bones are not hid from thee, though I be made secretly and fashioned beneath in the earth; thine eyes did see my substance, yet being unperfect, and in thy Book were all my members written, which day by day were fashioned, whereas yet there was none of them.\(^{36}\)

God fashioned the parts (members) of David’s body in word (Book) then in substance, giving the prophet reason to rejoice. Clearly, Sharp is moving beyond a shameful religious conception of God’s creation of the body.

### The Limb of Textual Medical History

Sharp authorized her entry into the masculine medical text tradition through her personal experience as a woman and midwife. Although she challenged the gendered aspects of that tradition, she also established herself as part of it for the reciprocal authorization she gained. Early modern English norms of modesty and the vulgarity of touching had
entrenched birthing as a feminized social practice that was deeply prejudiced against male midwives. However, while women were the keepers of the birth chamber, men inherited the classical Greek medical texts and traditions of Hippocrates, Aristotle, and Galen and were keepers of academic knowledge and scientific medical practice. Because only men could attend universities and because a university education was required to obtain a physician’s degree, women were often unable to access scholarly texts and were barred from elite medical positions. Beneath the physician were two other official ranks in medicine: the guild-certified surgeons who performed “sutures, amputations, lithotomies, and bone settings” and apothecaries who “prepared drugs prescribed by physicians.” However, although women were formally excluded from these ranks, they attended the vast majority of births and home-healings. Recent scholars recognize women’s powerful presence as healers. However, women usually passed their knowledge of healing, bodies, and medicinal remedies through informal channels such as manuscript receipt books, letters, and through oral communications. *The Midwives Book or the Whole Art of Midwifry* combined the power of a midwives lived and practiced experience in the birth room with the traditional scholarly texts that were hitherto only available to University trained medical men.

Jane Sharp significantly feminized medical tradition by translating medical texts into common language and publishing in the vernacular. Women are the only ones who birth babies, but until this manual, men were usually the only ones who could access and read medical texts. Jane Sharp took both roles. She devoured not only her contemporaries’ medical writings but also claimed to “have been at Great Cost in translations for all Books, either French, Dutch, or Italian of this kind. All which [she] offers with [her] own experience.” Although Sharp makes heavy use of early modern midwifery manuals in her writings, she
does not specifically cite these sources, choosing instead to draw her authority straight from their references to both ancient sources - Aristotle, Hippocrates, Galen, - and more recent medical sources – Colombo, Vesalius, and others who are quoted in early modern texts. Fortunately, Elaine Hobby has carefully annotated Sharp’s text, providing references to Sennert, Culpeper, Crooke, Molins, and others. Unlike all of these other manuals, *The Midwives Book* is written in the vernacular and is careful to avoid “hard words” which “are but the shell” of knowledge.\(^4\) Sharp’s “knowledge” often feels like long tedious sections taken directly from original Galenic writings. However, her reliance upon humoral theory does not prevent Sharp from adding gentle overtones as she reshapes some classical medical positions on women’s bodies and birthing. In addition to the medical inversions discussed by Bicks, Sharp manipulates male medical tradition by asserting her experience as a woman and as a midwife to authoritatively correct the record.

Sharp uses her logical observations of the body to challenge traditional medical writings. For instance, she reasons, “if the most noble parts were first framed, as the Peripateticks suppose, then the brain and heart should be first made, which is not agreeing to reason and observation… I confess all these things have been questioned by some, but I love not impertinent disputes.”\(^4\) Sharp would have been familiar with underdeveloped fetuses at their different stages and can speak with greater authority than philosophers. Regarding the woman’s seed, she challenges Galen, Columbo, and Vesalius asserting that “but few or none know the truth” then shares her own experience seeing the stones of a woman which were “white, thick and well concocted, for I have seen one, and but one and that is more by one than many men have seen.”\(^4\) Sharp also draws upon her experience to “answer all” regarding the nourishment of the child within the womb. First she mentions the peripatetics’
(Aristotelian) belief that menstrual blood feeds a fetus; then she lays out the assumptions of “Fernelius, Pliny, Columells, and Columbus,” who believe that menstrual blood would poison a child; finally, she uses her own logic to settle the dispute. Her answer is clear: “But to answer all… Hippocrates was mistaken… if the child be not fed with this blood what becomes of this blood when women are with child?” Caroline Bicks points out that “by recycling other men’s theories, Sharp is consciously taking her place in an established textual history of medicine.” However, it is clear that in addition to taking her place in established medical traditions, Sharp is also reshaping those traditions with the experienced female hands of a confident and educated female midwife. Of course, we now know that Sharp was often medically inaccurate, but her bold stances would have been the final, and often only, word for most of her close readers.

Sharp’s shaping and misshaping of English reproductive tradition has reverberated throughout medical, social, and historical scholarship. Modern scholarship has recently moved beyond purely essentialist views of early modern midwifery and gender but even careful scholars recognize that although the entire practice of midwifery cannot be reduced to a battle of the sexes, Jane Sharp’s treatise does specifically rally opposition to men in the birthing room. Sharp explains how women should use the instruments of medicine instead of relying upon men. She explains how it is “the natural propriety of women to be much seeing” into midwifery. And, she uses frequent rhetorical moves that powerfully invert patriarchy. Eve Keller calls men’s entrance into routine midwifery “a didactic affair” because before the 1960’s medical men are portrayed as educated and compassionately triumphing over ignorant midwives. However, after the 1960s women began writing about the topic and claiming that men had forcibly ejected “capable women from the only profession in which
they had historically held a monopoly. The terms “medical glory” or “gory misogyny” were coined by Lisa Cody to encapsulate popular essentialist readings of the male/female midwifery polemic. Although Adrian Wilson believes that British women eventually adopted male practitioners because of the tools and science of the new medicine, he also claims that up to 98 percent of midwife-assisted deliveries were healthy. Jane Sharp was responding to the threat that medical men imposed upon midwifery and the threat of male midwives replacing traditional female midwives. Keller explains that her “response to this threat is therefore twofold: she is interested in asserting the privileged authority of women as women in the birthing room… and [asserting] the right of midwives to perform the obstetrical functions of surgeons, thereby endeavoring to expand the boundaries of her field from within.” Sharp and, by extension, other skilled and literate midwives now had both the authority of experience and the confidence of knowing significant medical knowledge from University sanctioned sources.

The Limb of Englishness and Otherness

Over a dozen far-fetched stories from far-flung exotic locations pepper Sharp’s manual and reflect the growing sense in early modern England that English identity is by comparison ideally plain, Protestant, and practical. An emergent contrast between Englishness and otherness was accelerated during the early modern period due to advancements in technology, and the increasing globalization of the marketplace. Hilary Larkin explores how the early modern English were leery of the encroachment of foreign excessiveness and contamination. Indeed, one of the most important facets of Englishness is what they are not. Sharp's midwives’ manual deals with anxieties about English identity by unfavorably portraying outsiders’ physical and behavioral differences and implying the normalcy of English women.
In keeping with her roles of midwife and medical author, Sharp consistently shapes otherness in sexual terms. For Sharp otherness includes places, religions, sexual characteristics and behaviors, and monstrosities; all of which are represented as frightening, inferior, or strange by comparison. Sharp’s readers must infer that the examples she cites from distant lands are often not Christian: Hebrews, Egyptians, Africans, Indians, Arabians, and Chinese; or not Protestant: French, Italians, and Dutch (before the Protestant Reformation). The only specific reference to religious outsiders found in the *The Midwives Book* is to “Jews.” Sharp shows distaste for the Jewish practice of circumcision by mentioning that it is now forbidden by the apostle and that she hopes “no man will be so void of reason and religion, as to be circumcised.” Her distaste for the sexual parts of foreigners extends more often to female genitalia. The Egyptians have “wings” (labia) that “grow so long that the Chirugion cuts them off to avoid trouble and shame” and in the Indies and Egypt “some lewd women have endeavoured to use [their clitorises] as men use theirs.” The behavior of French and Italian women is also appalling because they are not careful to keep their hymen intact. Finally, when it comes to birth, the English have the advantage of simple normalcy in contrast to their foreign counterparts. In Egypt, “the place is so fruitful they have sometimes five or six at a birth,” but it could be much worse. In Lombardy, Italy, “worms, toades, mice, serpents,” and “soote kints” often emerge from a pregnant womb. By comparison, Sharp’s only mentions one monstrous birth happening in England. Amazingly, she calmly explains that she witnessed two serpents crawl from a woman’s womb and into town. While many of Sharp’s stories of otherness are taken from popular medical manuals that were written by men, it is worth noting that she has far more hands-on experience with female bodies and genitalia than medical doctors of her day so can more convincingly shows her readers that
English female bodies are by comparison tame and godly.

To Sharp and her contemporaries, even imagining otherness could be dangerous to the formation of the English body. Sharp tells many stories in which a birth mother’s imagination literally forms her child in unpleasant ways. Of course, each story takes place in a far off, exotic realm and is told as a cautionary tale. Sharp warns that the power of the female imagination is responsible for altering her fetus: “There are many examples where children have been like to those who have had no part in the work; but a strong fansie of the mother hath been the reason of it.” The following passage from *The Midwives Book* illustrates a few cautionary examples of women whose imagination formed unwanted physical traits in their children as well as Sharp’s theorizing on why this is possible:

Imagination can do much, as a woman that lookt on a Blackmore brought forth a child like to a Blackmore: and one I knew, that seeing a boy with two thumbs on one hand, brought forth such another; but ordinarily the spirits and humours are disturbed by the passions of the mind, and so the forming faculty is hindered and overcome with too great plenty of humours that flow to the matrix, or the spirits are called off and gone another way...But the imagination is so strong in some persons with child, that they produce such real effects that can proceed from nothing else; as that woman who brought forth a child all hairy like a camel, because she usually said prayers kneeling before the image of St. John Baptist who was clothed with camels hair. How the imagination can work such wonders is hard to say, but there must be some strength of mind that can convey the species from the external sense to the formative faculty. The dark-skinned child and the camel-like child are evidence of the dangerous physical power of imagining otherness.
Sharp uses both Biblical and medical examples to support this rather mystical idea. In the Bible God knowingly used the power of imagination to change the offspring of Jacob’s sheep. In the story of Jacob’s ewes, the pregnant sheep were exposed to peeled sticks in the river, resulting in spotted offspring. Galen offers a medical application of this principle by teaching an Ethiopian to have a white child by setting before his wife a picture of a white man. (One must wonder if Galen himself was the man who was set before this woman – and the father of her offspring.) Finally, Sharp warns her English audience to be wary of imagining too much. After all, “Arabians ascribe so much power to imagination, that it can change the very works of nature…and they impute as much more to that, than Divines do to having Faith, to which nothing is impossible: but I cannot be altogether of their opinion.”

By reminding English women that their imaginations can alter the physical bodies of English children, Sharp is both warning of otherness and emphasizing the power of the female imagination to shape and change beyond the reach of male seed and patriarchal bounds: “Sometimes the mother is frightened or conceives wonders, or longs strangely for things not to be had, and the child is marked accordingly by it.” Sharp has shaped English identities of Otherness and cautioned her readers about the dangers of stepping beyond their Englishness.

The Limb of Nature

Renaissance notions of nature involve complex interactions between the fertile physical world, human biological decision-making, and metaphorical comparisons between the human and non-human spheres. Jane Sharp uses these notions of nature to re-frame women’s biological and metaphorical relationships to the world and to challenge the marginalization of women’s bodies by traditional male dominated traditions.

Whereas classical medical and Christian traditions use metaphor and biological roles to
characterize woman as an inferior and imperfect version of the man, Sharp boldly asserts that women have no need for biological shame or embarrassment. While acknowledging man’s active role in metaphorically planting their seed in the field of a woman’s body, she does not follow tradition in insisting upon the passive nature of women’s reproductive roles. Rather while “man in the act of procreation is the agent and tiller and sower of the Ground, Woman is the Patient or Ground to be tilled, who *brings Seed also as well as the man to sow the ground with*” (emphasis mine). She also counters the emotional embarrassment or anger that is an extension of biological helplessness stating, “we women have no more cause to be angry, or be ashamed of what Nature hathe given us than the men have, we cannot be without ours no more than they can want theirs.” Furthermore, Sharp calls the womb “lovely and a source of soul life nurture.” By aligning woman so closely with nature, Sharp degrades the male physician’s primacy in the birthing room: “A physician is but a helper to nature, and if he observe not natures rules he will sooner kill than cure.” Instead of referring to the womb as a dark, monstrous, uncontrollable, place of leaky humors, Sharp reminds her readers that midwives (female) have the power to rename generative parts, calling the cervix “the rose, the garland, or the crown.” Actively renaming the vagina with pleasant natural metaphors is a significant step towards banishing early modern vagina shame.

However, renaming the matrix is only a start. Far from passive, Jane Sharp’s version of the female matrix is remarkably active and can be controlled in many ways by the woman. In addition to using the power of imagination to shape the unborn, Sharp also explores the relationship between physical health and reproductive success. Passages in *The Midwives Book* suggest that Sharp has a preference for the country lifestyle and a distaste for the urban landscape of London. Her preferences match scholarly assumptions that Sharp was from
Shropshire and travelled to London infrequently for publications and other business matters. She makes it clear that the country life encourages the moderate exercise, diet, and labor that she suggests for a healthy pregnancy: “good diety moderately taken, and convenient labour and exercise of body...[and] temperance in eating and drinking will make both Parents and Children to be long lived, and there is as much difference between good and bad nourishment” as between ditch water and pure water. 69 Sharp also envisions the power of the womb to communicate immediately with the senses and refers to a pregnant woman’s desire for sweet smells and harsh aversion to bitter aromas.

Here Sharp combines her womanly knowledge of receipts and ingredients to illustrate how women can actively manipulate external natural forces to affect internal biological responses. The home remedies that Sharp includes in her manual give shaping, healing, and abortive powers to everyday female readers. Further analysis of her healing receipts and remedies and their comparison to the medical man’s is warranted. It is clear, however, that as recipe practitioners, women are handmaidens to God and Nature and not merely flawed counterparts to men. Sharp revises popular notions of how God frames women and nature by using the female body as the standard of comparison in the following passage. Regarding reproductive organs, she writes that “the parts in men and women are different in number, and likeness, substance, and proportion; the cod of a man turned inside outward is like the womb, yet the difference is so great that they can never be the same.... God mad all things of nothing but man must have some matter to work upon or he can produce nothing” (emphasis mine). 70 Women may use therefore take notice of their own biological experience as a beginning comparison to understand men’s bodies and then God’s imperative of working together. “To perfect the whole work, all the parts are set in order and perfected, so that
Nature hath nothing to do but to hasten to delivery, that this work of hers may be brought forth into the world.” Jane Sharp has shaped and elevated women by reframing biological and metaphorical understandings of nature. Ultimately, this effort illuminates how women are comparable agents in God's natural order to function alongside of men. Her natural understanding powerfully challenges misogynistic traditions that marginalize women. Women are beautiful and active contributors to creation and generation.

The Unbound Head - Sight, Touch, and Experience

In the introduction to *The Midwives Book*, Sharp censures those birth practitioners who do not have theoretical experience as “blind,” and those without hands-on experience as “lame.” Caroline Bicks, Eve Keller, Elaine Hobby, Mary Fissell, and Doreen Evenden are among the scholars who agree that Sharp creatively employed metaphor and text to send implicit messages about the rights of women to manage the birth chamber. Sharp is clearly sending a message to those male practitioners who presume authority through academic knowledge alone and who have not seen or touched living women’s bodies. Whereas Culpeper boasted of having examined the deceased body of one dead woman, Sharp’s book draws upon her experience examining the living bodies of English women and the metaphorical living body of the intellectual, practical, and social art of midwifery. In her words:

> Knowledge must be twofold, *Speculative*; and *Practical*, she that wants the knowledge of Speculation, is like to one that is blind or wants her sight: she that wants the Practice, is like one that is lame and wants her legs, the lame may see but they cannot walk, the blind may walk but they cannot see. Such is the condition of those Midwives that are not well versed in both these.
Jane Sharp introduces her manual with this claim that knowledge must be both theoretical and empirical—formed by intellect and observation—and then proclaims her decades of physical experience handling women’s bodies. Of course, the male authors of midwifery texts were academy trained, not empirically trained. Whereas these writers relied heavily upon classical Greek academic texts, Sharp combines a Baconian method of scientific observation with classical traditions.

In addition to putting her theoretical knowledge into practice, Sharp used her literal sight to find the truth about midwifery and to shed a distinctly female light upon the subject of the woman’s dark matrix. Patricia Parker has established that the “ocular impulse of anatomy’ was an important trend in early modern England. Furthermore, the desire to see into darkness included a desire to see and examine the hidden truths of woman’s cultural and physical nature. I expand the discussion to Sharp’s habit of relying upon her womanly sight to claim authority over male tradition. For example, Sharp begins to establish authority by criticizing the Greeks because “all the knowledge of anatomy they learned, was by dissecting apes and such creatures that were the most like to mankind, but the inside of men or women they saw not, and so were ignorant of the difference between them” (emphasis mine). She further blames the Greeks for failing to perform “true anatomy that would have made known to them” the proper cause of disease and allowed them to save more lives. Even modern medical men and writers of midwifery manuals were blind to the truth of physical knowledge. Sharp points out a humorous example of Columbo quoting “Vesalius a great Anatomist,” who believed that there are neither veins nor nerves in a man’s yard. She confidently proclaims that this “is very false, for there are some veins and arteries to be seen” (emphasis mine). Regarding the womb, she rebuffs popular medical tradition that the womb has
multiple chambers, relying instead upon her own sight, saying, “but none that ever saw the womb can think so; for there is but one hollow place” (emphasis mine). Sharp’s confidence in her sight provides her authoritative privilege over the men whose outdated modes of learning failed to allow for direct observation and empirical conclusions.

Sharp’s thirty years peering into wombs gives her unique sight into reproductive facts. She optimistically points out although only God knows and sees all, man (and woman) can continue to learn and understand more through literally seeing. For example, regarding the position of babies in the womb, Sharp includes a charming illustration of twelve possible positions that a child might take prior to birth but admits that “no woman midwife, nor man whatsoever hath seen them all” (emphasis mine). As her illustration suggests, the act of looking can illuminate a practitioner or layperson and might also help them to solve problems including barrenness and ill health. This attitude reflects broader seventeenth century ideas about scientific discovery and the potential to know by examination that was evident in the academic works of Crooke and Bacon. Even everyday housewife’s manuscripts from this period include medical receipts that were either passed down from doctors or tried and tested by women healers. Sharp recounts a story of a man who was so frustrated by a broken watch that he threw it against the wall. Only when the parts were open, could he see the problem and easily remedy it, “wherefore a small matters sometimes will remove the impediment if we can but find what it is.” Jane Sharp uses her female eyes to understand female parts and to empower females to solve problems through empirical observation and confidence.

Conclusion

Unlike Dr. Willughby’s sheepish and uncomfortable entry into the feminized birthroom, Sharp entered the domain of male medicine boldly, and on her feet. Jane Sharp
confidently brought together the male domain of textual medical tradition with the female domain of midwifery to shape early modern English reproductive tradition during the seventeenth and eighteenth centuries. Her publication of *The Midwives Book* was the first medical text of its kind and one of only four medical works written by women during this time.\textsuperscript{83} As such, it “dramatically challenges generalizations once made about medical practice and female healers” and repositions midwives as an important part of the early modern medical hierarchy.\textsuperscript{84} Sharp altered early modern perceptions of the Hebraic Christian tradition, textual medical traditions, Englishness and Otherness, and Nature; further bringing to light the importance of scientific observation and experience.

Sharp’s chapters may proceed in the same pattern as other midwifery texts -- descriptions of male and female reproductive systems; explanations of conception; problems with conception; labor and delivery instructions; women’s postpartum health; and care of women and children -- but this structure belies the book’s expansive interpretations, its broad audience, and its unique impact on English midwifery. After Sharp swaddled the traditions of English midwifery, she passed the body of information along to succeeding generations. The three original printings of Sharp’s treatise and the four editions that were published in the 1720s after being severely edited by John Marshall, a London printer, suggest that her tract was highly successful and widely read by both male and female practitioners.\textsuperscript{85} Although the birthroom eventually became more medicalized and masculine, these doctors built upon the altered textual and cultural foundations that Sharp helped to build.

Sharp’s treatise was written during a time of significant historical tension between traditional birth methods and medicalized practices. During the seventeenth century, the male midwife took form as “physicians began to attend deliveries and surgeons began to attend
normal deliveries.” While this process broadened the arena for physicians and surgeons, it threatened midwives and their storied governance of birth chambers. Eve Keller notes that “the threat posed by the emergence of male midwifery was understood to be a threat to the preserve of midwifery as a distinct profession, at least as much as it was perceived to be an attack on the expertise of women as practitioners.” The rise of male midwifery corresponded with the decline of midwifery specialization and with blurring delineations between feminized midwifery and masculinized medical practice.

The same Dr. Willughby who crawled into the birth room on his hands and knees provides an intriguing counterargument to Jane Sharp’s insistence upon women in the birth room. Written in 1670 but not printed in full until 1863, Willughby’s 600-page manuscript titled Observations in Midwifery takes the condescending view that female midwives are both unskilled and dangerous in the birth room. Willughby “wanted to remedy the brutal methods often used by the midwives of the time, [and] goes into great and gory detail in many of his cases.” Although this text was not published until 1863, and then only 17 of the 100 copies sold, it provides a perfect foil to Jane Sharp’s treatise. Indeed, Willughby insists upon the right of properly trained men to replace female midwives in the birthroom. To him, surgically trained male midwives can calmly and rationally avoid the female temptation to “pull, stretch, or hale their bodies, or use any violence to enforce the womb.” Although his text was inexplicably withheld from publication until the nineteenth century, his views were well known and embraced by English medical historians and representative of British institutional attitudes into the twentieth century.

Despite the eventual medicalization of midwifery, The Midwives Book represents an important gendered attempt to reassert women’s right to the birth room, to knowledge, and
to practice. Sharp's text offered the first medical guide to a woman’s body that is written in vernacular language. As such, hers is the first manual of the woman’s body that was intended for audiences across broad socio-economic strata. Indeed, *The Midwives Book* can be compared to translations of the classical and religious texts into vernacular text and the burgeoning academic and religious literacy of the early modern period. Furthermore, unlike the Latin writings of academic medicine and religion, which were more accessible to university-trained consumers, Sharp’s book was the first easily assimilated household manual that entered homes and quietly challenged gender hegemony and assumptions about academic knowledge.

This book was almost certainly not only intended for midwives at all. Lisa Cody stated that “given its hundreds of pages on genital anatomy, conception, marriage, female diseases, folklore and various matters not immediately connected to the delivering of infants, the book seems designed as much for curious mothers and fathers as for midwives.”\(^92\) Indeed, Sharp’s audience was wide and diverse. Her subtle reference to “young men and maids [who] will have to much cause to blush sometimes” as they read the book together indicates that this book is no more intended only for female midwives’ technical education than it is intended only as a polemic against male midwives. Hobby states that *The Midwives Book* “was expected to be read to a much more general audience.”\(^93\) Hobby even suggests that perhaps the lack of extant copies may be because “the book was read to pieces.”\(^94\) Of course, medical men, midwives, and expectant mothers also purchased the text. Despite Willughby’s familiar image of incompetent midwives, “studies show that midwives were trained through apprenticeships for years to decades and were higher social and economic stratum than has generally been accepted.”\(^95\) In her efforts to describe seventeenth century midwifery in
London, Doreen Evenden reminds us that social historians often fail to consider the importance of medical consumers. In Sharp’s case, her consumers spanned across society and collectively embraced the idea that a woman author could and should be read and considered as an expert interpreter of tradition and medicine.

Notes

1 Peter M Dunn, "Dr. Percivall Willughby, Md- Pioneer Man Midwife of Derby," *Archives of Disease in Childhood* 76(1997). Edward Malins, "An Address of Midwifery and Midwives," *The British Medical Journal* 1, no. 2112 (1901). This text shows that: Dr. Willughby was by some accounts, the first male midwife in English history who worked full time as such. Other accounts claim that Peter Chamberlen the elder (1550-1631) was England’s first male midwife. Peter Chamberlen the younger was a physician and not a full time midwife. The third Peter Chamberlen attended the birth of Charles II in 1682.

2 Dunn, "Dr. Percivall Willughby, Md- Pioneer Man Midwife of Derby," in 1529 also says that the attending midwife was Dr. Willughby’s daughter who learned the art from her father.


6 Keller, "The Masculine Subject of Touch: Case Histories from the Birthing Room."

7 Mary Fissell, "The Midwives Book or the Whole Art of Midwifery Discovered by Jane Sharp; Elaine Hobby Review By: Mary Fissell," *NWSA Journal* 13, no. 1 (2001). Fissell explains that Hobby identified Sharp’s connections to Culpeper’s *Directory for Midwives* published in 1651, Sennert’s *Practical Physick* (1664) that was translated by Culpeper, and Bartholin’s *Anatomy* (1668) was that translated by Culpeper. Fissell points out that Hobby failed to mention Sharp’s reliance upon any of Eucharius Roeslin’s writing. Roselin’s manual *The Birth of Mankind* was the most re-printed manual of all with 13 editions from 1540 - 1654. (Fissell 200). Culpeper’s boast about seeing a woman: Culpeper, Nicholas. *A Directory for Midwives*. London, 1651, 55-56.
Despite the significance of *The Midwives Book* in seventeenth century birthing rooms, historians have as yet been unable to find any definite bibliographical information about Jane Sharp. She was likely from Shrewsbury, in the West Country, and clearly had access to expansive medical libraries. Sharp’s translation of elite and expensive texts and her likely journeys from Shrewsbury to the London publisher – a distance of over 150 miles - suggest confidence, patience, and mobility. Her writing was certainly “fully flavored with an individual personality” shown by her alterations of “gender politics implicit in the medical advice.” However, despite her confidence, knowledge, and claim of thirty years of experience, Sharp’s name is not found in any Church of England registration books or in witness signatures on any of the almost 500 extant London midwifery certificates surviving from 1661-1669. Sharp may have been Catholic but may have missed registration because of an ecclesiastical licensing suspension from 1642 – 1661 during the English civil war, or, her registration may be lost. Finally, although one may reasonably presume that Sharp was a woman, we can only surmise that she had born children and was married. It is also possible that the name, Jane Sharp, was merely a pseudonym. In any case, uncertainty about Sharp’s identity does not diminish the effect of her uniquely gendered text and its power to reach beyond the medical academies to women, midwives, and the general public.

Sharp, *The Midwives Book or the Whole Art of Midwifry Discovered*, 272.


Sawday as qtd. in Bicks, 3.

Bicks, "Stones Like Women's Paps: Revising Gender in Jane Sharp's *Midwives Book*, 3.

Ibid., 3.

Ibid., 5. Refers to Sharp, 33 and Bartholin, 71.

Ibid., 5.


Sharp, *The Midwives Book or the Whole Art of Midwifry Discovered*, 3.

Ibid., 11. Sharp is referencing Exodus I: 14-21.


I conjecture that a Catholic writer would have been more likely to see Mary and Elizabeth as crucial shapers of women’s worth in the eyes of God.

Sharp, *The Midwives Book or the Whole Art of Midwifry Discovered*, 104.

Ibid., 60.

Ibid., 60.

Ibid., 75.

Ibid., 50.

Ibid., 45.

Ibid., 74.

Ibid., 78.


For a discussion of the various ways women crossed into medical spaces see Fissell, "Women in Healing Spaces," 153-156.

Sharp, *The Midwives Book or the Whole Art of Midwifry Discovered*, 5.

Bicks, "Stones Like Women's Paps: Revising Gender in Jane Sharp's *Midwives Book*, 6

E. Hobby, " "Secrets of the Female Sex": Jane Sharp, the Reproductive Female Body, and Early Modern Midwifery Manuals," *Womens Writing* 8, no. 2 (2001), 201-12.

Keller, "The Masculine Subject of Touch: Case Histories from the Birthing Room," 159-160.

Qtd. in Keller, “The Masculine Subject of Touch,” 72-75.


Keller, "The Masculine Subject of Touch: Case Histories from the Birthing Room," 163.


Margaret, Countess of Holsteed had 364 children born living and soon later died (1277). Sharp, *The Midwives Book or the Whole Art of Midwifry Discovered*, 58.

Culpeper boasted that "my self saw one Woman opened that died in child-bed, not delivered, and that is more by one than most of our Dons have scene." Nicholas Culpeper, A Directory for Midwives (London 1651), 55-56.

Sharp, The Midwives Book or the Whole Art of Midwifry Discovered, 11.


Sharp, The Midwives Book or the Whole Art of Midwifry Discovered, 57.

Ibid., 57.

Ibid., 29.

Ibid., 57.

Ibid., 131.

Ibid., 79.

Cody, "Introductory Note." ix. The other three works are: Elizabeth Cellier, "To Dr. ------ an Anser to His Queries, Concerning the Colledg of Midwives. 1688," (England: Public Records, 1680). Mary Trye. Medicatrix, (London, 1674), and The Midwives Just Petition which was brought before Parliament in 1643.


Cody, "Introductory Note," xi. Explains that John Marshall made revealing editorial cuts that suggest the assumptions about the female reproductive body and humoral theory which Sharp and other Restoration authors reported were no longer as widely accepted.

Keller, "The Masculine Subject of Touch: Case Histories from the Birthing Room," 163.

Ibid.

Dunn, "Dr. Percivall Willughby, Md- Pioneer Man Midwife of Derby."

Alison Flood, "Rare Book of Midwifery Horror up for Auction," The Guardian, June 28 2012, 3.

Percival Willughby, Observations in Midwifery: As Also the Country Midwifes Opusculum or Vade Mecum (Adelaide: Wakefield, 1972).

Willughby’s name appears in much of the Sharp scholarship and was also paired with her in the obstetrical doctor’s address to the British Royal Society in 1901 (see Malins). Incidentally, in 1902 British midwives were “institutionalized as independent, self-regulating profession” (Cody, x).
92 Cody, "Introductory Note," xi.
94 Ibid., 28.
96 Ibid., 9.
97 Sharp’s readers were sufficiently educated, financially sound, and generally literate, none of the midwives that Evenden studied “conformed to the stereotype of the ignorant, poverty-stricken crone who dabbled in deliveries to eke out a livelihood” (9).