Childbirth and Midwifery in the Religious Rhetoric of England, 1300-1450

by

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A Dissertation Presented in Partial Fulfillment
of the Requirements for the Degree
Doctor of Philosophy

Approved March 2014 by the
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ARIZONA STATE UNIVERSITY

May 2014
ABSTRACT

This dissertation focuses on the connections between childbirth and spirituality in fourteenth- and early fifteenth-century England. It argues that a rise of scholastic interest in conception and procreation led to a proliferation of texts mentioning obstetrics and gynecology, and that this attention to women’s medicine and birth spread from the universities to the laity. This dissertation contends that there is interdependence between spiritual and physical health in late medieval English religious culture, correlated with and perhaps caused by an increasing fascination with materialism and women’s bodies in religious practices and rhetoric.

The first chapter provides an analysis of birth in medical and pastoral texts. Pastoral works were heavily influenced by the ecclesiastical emphasis on baptism, as well as by scholastic medicine’s simultaneous disdain for and reluctant integration of folk medicine. The second chapter examines birth descriptions in narratives of saints’ miracles and collections of exempla; these representations of childbirth were used in religious rhetoric to teach, motivate, and dissuade audiences. The third chapter turns to the cycle play representations of the nativity as depicting the mysteries of human generation and divine incarnation for public consumption. The fourth chapter analyzes the abstract uses of childbirth in visionary and other religious texts, especially in descriptions of spiritual rebirth and the development of vice and virtue in individuals or institutions. By identifying their roles as analogous with the roles of midwives, visionaries authorized themselves as spiritual caretakers, vital for communal health and necessary for collective spiritual growth.
This dissertation outlines a trajectory of increasing male access to the birthing chamber through textual descriptions and prescriptions about birth and midwifery. At the same time, religious texts acknowledged, sought to regulate, and sometimes even utilized the potential authority of mothers and midwives as physical and spiritual caretakers.
DEDICATION

for my grandparents,

Bob and Mary Lou Jacoby
ACKNOWLEDGMENTS

This dissertation would not have been possible without the assistance of many people. I would first like to thank my advisor Rosalynn Voaden for her tireless encouragement and guidance. I am grateful for the valuable feedback I have received throughout this project from Richard Newhauser and Robert Sturges. I would also like to thank Brad Ryner, Eddie Mallot, and Monica Green for their criticism and advice during my studies at Arizona State University.

I would also like to express my gratitude to the members of the Medieval Colloquium at Arizona State University, who have been incredibly generous with their time and ideas. I have benefitted from the intellectual insights and the friendship of Will Bolton, Bryan VanGinhoven, Chris Roberts, Nate Bump, Daniel Najork, Arthur Miller, Ben Ambler, Sunyoung Lee, Meghan Nestel, and Jessica Brown.

My work has also been enriched by the intellectual community of the Renaissance Colloquium and other graduate students at Arizona State University. I especially thank Jenny Downer, Michael Noschka, BJ Minor, Kali Hendrickson, Heather Ackerman, and Jason Price.

My studies would have been far less fulfilling without the friends who helped preserve my sanity and sense of humor: David Lerner, Niko White, John Henry Adams, Rachel Andoga, Emily Churg, Kent Linthicum, Danielle Chipman, Lakshami Mahajan, Jordan Loveridge, Branden Boyer-White, Adrienne Celt, and Lyndsey Reese.

Last but not least, I would like to thank my family for a lifetime of inspiration and support, especially Susan Frye, Timothy Kuntz, Katherine Kuntz, Gavin Frye, and Bob and Mary Lou Jacoby.
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CHAPTER 1

INTRODUCTION

On August 19, 2012, US Senator Todd Akin gave his views on whether abortion exceptions should be permitted in the case of rape. He said, in a comment that sparked a storm of political ire, “If it’s a legitimate rape, the female body has ways to try to shut that whole thing down.”¹ His remarks implied that female bodies are somehow capable of voluntarily rejecting the sperm of rapists. Soon after, an article titled “The Medieval Roots of Todd Akin’s Theories” appeared in The New York Times, in which Jennifer Tucker argued that Akin’s ideas “are obviously at odds with modern science. They are, however, in step with medieval science.”² She even argued that some medieval ideas of conception were more accurate than those of Akin, ending the piece with the snappy retort, “That Mr. Akin sits on the House Science and Technology Committee suggests, perhaps, that the Republican Party might as well recruit some historians of medieval and Victorian science as its future science policy advisers.” This response distances medieval gynecological medicine as relatively uninformed in comparison with modern medicine, but it still draws parallels between two cultures where men with political power speak of, and seek to regulate, the reproductive capacities of female bodies, frequently without the benefit of accurate biological information.


The issues raised by obstetrical medicine may serve as catalysts for political discord, but they also can encourage the creation of communities dedicated to emotional, and sometimes spiritual, support. A second recent phenomenon, taken from popular culture instead of politics, suggests that female-led and emotionally supportive communities could be a similarity between modern and medieval culture: the popularity of the television show Call The Midwife. The BBC period drama follows a group of female midwives, living and working with nuns, as they help the people of working-class east London during the 1950s. Its narrative force comes from the interactions between women – between midwives, mothers, and other community members – as much as from childbirth itself. Television critic Maureen Ryan writes, “‘Call the Midwife’ does, in its own gentle way, send the message that determined people – many of them women – who ignore their allegedly limited opportunities can help create and sustain a caring community.”

The potential inherent in midwives for community creation and caretaking, in spite of those who regulate, denigrate, or belittle their work, is shared with the women of the Middle Ages. Medieval birth took place in birthing chambers at home, where the pregnant, laboring, and post-delivery woman was surrounded with female family and neighbors giving assistance and advice. Childbirth was not a medical occurrence unless something went drastically wrong; it was instead a common, if dangerous, event, laced with social and spiritual implications. This is a marked difference from childbirth and obstetrics in the United States and Britain in the twenty-first century, which are generally considered medical fields, overseen by licensed practitioners, whether physicians or

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midwives. Most births now occur in the sanitized environment of hospital rooms, where only one or two family members may attend. The popularity of Call the Midwife, however, suggests nostalgia for the communities created and sustained through midwifery and its more holistic approach to obstetrical care.

The intersections of these two phenomena – political and religious control of birth, and emotional and spiritual support during birth – is the subject of this dissertation, which explores the connections between childbirth, midwifery, and religion in England between 1300 and 1450. As Barbara Newman argues in Medieval Crossover: Reading the Secular Against the Sacred, medieval texts frequently offer both secular and sacred meanings, sometimes contradictory ones, without asking a reader to choose or even to synthesize. Newman argues for a methodology that “interprets the secular as always already in dialogue with the sacred.” It is with this in mind that I turn to birth, a concrete, bloody, and mortal event, with the understanding that the sacred is necessarily present. My argument builds on Newman’s by identifying crossover between medicine and religion in religious rhetoric and thereby giving insight into the forces shaping

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5 Barbara Newman, Medieval Crossover: Reading the Secular Against the Sacred (Notre Dame, IN: University of Notre Dame Press, 2013), 9.

6 Newman, Medieval Crossover, ix.
religious writing and thought in England. I examine a variety of texts from the fourteenth and early fifteenth centuries that describe birth, labor, and delivery, especially texts that frame birth in religious terms, such as sermons and visionary texts. I argue that a rise of male scholastic interest in conception and procreation – that is, by university-educated philosophers, theologians, and physicians – led to a proliferation of texts on obstetrics and gynecology. The burgeoning attention to women’s medicine and birth spread from the universities to the laity as a whole in the late Middle Ages. The chronological endpoints, from the beginning of the fourteenth century to the middle of the fifteenth century, outline a period when visionary texts, and especially those by female visionaries, were prevalent throughout Europe, and these visions focused more often on objects and bodies than earlier visions. I contend that the concentration of birth imagery can be linked to a religious culture eager to embrace materiality in religious discourse and, sometimes, explicit depictions of the reproductive capacities of the female body. The frequency and importance of childbirth depictions during this time period indicates that the parturient body was one way of representing humanity’s struggles to avoid sin and attain salvation.

My analysis of the particular topic of labor and delivery across texts ranging from medical to visionary illuminates an area that has been under-explored in medieval criticism. Scholars including Monica H. Green and Katharine Park have written extensively about actual childbirth practices using medical and other texts, while Caroline Walker Bynum, among others, has addressed the gendered ideologies of late medieval

religious culture. However, the connections between literal birth practices and metaphoric birth imagery have not yet been analyzed in detail, and the cultural and religious functions of midwives and birth attendants in literature have received only brief treatments. My work addresses this gap, and furthermore demonstrates cross-pollination between genres and interdependence of gender, religion, and medicine, arguing that birth representations and metaphors are a vital part of late medieval religious expression.

Midwifery straddled the boundaries between domestic, medical, and spiritual practices, providing an ideal arena for the identification of intersections between the bodily and the sacred. The late medieval birth attendant labored with her hands and relied on her senses, working with that most corporeal of things – the sexualized female body – yet her actions had enormous spiritual repercussions when she saved (or lost) lives and

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10 The terms for midwives and birth attendants are often fluid or unspecific in vernacular texts; it is unclear if the texts refer to trained practitioners, experienced women of the family or neighborhood, or simply any women who were in attendance. Green, *Making Women’s Medicine Masculine*, 136. For the purposes of this dissertation, I use ‘birth attendant’ and ‘midwifery’ as general terms to describe all persons and practices surrounding birth. I use the term ‘midwife’ to denote the female birth attendant(s) responsible for directing the activities of the birthing chamber, when specified.
performed emergency baptism. The liminal status of midwives as both medical and spiritual caretakers therefore grants insight into the interpenetration of gender and materiality, setting the stage for the later consideration of midwife licensure, female administration of the sacraments, and other gendered religious matters.

Birth, like death, was laced with physical and spiritual connotations, and birth descriptions therefore provided powerful material for a variety of religious arguments.

This dissertation focuses on representations of labor and delivery in a wide range of genres of the religious literature prevalent in England at the time. These texts include handbooks for confessors and priests which indicate what the laity were taught, literature and moral instruction written directly for the laity or female religious, and plays on religious subjects performed for the laity. Sometimes birth representations supported traditional church structures, such as the emphasis on priestly authority over the

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sacrament of baptism even when performed by the laity. At other times, birth and midwife imagery was used to validate women’s roles as spiritual caretakers; if spiritual renewal is a form of birth, who better than women to assist the transformation? Birth images associated spiritual experiences with the exclusive, private spaces of childbirth, yet they also had the potential to invite the reader or listener into those small, exclusive spaces, making them more visible to the larger public.\footnote{For an analysis of visions and visionaries in late medieval England, especially in lay religious contexts, see Gwenfair Walters Adams, \textit{Visions in Late Medieval England: Lay Spirituality and Sacred Glimpses of the Hidden Worlds of Faith} (Leiden: Brill, 2007).}

The rhetoric of late medieval England, I argue, indicates that what had been an almost exclusively female domain – knowledge of the birthing chamber and women’s medicine – had become widely accessible through texts and plays by the later Middle Ages, and was used by both men and women as a tool to explore aspects of spirituality.

The trajectory of this dissertation demonstrates simultaneous revealing, shaming, and concealing of women’s bodies and medicine, often, but not always, by religious men; at the same time, it uncovers the frequently positive implications suggested in religious rhetoric about the reproductive capacities of the female body. These phenomena are related to a trend in making spirituality and the female body visible, textually if not literally, in order to glorify or to vilify. The process of making the female body more prevalent in religious discourse indicates a culture increasingly concerned with that female body. Incarnational theology became more prevalent through attention to the bodies and sufferings of the Virgin and her son. The female body made visible could be condemned for its sexuality or its ability to tempt men to sin. It could also be celebrated as being specifically suited to procreation and caretaking, both physically and
metaphorically.\textsuperscript{15} The greater interest in and knowledge about women’s bodies and spaces became a potential strength for women; there were strands of spiritual writings that focused on the labor of a parturient woman and compared it with the labor of a soul seeking salvation. Women in childbirth were performing their God-ordained duty to family and community through the procreation of children. Furthermore, the birthing chamber was a space of female knowledge and authority, as women held knowledge about birth practices and remedies and were generally the only ones permitted access to the birthing chamber.\textsuperscript{16}

The birthing chamber itself was certainly a female-only space in most cases.\textsuperscript{17} Elizabeth L’Estrange writes that visual representations of childbirth “show a space in which women care for, and are taken care of by, each other: male figures are absent or marginalised. This female-dominated, post-partum representation of the births of holy or heroic children occurs throughout West European art of the late middle ages, from

\begin{flushleft}


\textsuperscript{17} The birthing chamber, also sometimes called the lying in chamber, refers to a room in the house where the expectant mother was traditionally enclosed before, during, and after the birth.
\end{flushleft}
Barbara Hanawalt argues that physical space is an important factor in the definition of marginality: “By limiting the physical spaces that women could occupy and controlling women both within that space and outside of it, medieval men defined a spatial location for women that made women who moved beyond those boundaries more clearly marginal.” Implicit in the gendered rhetoric of birth is the idea that private space is feminine while public space is masculine. In this sense, male-authored rhetoric about obstetrics and female bodies becomes a making-public. Yet Hanawalt argues against a reductive view of gender binaries in early obstetrics:

The most persistent trend has been to read the midwife and the other women of the birth room as comprising a private and empowered female society – one distinct from the patriarchal world beyond its walls. … This perspective, while vital for pointing out the unusual freedom women had during the time of childbirth and recovery, has led to another kind of marginalization: the private world of the birthroom becomes a limited space of female dissidence formed in reaction to a public, central male sphere. By turning the ‘natural’ space of the

18 Elizabeth L’Estrange, *Holy Motherhood: Gender, Dynasty, and Visual Culture in the Later Middle Ages* (Manchester: Manchester University Press, 2008), 1. Elsewhere, L’Estrange notes that these visual representations of childbirth were not always owned by women; Books of Hours with visual depictions of the births of Mary and John, for example, were frequently owned by male clergy. Elizabeth L’Estrange, “Anna peperit Mariam, Elizabeth Johannem, Maria Christum: Images of Childbirth in Late-Medieval Manuscripts,” in *Manuscripts in Transition: Recycling Manuscripts, Texts and Images*, ed. B. Dekeyzer and J. Van der Stock, 335-346 (Leuven: Peeters, 2005), 337.

birthroom into a place where bodies were marked and tales about them generated for public consumption, the early modern midwife not only tested these limits, she redefined them.\textsuperscript{20}

I argue that late medieval religious rhetoric delineates many of the issues of midwifery and private/public space that Hanawalt addresses, since the integration of birth imagery in religious rhetoric was a kind of opening of the chamber to the wider community.

I use the term ‘community’ here and throughout this dissertation to refer to all of English Christianity, urban and rural, literate and illiterate. The term therefore encompasses authors, translators, and adaptors, as well as their audiences. The ‘making public’ of the birthing chamber is therefore a shift from birth as an event that happened, and was discussed, only in enclosed, domestic spaces and contexts, to one that was regarded as both relevant and useful for use in larger religious spheres, such as in church. Additionally, I use ‘private’ to indicate that which takes place in domestic spaces, or is inherently limited to one group of people. Katharine Park labels the medieval birthing chamber a private space, but also one that was “highly social,” and one in which the attendants also served as witnesses and reporters to the outside world about the events that occurred within.\textsuperscript{21} Although birth might have been something nearly everyone would have had some exposure to, through their families and neighbors if not directly, the discussions and experiences took place in closed spaces for the most part. However, in practice, people in England in the fourteenth and fifteenth centuries were all part of the


Christian community, and the frequency of birth imagery in Christian texts thus shifted childbirth rhetoric into larger communal contexts. Birthing chambers became part of the wider community through the machinery of information dissemination through religious rhetoric, where priests acquired information about female medicine and birth practices, then echoed and expanded it in texts they shared with their parishioners. In some ways, medieval ideologies allowed for even wider relevance of midwifery and birth descriptions to religious discussions, through the weight placed on revelatory texts by women who frequently used their real-world experiences to explain their spiritual ones.

This dissertation’s cross-genre analysis of religious rhetoric reveals that midwifery, birth, and their textual representations provided avenues to emphasize the importance of baptism, debate the place of materialism in devotional practice, and argue for the validity of female visionaries as spiritual caretakers. The focus on texts intended for eventual dissemination to the laity does not indicate an imagined homogenous

22 Jürgen Habermas argues that medieval Church rituals were public in one sense, though they also implicitly made certain elements of Christianity exclusive. He also writes that the family was at the heart of the private: “The private sphere comprised civil society in the narrower sense, that is to say, the realm of commodity exchange and of social labor; imbedded in it was the family with its interior domain.” Jürgen Habermas, The Structural Transformation of the Public Sphere (Cambridge, MA: Massachusetts Institute of Technology Press, 1991), 8-9, 30.

23 I argue that what Mary Fissell has identified as areas of contention between pre- and post-Reformation ideologies in Renaissance England were vital elements of medieval English Christianity as well. Mary Fissell, “The Politics of Reproduction in the English Reformation,” Representations 87 (2004): 43-81.

audience for these texts. Indeed, the texts vary significantly in delivery, language, and rhetoric; it is precisely the differences in rhetoric in various contexts that are often so illuminating. A religious man writing to his mother about why she should not enter a nunnery uses birth metaphors to describe the horrifying emergence of evil unintentionally nurtured in a sinful heart, while a birth attendant might present a laboring woman with a charm referring to successful births in the gospels to encourage her. \(^{25}\) Although scholastic medicine and pastoral texts encouraged the regulation of childbirth and midwives, \(^{26}\) birth metaphors were also used as tools of resistance in the hands of female visionaries. Even as the birthing chamber was increasingly publicly exposed in sermons and plays, the female communities surrounding birth retained some cultural authority through their socially sanctioned duties and reputation for specialized knowledge. The religious rhetoric of late medieval England indicates that the epistemology of women’s medicine was an issue in contention; knowledge about women’s medicine became more clearly divided into theoretical, scholarly, male knowledge and practical, experiential, female knowledge.

The time period this dissertation covers spans a century and a half of cultural upheaval. The late Middle Ages were a time of great religious dissent and change in England and, indeed, in all of Europe; as Mary Fissell argues, frequently “women’s


\(^{26}\) For example, pastoral texts argued that birth attendants must only baptize in cases of emergency, and medical texts frequently argued that the use of charms by midwives should be prohibited.
reproductive bodies were the material with which people fought battles of belief.”

England was particularly plagued by religious turmoil in the late fourteenth and early fifteenth centuries, thanks in part to John Wycliffe, his followers, and the Lollard movement. Wycliffe was a fourteenth-century Oxford theologian, scholar, and dissident, who preached anticlerical messages, including a priesthood of all believers, and advocated mass education about the teachings of the Bible. The religious complexities of the late Middle Ages in England were not limited to Lollardy, but include other kinds of dissent and reformists that have sometimes been lumped in with Wycliffe and his followers. Several orthodox responses to these heterodox positions, including Arundel’s Constitutions, appeared in the first decade of the fifteenth century. Arundel prohibited unauthorized preaching but explicitly supported many popular public devotional practices; as Jeremy Catto remarks, “the practice of private contemplation was to be firmly located in a public religious context.”

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28 His followers became known as the Lollards, and his works, though not he himself, were condemned by Blackfriars’ Council in 1383 as erroneous, and some even as heretical. He wanted the laity to know the Bible better and he argued that it should be the one and only law for every Christian. Lollard rebellions, including that of John Oldcastle (d. 1417), took place in the following decades. Oldcastle was head of a widespread Lollard group, and he denied, among other things, that Christians needed to confess to a priest. Anne Hudson, ed., *Selections from English Wycliffite Writings* (Cambridge: Cambridge University Press, 1978), ix, 3.


Part of this religious turbulence originated in attempts to unify Christians through better sacerdotal education, a movement stemming from the Fourth Lateran Council’s emphasis on unification and standardization.\textsuperscript{31} Other parts focused more on individual experience or visions, reflecting the influence of the continental mystics whose works were beginning to make their way to England and be translated into Middle English.\textsuperscript{32} As Caroline Walker Bynum notes, this phenomenon was connected with gendered expressions of spirituality. Female holy figures, including female saints, and especially the Virgin Mary, were increasingly popular.\textsuperscript{33} Their influence was also related to an increased interest in the human aspect of Christ, which was identified as that which he received from Mary. The thirteenth and fourteenth centuries saw a growing emphasis on Christ’s humanity, both through paintings, sculptures, and other artistic depictions of Christ and the Virgin Mary emphasizing their emotions and their family relationship, and also through an increased stress on Christ’s human nature in texts.\textsuperscript{34} For example, the fourteenth- and fifteenth-century cycle plays contain dramatization of many of the

\textsuperscript{31} For example, Canon 21, also called \textit{Omnis utriusque sextus}, mandated all Christians of age must confess yearly to their own priests, perform the penance assigned, and take the Eucharist at Easter. It stated that these requirements must be published frequently in the churches so that parishioners would be aware of their duties; this led to increased emphasis on pastoral education. Leonard E. Boyle, “The Fourth Lateran Council and Manuals of Popular Theology,” in \textit{The Popular Literature of Medieval England}, ed. Thomas J. Heffernan, 30-43 (Knoxville: University of Tennessee Press, 1985), 31-32.

\textsuperscript{32} The Hail Mary prayer was added to the Pater Noster and the Creed at the Fourth Lateran Council of 1215, indicating a new emphasis on the Virgin Mary. Rosemary Woolf, \textit{The English Religious Lyric} (Oxford: Clarendon Press, 1968), 118.


\textsuperscript{34} David Bevington, ed., \textit{Medieval Drama} (Boston: Houghton Mifflin Co., 1975), 233.
Biblical stories, including those about Christ and his sufferings.\textsuperscript{35} Other writings adapt early apocrypha, including the second century Infancy Gospels, or invent new material to fill in the gaps of the gospels, especially regarding Mary’s birth and upbringing, Christ’s birth, and his childhood. This emphasis on family life as a means to understand the divine mysteries dovetails with the prevalence of birth depictions and birth imagery in spiritual contexts.\textsuperscript{36}

Birth was also sometimes compared with Christ’s Passion, and this use of birth integrates the specific pain that the female body undergoes during childbirth. Conversion continued to be compared to birth in the thirteenth and fourteenth centuries, and Mary became a vital figure in affective piety and devotional praxis originating with the Franciscans, where individuals imagined the experiences of holy figures and scriptural events. Katharine Park writes, “Although Mary bore Christ without pain, according to this tradition she later felt that pain at the foot of the cross, in the form of a second childbirth, where it became part of her ‘compassion’ – her ‘co-suffering’ – with her son.”\textsuperscript{37} Her emotional sufferings were compared with the physical ones of Christ on the

\textsuperscript{35} Christine Richardson and Jackie Johnston, eds., \textit{Medieval Drama} (London: Macmillan, 1991), 46.

\textsuperscript{36} Mary Fissell argues that “Prevailing ideas and practices surrounding conception and childbirth provided an important arena in which religious contests were fought” in the English Reformation; I agree, but my dissertation traces the pre-Reformation debates, which demonstrate that the politics of reproduction were turbulent and influential long before the sixteenth century. Fissell, “The Politics of Reproduction in the English Reformation,” 43.

cross, while Christ’s physical sufferings were parallel to the pain of women in childbirth. These comparisons bring the bodies of both scriptural figures and parishioners into the forefront; it was in the body that Christ suffered for humanity, and it is through contemplating or imitating that body that individuals may therefore come closer to the divine.

The importance of bodies to late medieval English devotional practice is part of a larger interest in intersections of materiality and spirituality. The physical, bodily experience of touching, seeing, and holding relics and other holy objects was intimate and personal, and it allowed parishioners an individual experience with the divine. Consuming the Eucharist, for example, was a way for Christians to touch the body of Christ. Sarah Beckwith identifies why transubstantiation was such an important issue in late medieval England; it was a way the laity could physically connect with Christ:

Arguments about transubstantiation were not merely abstract theological debates. They touched the most frictional tensions in late medieval society, for they concerned the vexed issue of clerical monopoly over the handling of Christ’s body, and access by the community of the body which it supposedly imaged.38

The bodies of both Christ and the parishioner were at the crux of this issue. The human body was problematic in that it was subject to flaws and weaknesses that could lead one astray through sin. At the same time, the body was also the way a Christian could access the divine – through devotional practices performed with and in the body, through taking

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the Eucharist, and through the bond created by the incarnation between God and humanity. Humans shared the experience of living in a corporeal body with Christ through the incarnation. Birth underscored an element of medieval life that was central to religious debate at this time, especially the dissent over the appropriate place of materiality. This dissent included both use of material objects in devotional practice and focus on the bodies of Christ and the Virgin Mary in religious rhetoric.

My dissertation contends that there is interdependence between spiritual and physical health in late medieval English religious culture, correlated with and perhaps caused by an increasing fascination with materialism and women’s bodies in religious practices and rhetoric. Andrew Wear writes, “The relationship between medicine and religion received, as might be expected, more attention from religious than from medical writers. Medical writers did not feel constrained by religious teaching or think that they were in conflict with it, and they tend to be silent on the relationship between medicine and religion.” Religious writers, however, frequently compared spirituality with medicine, identifying spiritual caretaking as similar to, but more important than, bodily care. There are wide-ranging connections between physical health and spiritual health throughout the Bible, and these connections were of interest to medieval theologians and other religious writers. The spiritual healing that Christ performed was frequently compared with the bodily healing that physicians assisted. Wear writes, “The interest of


religious writers in illness and medicine stems not only from the example of Christ the Physician and the recognition that Christianity was a healing religion, but also from the perception that the body and the soul were closely connected and that Christianity dealt with the transition from life to death and hence to the next world, a transition when the body and soul were separated." In this way, liminal moments – death, but also birth – were opportunities for accessing something greater, and possibly even for gaining understanding about the divine. Observation and consideration of birth could lead to transcendence; reflection was a tool for learning about one’s place in relation to the divine.

The focus on religious issues in the practice of medicine was probably indirectly a result of the Fourth Lateran Council in 1215, which “obliged physicians to insist that patients summon a confessor before any other treatment.” The Church took an interest in physical health because of the implications for spiritual health. Fourteenth-century authors remained interested in the connections between spiritual and physical health, and some addressed the issue directly. The author of the fourteenth-century religious treatise Speculum Christiani writes, “Ther-for seys Criste to Petyr thrys: Fed my schepe. That es to sey with word, wyth ensaumple, and wyth bodyli helpe, if thei need.” All three forms of help – word, example, and bodily help – were considered necessary and valid forms of providing aid to the Christian community, and, I argue, they all appeared as different

41 Wear, “Religious Beliefs and Medicine,” 149.

42 Nancy G. Siraisi, Medieval and Early Renaissance Medicine: An Introduction to Knowledge and Practice (Chicago: University of Chicago Press, 1990), 44.

approaches to health. Pastoral texts and sermons/sermon material were teaching with word, as were devotional texts. Collections of *exempla* became a textual form of teaching by example. Bodily help came about through medical texts and pastoral texts, which sometimes contained advice for what to do in situations where physical danger or illness threatens the soul as well.

Revelatory texts by women, too, used the language of physical and spiritual birth. These women include Birgitta of Sweden (c. 1303-1373) and Catherine of Siena (1347-1380), whose works were translated into English in the early fifteenth century, and England’s own Julian of Norwich (c. 1342-1416) and Margery Kempe (c. 1373-1438). Birgitta’s *Revelations* specifically differentiates two kinds of birth, physical and spiritual; the Virgin Mary helps Birgitta in childbirth, but also helps her son in his spiritual birth into the next life after his death. Spiritual birth and motherhood formed part of Birgitta’s conceptualization of her role in others’ lives. Since the Virgin Mary was able to spiritually birth a soul so that the “child should not offend God,” so too could Birgitta try to help those around her. Andrew Galloway notes that for Augustine and his followers,

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“spiritual ‘birth’ is … decisively differentiated from real, essential bestial birth – and from the exclusive power of actual women.” Yet in the fourteenth and fifteenth centuries, women used birth and midwife metaphors in their spiritual writing. Childbirth was part of the everyday, lived experiences of women, and, as Barbara Newman argues, there was no separate secular realm into which the sacred did not intrude. Neither was women’s piety separated from their lives in a distinct, sacred sphere; instead, it was informed by their understanding of the divine, of the material world, and also by the comings and goings and events of their daily lives, and even by their own bodies. For these women, the body was a perfect vehicle through which to express themselves as individuals, as humans, and as bodies related through the Incarnation to the very being of the divine.

After this introduction, the second chapter of this dissertation provides an analysis of literal birth in pastoral texts, including descriptions of midwives’ medical and spiritual duties. It examines the tropes of secrecy and shame through what is known about medieval midwives and birth attendants, placing these concepts in their cultural and cultural and

Oxford University Press, 2008), II.49; and Ellis, ed., The Liber Celestis of St Bridget of Sweden, 477.


47 Bynum, Holy Feast and Holy Fast, 30.

theological contexts. This chapter also reviews the important critical and historical research that has been done in the last several decades on actual birth and midwives of the late Middle Ages. The explicit imagery in several widely disseminated pastoral texts demonstrates the depth of medical instruction or knowledge of some male clergy and scholars, knowledge sometimes found in encyclopedias and other general philosophical and theological works. The pastoral works were heavily influenced by ecclesiastical emphasis on maintaining control over the sacraments, especially baptism, as well as by scholastic medicine’s simultaneous disdain for and reluctant integration of practical medicine, including the use of certain obstetrical recipes.49

The third chapter of the dissertation moves to birth descriptions in narratives of saints’ miracles – legenda – and collections of exempla, many of which use the same kind of language as medical and pastoral texts. The exempla and legenda contain a variety of moral messages, from the dangers of excessive curiosity to admonitions against adultery. The representations of childbirth are used in religious rhetoric to teach, motivate, and dissuade audiences, through sermons about saints’ miracles as well as sermons about women who suffer supernaturally lengthened labor due to their sins. These stories often address the concerns of women, as when saints intercede on behalf of laboring women, or when the Virgin helps nuns or abbesses hide their illicit pregnancies. Birth and procreation as a whole are not usually private, internal affairs for a woman. Her body swells without her control, and she frequently has other physical manifestations of

pregnancy. Her pregnant body and, later, her progeny are the very visible and corporeal evidence of her sexual being. In a society that condemned sexual activity outside or before marriage, pregnancy could therefore be a sign of sin, and even if it occurred within the sanctioned marriage bed, there was some residual shame in the procreative female body. The birthing chamber, however, hid at least some of this process from the outside world, and especially from men. Yet this chapter demonstrates that, increasingly, the birthing chamber was not a private enough space to avoid textual representation and commentary by religious men. Birth was seen as an opportunity for interaction with divine or holy intermediaries; it was at once viscerally corporeal and also potentially spiritual. This made it an ideal didactic tool in the project of greater education for parish priests and their charges. The use of birth imagery, however, also brought women and their bodies to the fore of religious rhetoric.

The most religious of birth scenes is, of course, the nativity, which has far-reaching implications for all of Christianity as the moment when God took on human form. The fourth chapter therefore explores the implications for materiality and spirituality in representations of the birth of Christ. It focuses on cycle play representations of the nativity as scenes that allowed the mysteries of human generation and divine incarnation to be depicted for public consumption. The apocryphal story of Salome, a midwife who was present just after the birth of Christ but who doubted the miracle of the virgin birth, was common in late medieval England, and provides rich material for the analysis of late medieval questions of epistemology and materiality. The nativity scenes demonstrate an emphasis on sensory aspects of holy events as a means to access their more spiritual aspects; incarnational theology was a vital element of
medieval Christianity. The dual natures of Christ increasingly functioned as the mirror and exemplum for the possibility of human union with the divine. The incarnation of Christ therefore served as a key moment in understanding salvation, and birth became vital in salvation, as did the female body.\textsuperscript{50} As Nancy Bradley Warren writes, “incarnational paradigms shape the ways in which women conceive of relationships among gendered selves, God, and human others. Indeed, it is through incarnational paradigms that such relationships are socially formed, historically categorized, and textually mediated.”\textsuperscript{51} The incarnation, melding of human with divine, corporeal with spiritual, encouraged the proliferation of piety focused on marriage, birth, and motherhood.\textsuperscript{52} The nativity plays are a vivid demonstration of this, as the connections between biological and spiritual processes were thus made visible on stage, and the private birthing chamber became public. What had once been secret and exclusive to women became a topic addressed far more openly and a vehicle for theological debates over the place of materiality in faith.

The fifth chapter turns from these didactic and public representations of birth to the abstract uses of childbirth in mystical and other religious texts, especially in descriptions of spiritual rebirth and the development of vice and virtue in individuals or

\textsuperscript{50} Beckwith, \textit{Christ’s Body}, 47.


\textsuperscript{52} Bynum argues that “human nature, fallen in Adam, is taken on, married, and redeemed by Christ the bridgroom in Mary’s body. It is the bride; it is symbolized by the female. And if our nature is not Mary herself (the second Eve), … its marriage to Christ is nonetheless made possible only by the body and blood of woman.” Emphasis in original. Bynum, \textit{Holy Feast and Holy Fast}, 268.
institutions. A number of men and women used birth metaphors, following Biblical and early Church writings. In the high and later Middle Ages, Caroline Walker Bynum argues, “positive female figures and feminine metaphors took a significant place in spirituality alongside both positive male figures and misogynist images of women.”53 Bynum adds, “female erotic experience, childbirth and marriage became major metaphors for spiritual advance, for service of neighbor and for union with the divine.” My analysis specifies metaphorical midwifery as an important addition to this list; midwife metaphors authorize visionary women, by analogy, to assist others in their spiritual pursuits. While the majority of metaphors in religious rhetoric denote an individual’s spiritual rebirth in a private spiritual process, the increasingly prevalent texts by and about visionary women present birth as a communal event, one in which the progeny is born in the individual soul but then is also ushered into the community. Birth and spiritual renewal were both events that were not private but should be shared with the larger community, if not through sermons then at least through the disclosure of revelations and other spiritual insights. By identifying their roles as visionaries as analogous with the roles of mothers and midwives, these mystics were authorized as spiritual caretakers, vital for communal health and necessary for collective spiritual growth.

This dissertation seeks to answer, at least in part, a number of questions about women’s physical and spiritual health in the Middle Ages. It outlines a trajectory of increasing male access to the birthing chamber through a variety of textual descriptions and prescriptions about birth and midwifery. This information was sometimes, or even frequently, divorced from the lived, practical experience of birth attendants themselves,

53 Bynum, Fragmentation and Redemption, 152-153.
though masculine interpretations of the birthing chamber indicate familiarity with its potential sorrows, complications, and joys. At the same time, my work reveals a strong presence of women drawing on their own knowledge of the birthing chamber to articulate and emphasize the emotional, physical, and even social support gained from these all-female communities. While women may have resisted revealing the mysteries of the birthing chamber out of shame for their sexuality and corporeality, at the same time they recognized the potential power and authority in the role of midwife and birth attendant.
CHAPTER 2

“AND TECHE THE MYDWYF”: MIDWIFERY AND OBSTETRICS IN MEDICAL AND PASTORAL TEXTS

The thirteenth through the sixteenth centuries proved to be a time of many changes in medieval medicine, not least of which was growing interest in anatomy, gynecology, and obstetrics. One of the stranger aspects of this change in medicine was the increase in discussions of women’s medicine in texts by religious men for other religious men or general lay audiences. For example, John Mirk’s *Instructions for Parish Priests* (c. 1400) details exactly how the midwife ought to use her hands during delivery:

And teche the mydewyf neuer the latere,
That heo haue redy clene watere,
To folowe the chyled ʒe hyt be nede,
ʒe heo se hyt be in drede.
Thenne bydde hyre spare for no shame,
To folowe the chylde there at hame,
And thaghe þe chylde bote half be bore,
Hed and necke and no more,
Bydde hyre spare, neuer þe later,
To chrystene hyt and caste on water;
And but scho mowe se þe hede,
Loke scho folowe hyt for no [d]red;
And ʒef the wommon thenne dye,
Teche the mydwyf that scho hye
For to vndo hyre wyth a knyf,
And [saue so] the chyldes lyf,
And hye that hyt crystened be,
For that ys a dede of charyte.
And ʒef hyre herte ther-to grylle,
Rather þenne the chylde scholde spylle,
Teche hyre thenne to calle a mon
That in that nede helpe hyre con.
For ʒef the chylde be so y-lore,
Scho may that wepen euer more.
But ʒef the chylde y-bore be,
And in perele [scho] hyt se,
Ryght as [er thow bad] hyre done,
Caste on water and folowe hyt sone.  

This vivid and graphic example is one of several that demonstrate the depth of medical instruction and knowledge in some religious texts, including encyclopedias, pastoral handbooks for educating the laity, and other philosophical and theological works. The male authors of these works demonstrate knowledge of, and interest in, the occurrences of the birthing chamber, a space ordinarily reserved for women: the midwife and birth

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attendants, female family members and neighbors, and the parturient woman herself.\textsuperscript{55} John Mirk was so apprehensive about the correct baptism of children that he was willing to write explicitly about how a midwife should reach into a laboring or already-dead mother’s vagina in order to baptize a still-living child, so long as she could see the child’s head.

Mirk’s passage exemplifies an odd tendency in the fourteenth and fifteenth centuries: the practice of childbirth was a women’s issue, but it was men who spoke of it, at least in the extant texts. Birth attendants’ tasks became more frequently regulated and publicly discussed throughout the later Middle Ages. Male religious were increasingly writing about what laywomen did, or should do, in texts intended for wide dissemination to a lay audience, such as Mirk’s sermon instructions. Gynecological and obstetrical texts, too, were often written for, and read by, male university-educated theologians and philosophers, or others who had no practical use for the information. Why were men writing about what women did in the female sphere of the birthing chamber? I argue that two strands of high medieval ideologies coalesce in the fourteenth century and inspire male interest in women’s medicine: the heightened emphasis on the importance of baptism, and scholastic medicine and natural philosophy’s investigation of procreation and generation.

In order to contextualize the obstetrical and baptismal passages in these religious writings, this chapter reviews the important shifts in birth practice and rhetoric in the late

\textsuperscript{55} For a remarkably detailed description of the late medieval birthing chamber of a wealthy merchant’s wife in France, see Christine de Pisan, \textit{The Treasure of the City of Ladies or The Book of the Three Virtues}, trans. Sarah Lawson (New York: Penguin, 1985), 154.
Middle Ages. It first gives an overview of medieval midwifery, to the extent known, including its frequent associations with superstitious rituals outside of university and Church teaching, with secrecy, and even with shame. It then discusses scholastic approaches to obstetrical medicine, both those inherited from Greek or Arabic traditions and those newly created after the rise of western university faculties of medicine. The chapter then turns to the parallel trend of religious and pastoral attention to birth and baptism. The combination of medical shifts towards integration of theoretical and practiced medicine and increased Church control of baptism led to a birth culture far more subject to discussion and regulation by men in the late Middle Ages. By the late fifteenth and early sixteenth centuries, this male didacticism in both religious and medical venues regarding women’s medicine was joined by male practitioners entering the birthing chamber physically and practicing obstetrical medicine themselves.

1. Who are Medieval Midwives and Birth Attendants?

Unfortunately, late medieval midwives did not themselves produce a body of literature defining their roles in their societies, and the medical, legal, philosophical, and religious texts that survive are frequently interpretations without clear indications of the evidence upon which they are based. These accounts must therefore be regarded with some skepticism, but at least a sketch of late medieval midwifery can be gleaned from them. There are several encyclopedic or etymological texts that attempted to define, at least in cursory terms, midwives and their duties. For example, John Trevisa’s 1398 translation of Bartholomeus Anglicus’ thirteenth-century encyclopedia says, “A midwif is a womman ṭat hath craft to helpe a womman ṭat trauaileþ of childe, ṭat sche bere and
bring forthe here childe with þe lasse woo and sorwe.” The passage continues, “sche fungiþ þe childe out of þe wombe, and knettiþ his nauel foure ynche long.”56 These are practical matters delineating the areas of expertise of the midwife; she must have craft and experience and must perform certain actions to aid the parturient woman and the unborn or newly born child. She must also attempt to alleviate “woo and sorwe” for the woman when she can. This midwife provides both emotional and physical support, but the definition does not refer to any learning she must have, other than her experience in the birthing chamber.

Another less learned text that defines a midwife is the early fifteenth century trilingual text *Femina*. This is a text designed to teach the pronunciation of French to English speakers, but it contains a number of errors in its translation.57 In a section on


57 *Femina* is a compilation of texts, including an inaccurate copy of Walter of Bibbesworth’s *Tretiz*, extracts from *Urbain le Courtois*, and some passages from Bozon’s *Proverbes de bon enseignement*. It has Latin phrases introducing the contents of the paragraphs, and contains moral as well as linguistic instruction. William Rothwell notes that the author’s Latin is good but his French is not particularly accurate. William Rothwell, ed., *Femina (Trinity College, Cambridge MS B.14.40)*, The Anglo-Norman On-Line Hub, accessed April 4, 2013, http://www.anglo-norman.net/texts/femina.pdf, ii-iii.
oxen, yoking, and ploughs, the author makes a brief aside to explain the term *ventrere*.

The text reads:

Ventere & ventrer il y ad. A mydwyff & a wombroke me haþ.

Divers sount com ffrauncheys dit me þey beth as frenssh me haþ seyd

ad divers.

Ventrere est proprement nomé Ventrere ys properlyche ynamed

Une femme qe en ville demurre A womman þat in toune dwellyþ

Pur aider en cas sa vecine, To helpe in cas here neyʒbore,

Qant ele girra en gesyne. Whanne she shal lygge in gesyne.58

This text describes midwives or ‘ventreres’ as women who help neighbors, without explicitly mentioning training or special status. This text is intended for linguistic instruction (and possibly also moral instruction) but not medical or theological instruction. This passage differentiates *ventrere* from *ventrer* rather than fully explaining what a midwife is, so the accuracy of the English content may not have been important. Texts such as this one, which is written without any details of a midwife’s duties, are the most common references to midwives; there are no known extant documents produced by practicing midwives from the late Middle Ages, and very few records of the details of their practice.

Ecclesiastical records indicate that midwives took part in purification ceremonies as well, from the twelfth century on.59 They would attend the purification or ‘churching’

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58 Rothwell, ed., *Femina*, 65-66. Rothwell also notes, “The ME ‘gesyne’ is a good illustration of the penetration of French into the lexis of English, especially from the fourteenth century.” Other English texts have “childing” or “childbedde.”
ceremony, wherein the post-partum woman participated in a ritual that reintegrated her into Church community, after which she was permitted to once again take the Eucharist.\textsuperscript{60} Midwives and the other birth attendants would gather together and accompany the woman to the church door, and some records indicate that there was a special pew reserved for the woman and her attendants in church after the ceremony at the church door had been completed.\textsuperscript{61} The birth attendants clearly had social and religious functions as well as medical ones.

Legal texts also illuminate thirteenth and fourteenth century practice, indicating that midwives and birth attendants had an important place in legal proceedings at times.\textsuperscript{62} Midwives were not, so far as records indicate, licensed during this time, but the women who had attended births were frequently called in to court.\textsuperscript{63} Caroline Bicks writes, “Interpretations and pronouncements of bodies were a critical part of the midwife’s many

\begin{footnotes}
\item[60] L’Estrange, \textit{Holy Motherhood}, Chapter 3.
\item[61] Lee, \textit{Women ben purifyid of her childeryn}, 5-26.
\end{footnotes}
duties: secular and ecclesiastical courts relied on her to search for the signs of pregnancy, virginity, impotence, rape, birth, and witchcraft.” 64 In all of Christian Europe, courts customarily called in “‘upright and mature women’ (honestae mulieres et veteranae) to do physical inspections in case of rape, pregnancy, and so forth.” 65 By the end of the Middle Ages, the midwife and the upright/honest woman became the same. The birth attendant’s “perceived closeness to the mother also led to her official role as a paternity testifier, the theory being that women under the duress of labor were more likely to speak freely and truthfully about their behavior and partners.” 66 Again, the details of midwifery are obscured in these texts, but hints can be gathered about their practice.

2. Superstition, Prayers, Charms, and Midwifery

Although court records indicate birth attendants were considered trustworthy witnesses, women’s medicine and midwifery were also frequently associated with the use of charms and superstition. A number of critics have pointed to the intersections of religion, magic, and medicine when it comes to midwifery and childbirth in the Middle Ages, though these connections are older than the Middle Ages. Plinius the Elder (23-79) wrote in his Natural History about a charm to shorten a woman’s labor: “If the man by whom a woman has conceived unties his girdle and puts it round her waist, and then unties it with the ritual formula: ‘I bound, and I too will unloose,’ then taking his

64 Bicks, Midwiving Subjects, 3.


66 Bicks, Midwiving Subjects, 3.
departure, child-birth is made more rapid.”⁶⁷ This description of a ritual to hasten childbirth is given without qualification or caution that it is anything but medical. One Anglo-Saxon charm called “For Childbirth” also advises what to do to hasten childbirth, including specific words to say over a dead man's grave for making the birth occur more quickly.⁶⁸

Later medieval charms may arise out of formulaic or repetitious treatments of Christian prayers. Carole Rawcliffe argues, “the late medieval Church’s own emphasis upon the formulaic repetition of ‘Aves’ and ‘Pater Nosters’ inevitably led to a blurring of boundaries, as prayers assumed the occult power of spells.”⁶⁹ Religious phrases were used to call for aid for laboring women and the fetus. Sue Niebrzydowski writes that “The opening of the Athanasian Creed (the *quicumque vult*) or the popular ‘O infant, whether living or dead, come forth because Christ calls you to the light’, was customarily recited, three times, at the bed of the woman in labor.”⁷⁰ Another charm frequently used was one that compared the parturient woman with holy and successful mothers:

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Mary, virgin, brought forth Christ; Elizabeth, sterile, brought forth John the Baptist. I adjure you, infant, whether you be masculine or feminine, by the Father and the Son and the Holy Spirit, that you awaken and move, and no longer do any injury or foolishness. Amen. The Lord, seeing the sisters of Lazarus weeping at the tomb, wept in the presence of the Jews and cried out: Lazarus come forth. And he came forth with hands and feet bound who had been four days dead.  

This charm might have been particularly useful for a woman fearing that the infant may already have died during childbirth, since it refers to the miraculous raising of Lazarus from the dead. It also identifies the parturient woman as parallel to scriptural women who successfully gave birth, suggesting that she could follow in their footsteps.  

Other texts have a more clearly superstitious bent, as they take religious formulae and mix them with nonsense words or say them in lists. These recipes or remedies are often found together with herbal ones, and “such charms combined Christian and pagan elements and often were written in a mixture of Latin and the vernacular.” For example,


in the *Knowing of Women’s Kind in Childing*, one set of instructions reads: “Tak a lytyll scrowe & wryt þys with-in: + In nomine Patris et Filij & Spiritus Sancti Amen + Sancta Maria + Sancta Margareta + ogor + sugor + nogo + and kyt þat scrob in-to small pecys & ʒiffe here to drynk. Or wrytt in a long scrow all þe psalme of Magnificat anima mea & girde hit a-boute here.”

Parts of this formula are from prayers in Latin, while other parts are meaningless. The English portions are the instructions, distinct from the formula itself.

The charms are usually accompanied by instructions, either at the beginning or at the end, for how to use them. The instructions vary but may include recitation, sometimes multiple times; placing a girdle or cloth with the charm on a parturient woman’s stomach; or writing the charm on something edible so that the woman could consume it. A fifteenth-century roll of Middle English prayers that may have been used as a birthing girdle, Glazier MS. 39, includes the following instructions: “And if a woman trawell of childe, take this crose and lay it one hyr wome and she shalbe hastely be delyuerede with

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76 A birthing girdle is the text of a prayer or charm written on parchment, often by a priest, and wrapped around a parturient woman in order to gain supernatural support in the delivery. Stephanie Lynn Volf suggests that the parchment itself enacted the prayer or charm, instead the priest who had written it, thus supplanting ecclesiastical authority. Stephanie Lynn Volf, *A ‘Medicyne of Wordes’: Women, Prayer, and Healing in Fourteenth- and Fifteenth-Century England* (PhD diss., Arizona State University, 2008), 278-285. For a more extensive consideration of textual amulets used by women, see Don C. Skemer, *Binding Words: Textual Amulets in the Middle Ages* (University Park, PA: Pennsylvania State University Press, 2006), 235-278.
joy wit-outen perell, the childe to haue Cristendom and the moder purificacion of Haly Kirke.”

The directions clearly indicate that a birth attendant is responsible for the actions involved. One charm, to be written on fruit and consumed by the laboring woman, is in London British Library MS Sloan 3564: “Escrivez en une poume, si li donez a manger: ‘De virga virgine ubi oritur radix Jesse. Anna peperit Mariam, Maria salvatorem. In nomine domini Jesu Cristi, infans, exi foras, sive sis masculus sive femina. Pater Noster et Ave Maria et Credo. In nomine Patris etc. Sicut vere credimus quod beata Maria peperit infantem, unum verum deum et hominem. Item et tu, ancilla Cristi, pare infantem. In nomine Patris etc.’”

This charm indicates that an attendant or family member is to write the charm on the piece of fruit and give it to the laboring woman to eat; the embodied message will then inspire the laboring body to follow the models of the holy women mentioned in their successful childbirths. The charms generally revolve around the body of the laboring woman and attempt to force it to comply.

Although the


79 Marianne Elsakkers writes, “On both the verbal and the performative level the prayer seems to be admonishing the woman’s body to be cooperative using magical and ritualistic gestures, actions, objects (amulets) and words to emphasize this.” Elsakkers, “In Pain You Shall Bear Children,” 199.
focus was on the parturient woman, she was not the only one doing the preparation or recitation of the prayer in most cases. The instructions usually make it clear that the person being addressed is a birth attendant or midwife, and that the people with the parturient women were expected to participate in the ritual or charm recitation. At the same time, these charms did not replace all of the birth attendants’ duties, and were generally performed only in the early stages of labor.

There is a range of university-educated authors who comment on midwife and birth superstitions, especially in the high and later Middle Ages. In some texts, the midwife’s supernatural potential is depicted without comment on its veracity. One passage, for example, in John Trevisa’s 1387 English translation of the mid-thirteenth-century chronicle Polychronicon by Ranulph Higden indicates that midwives may have been understood as having some mystical, astrological, or prophetic powers. The passage describes the birth of William the Conqueror: “In the tyme of hire childynge, William Conquerour, here son, towchynge the erthe, fyllede bothe his hondes of hit. wherefore the myddewife seide hit was a signe that he scholde be a noble kynge.” This passage does not indicate an authorial belief that the midwife does have such powers; however,

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81 Niebrzydowski, Bonoure and Buxom, 144.

82 Green, Making Women’s Medicine Masculine, 5.

William does become king, meaning that the midwife’s prophecy is correct and her prophetic abilities are implicitly confirmed.

Most religious texts do decry the superstition of birthing charms, however. The \textit{Fasciculus Morum}, a pastoral work of the fourteenth century, allows for the use of herbs and written prayers to aid sick people, but only “as long as nothing else of a superstitious character gets mixed in with it,”\textsuperscript{84} including the recitation of prayers over fruit. Similarly, the \textit{Summa de vitiiis} of William Peraldus explicitly condemns superstitious practices: “Likewise, when a woman is in labor and she is touched with nine utensils so she will deliver more easily. And many other things of this kind that women without discretion used to do.”\textsuperscript{85} In Peraldus’ text, these acts are linked to indiscretion, chastising the midwife or birth attendant who chooses to perform the acts as well as the woman who may have requested them.

3. “Alde Wifes Scheome Creft”: Midwifery and Shame

In addition to the language of superstition, women’s medicine was often referred to in terms of the secrets it held. The ‘secrets’ referred simultaneously to a number of things: female genitals, female sexuality, and the practices of the birthing chamber. This multiple meaning of the word ‘secret’ was thus entirely suitable for discussion of


women’s medicine, and ‘women’s secrets’ meant knowledge that could be kept secret from a larger audience by female practitioners’ oral or even textual transmission, as well as the subjects of their practice. Although women’s secrets originally referred to the entire experiential knowledge a female practitioner would have about the female body, the secrets were mentioned frequently in the medical and religious texts of the thirteenth and fourteenth centuries.

There was a genre of ‘secrets’ literature – texts written generally for men, which also purport to reveal the secrets of women’s medicine kept by communities of women. The most popular of these was probably the *De secretis mulierum*, a text on women’s medicine that was erroneously attributed to Albertus Magnus, a thirteenth-century philosopher. The text was probably written by one of his followers in the late thirteenth century instead, but it enjoyed a wide circulation in the later Middle Ages. De secretis mulierum covers two areas: gynecological medicine, and the things that women were thought to know about women’s bodies. Critics have disagreed on the purpose and audience of the text to some extent. Katharine Park argues that the medical portions are “the province of the learned male scholar,” while Helen Rodnite Lemay argues that its lack of medical knowledge makes it unlikely to have been a text used in the university. Nevertheless, they agree that it was not written for women or medical practitioners of any sort, as it contains little practical advice, and that its open treatment of gynecology

86 Park, *Secrets of Women*, 83.

87 Park, *Secrets of Women*, 84.

inspired other authors to ‘reveal’ women’s knowledge and women’s secrets in similar texts.

The tradition of regarding women’s health as “secret,” exemplified in the De secretis mulierum, arose in the twelfth century and continued throughout the twelfth and thirteenth centuries. The texts that identify women’s health as secret often contain “types of knowledge devised by and for men – to whom they promise the secrets of women will be revealed. The texts deal with questions relating to conception, embryology, the determination of the sex of a foetus, and the nature of menstruation, which, obsessively, they define as harmful.” These texts designate the secrets of women as the knowledge about female bodies that originates in university and scholarly study. A second meaning of the ‘secrets of women’ is the knowledge possessed by women about women, as well as its transmission, since that transmission probably occurred orally. The author of De secretis mulierum represented midwives and female birth attendants as having some knowledge about the birthing chamber, yet this knowledge is depicted as disconnected from rationality and natural philosophy. In this reading, the ‘secret’ of women is the specific, practical knowledge that midwives and other practitioners have of women’s bodies: their anatomies, their ailments, and their birth experiences. A third way to understand the ‘secret of women’ is as referring to women’s actual body parts, a use that became increasingly frequent in the later Middle Ages. These are “what the author of De

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90 Park, Secrets of Women, 88.
secretis mulierum called certain ‘hidden, secret things about the nature of women’ –
specifically, information relating to generation and the female genitals.”  

The language of secrets in medical and religious texts sometimes implies a larger
culture of shame regarding midwifery and childbirth. The introductions of medical texts
often referred to the secrets of women’s bodies being revealed, or, conversely, about the
necessity for medical texts to help women conceal their secrets from inappropriate eyes.
Sometimes the prologues or introductions of medical texts indicate their purposes, though
as Green and others have pointed out, the primary audience indicated by these
introductions is men. In one English translation of a gynecological text, the opening
states, “For as moche as ther bien many wynnmen that han many diuers maladies and
sikenessis nygh to the deth and they also bien shameful to shewen and to tellen their
grevaunces to any wight …” This suggests that shame is produced by a combination of
having an illness and discussing it with another person, and that women are particularly
ashamed to talk about their sicknesses with anyone, even medical experts. This could be
read as an encouragement for women to forget their shame enough to allow them to
speak to medical practitioners. Yet the passage also indicates it is meant for use by
women to help other women, and so to prevent the ‘shameful’ disclosure of disease to a

91 Park, Secrets of Women, 91.

92 Monica H. Green, “From ‘Diseases of Women’ to ‘Secrets of Women’: The
Transformation of Gynecological Literature in the Later Middle Ages,” Journal of

93 Monica H. Green and Linne Mooney, “The Sickness of Women,” in Sex, Aging, and
Death in a Medieval Medical Compendium: Trinity College Cambridge MS R.14.52, Its
Texts, Language, and Scribe, ed. M. Teresa Tavormina, 2 vols., II.455-568 (Tempe:
Arizona Center for Medieval and Renaissance Studies, 2006), II.465.
male physician, especially one who might be threatening: “And therfor in helpyng of wymmen I wil write of wymmen privy sikenes the helpyng of, that oo womman may help another in hir sikenes and nat discure hir privitees to suche vncurteys men.”94 Another version makes an impassioned plea specifically directed to women who might be reading the text: “And þerfor every womann reder vnto oþer þat can not so do and helpe hem and conceill theme in her maladis without schewyng her desses vnto mann.”95 At the same time, the texts themselves contain little evidence that they were intended for a midwife’s use in practice.96

As these introductions indicate, it was not secrecy for its own sake but the avoidance of shame that was important in the practice of women’s medicine.97 Women and their bodies were frequently associated with shame and inferiority in medieval thought. Suzannah Biernoff writes, “In the list of ‘inferior’ terms ‘woman’ is joined with (amongst others): body, matter, lust disorder, irrationality, immanence, sensation, emotion and passivity. The paired ‘dominant’ terms might include: man, mind or soul,


97 For a detailed discussion of the complex intersections of natural philosophy and morality regarding sexual matters, especially homosexuality, see Joan Cadden, “‘Nothing Natural is Shameful’: Vestiges of a Debate about Sex and Science in a Group of Late Medieval Manuscripts,” Speculum 71.1 (2001): 83, 89.
Midwifery as a whole was sometimes denigrated as a shameful practice, as in the late twelfth or early thirteenth century text *Hali Meidhad* that describes midwifery as “alde wifes scheome creft.” This text implies that there is shame in an expectant mother allowing another woman to see her genitalia or assist her in birth, though the text also grants that the presence of the midwife is necessary. Shame associated with midwifery may also have arisen from its perceived connection with immoral acts and substances, especially those related to contraception or abortion. For example, the fifteenth-century *Jacob’s Well* says that accursed are those who, “after þe chylde hath lyif in þe moderys wombe, malycyously dystroyen hem with drynkes, or oþer craftys …” The possibility of abortive potions or “drynke” was worrying enough to be included in a standard handbook for priests on moral topics. Abortion and contraception were intimately related to Christian philosophy regarding sexuality, and were generally condemned in non-medical texts, following Augustine’s prohibition of any sexual activity that was not intended to produce a child.

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Another element of childbirth that implied shame was the necessity for burial of unbaptized infants outside the churchyard and unpurified women outside the church. Mirk’s *Festial* states, “A womman þat dyeth in chyldyng schal not ben byred in chirch but in chirch-ʒarde, so þat þe schylde furste be takon ʒute of hure and byried ʒutewyth chirch-ʒorde.”¹⁰² Space was thus divided into three areas: inside the church, in the churchyard, and outside the churchyard. The unbaptized infant must be buried in unsanctified ground outside the churchyard, and the woman who died in childbirth was not holy enough for burial in the sanctified ground of the churchyard without the removal of the unbaptized infant. Even then, she was only eligible for burial in the churchyard, not the church itself. Did the contamination of the female body occur because of the unbaptized child she held in her womb? Or did it occur because of the inherent sexuality in a female body with a child gestating inside it? If it is the latter, it was consistent with the common practice of churching or purification, in which a woman had to wait a certain number of days before she participated in the churching ceremony, was cleansed, and was allowed to re-enter the church and receive the Eucharist.¹⁰³ The woman who was unchurchchd but at least cleansed of the unbaptized fetus was still allowed baptism in the sanctified ground of the churchyard. Pregnancy, birth, or both together tainted a woman so that she needed the ritual in order to be worthy of entering holy space and receiving the host again.


By the fifteenth century, however, the term ‘secret’ more specifically referred to the genitalia instead of the larger body of knowledge of gynecology. Katharine Park argues the language of women’s secrets breaks down at the end of the Middle Ages because “the phrase had acquired a salacious, nonscholarly tinge that worked against the dignity of the physician’s learning.”\(^{104}\) Additionally, women’s medicine was more openly discussed, so the language of women’s ‘secrets’ in reference to female sexuality and birth was no longer as applicable.

These shifts in terminology and meaning have implications for the authority women were granted and the ways their bodies were viewed. Park writes, “in this context, women increasingly became the objects of knowledge rather than knowers themselves.”\(^{105}\) Their bodies and conditions were depicted and analyzed through increasing numbers of texts written for a new audience of men: theologians and physicians who had no empiric experience with women’s bodies.\(^{106}\) At the same time, the language of secrets could be used to maintain some authority for women in relation to women’s medicine. Carmen Caballero-Navas argues that “women’s secret parts, and modesty as an argument for keeping them secret, becomes a strategy of resistance to the accessibility of women’s bodies by men. The secret, according to this interpretation, would preserve the ‘female spaces of relationship’ that women have historically

\(^{104}\) Park, *Secrets of Women*, 102.

\(^{105}\) Park, *Secrets of Women*, 81-82.

\(^{106}\) Park, *Secrets of Women*, 92.
established.” Birthing chambers remained female-dominated spaces even after men started practicing more obstetrical medicine, as we shall see.

4. Scholastic Medicine and Gynecology

It will be helpful here to offer an overview of scholastic and theoretical approaches to obstetrical medicine available in the high and later Middle Ages, in order to foreground their eventual influence on practiced obstetrical medicine. There were two major traditions that informed the university medical curricula: classical Greek medicine, and Arabic medicine, which often was itself based on Greek medicine. In addition, scholastic medicine developed new theories and texts in the high Middle Ages, especially in Salerno in the twelfth century. The combination of these theories led to large numbers of texts addressing conception and birth, and also to an interest in anatomical and philosophical writings about the female body. These theories were confronted by a new medical interest in empiricism, as well as a reluctant integration of practical and folk medicine, eventually setting the stage for male involvement in the birthing chamber.

There were several major writers on medicine in the classical world whose works were influential in the Middle Ages; the most widely copied were Hippocrates (470-360 BCE), Soranus of Ephesos (1st-2nd century CE), and Galen (129-c. 200 CE). These classical authors wrote texts that were often addressed to midwives and intended as manuals to help them practice, and they indicate that a high level of skill and knowledge was expected of midwives. Soranus of Ephesos’s Gynaecology, a second-century text

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108 Green, Making Women’s Medicine Masculine, 34.
that was widely circulated throughout the Middle Ages, recommends that midwives should have “long slim fingers and short nails,” but Soranus also mentions literacy, an excellent memory, intelligence, respectability, and an ability to keep secrets as qualities necessary to be a good midwife.\textsuperscript{109} Galen, too, addressed his \textit{De uteri dissectione}, an anatomical treatise on wombs, to a midwife.\textsuperscript{110} For these authors, then, midwifery was a skilled and learned profession, implying at least a moderate amount of prestige.\textsuperscript{111} Muscio’s fifth or sixth century abbreviated version of Soranus’s \textit{Gynaecology}, called \textit{Gynaecia} or \textit{Genecia}, was also popular throughout the Middle Ages.\textsuperscript{112} Muscio provided a series of \textit{in utero} images that were widely copied, often independently, in obstetrical and gynecological texts. In England, Anglo-Saxon medical works relied on these classical sources, and these remedies and Anglo-Saxon charms continued to be used throughout the Middle Ages. The texts of antiquity were common in the later Middle Ages, but the medieval versions were often abridged or modified. These translations of obstetrical medicine often omit large theoretical and even practical portions, and, as Monica H. Green argues, the language implies that they are about, instead of for, midwives. They are less likely than the original classical texts to directly address


\textsuperscript{110} Green, \textit{Making Women’s Medicine Masculine}, 34.

\textsuperscript{111} Lianne McTavish, \textit{Childbirth and the Display of Authority in Early Modern France} (Aldershot: Ashgate, 2005), 86.

\textsuperscript{112} There are thirteen extant complete or nearly complete copies of Muscio’s \textit{Genecia}. Ron Barkai, \textit{A History of Jewish Gynaecological Texts in the Middle Ages} (Leiden: Brill, 1998), 45.
practitioners, and unlike Soranus’s original text, they generally do not emphasize that midwives need to be literate.\textsuperscript{113}

The second tradition informing medieval university treatments of gynecology was derived from Arabic medicine. It is important to note that the medical content itself of these texts was not particularly new, as the Arabic medical tradition also arose out of the broader tradition of classical Greek medicine that Western medicine had retained through late antiquity and the early Middle Ages.\textsuperscript{114} In the eleventh century, there was a major shift in gynecological and obstetrical medicine, and indeed in all Western medicine, due partially to an influx of Arabic texts through Constantinus Africanus.\textsuperscript{115} Some of these texts were Arabic translations of Greek and Roman antique treatises, many of which were attributed, correctly or incorrectly, to Galen. These were often enriched by Latin translations of texts by Arabic writers, many of whom had greater access to Galen’s works than western writers had had.\textsuperscript{116} Other texts brought and translated by Constantinus Africanus contained Arabic theory and practice. Arabic medicine was influential in this new era, especially Avicenna’s \textit{Canon}, which had been translated by Gerard of Cremona (d. 1187) into Latin from Arabic.\textsuperscript{117} Although Arabic medicine was

\begin{thebibliography}{99}
\bibitem{113} Green, \textit{Making Women’s Medicine Masculine}, 34.

\bibitem{114} Harris Stoertz, “Suffering and Survival in Medieval English Childbirth,” 104.

\bibitem{115} Green, “Constantinus Africanus,” 47-51.

\bibitem{116} Siraisi adds that “it is probable that access to Galenic teaching was more frequently obtained via the brief treatises enthroned as the standard medical curriculum during the twelfth century, or through the mediation of Arabic authors, rather than through the study of such as Galen’s longer and more detailed treatises as were available in Latin.” Nancy G. Siraisi, \textit{Medicine and the Italian Universities 1250-1600} (Leiden: Brill, 2001), 24.

\bibitem{117} Siraisi, \textit{Medicine and the Italian Universities 1250-1600}, 25.
\end{thebibliography}
influential in university training, some critics have challenged the idea of a massive
derivative of classical medicine through Arabic sources back into Western Europe.\textsuperscript{118} Even if the material was not entirely unknown, the new texts from the Arabic and Graeco-Roman traditions included more complexity and detail, and took several generations to be translated and integrated into existing Western medicine.\textsuperscript{119}

University medical studies combined classical medicine as it had existed in the West with the newly translated Arabic medicine and the Arabic interpretations of classical medicine as part of its curriculum. The university system arose in the eleventh and twelfth centuries out of the cathedral schools and the integration of the new scientific, philosophical, and medical material in a number of areas from both Arabic and Greek; in this new system, medicine became one of the areas of study, and philosophical principles became entwined with medical and anatomical ones.\textsuperscript{120} A major part of the new philosophical material was the writings of Aristotle, especially the \textit{libri naturales}. These provided large and in-depth explorations of the natural world and a more comprehensive picture than the shorter treatises that survived of Hippocrates and Galen. Nancy Siraisi writes, “Medical learning was always distinct from, but also related to, other aspects of the scientific and, indeed, the philosophical thought of the period; it is advisable, therefore, to be aware of the probability of parallels and cross-currents

\textsuperscript{118} Siraisi, \textit{Medicine and the Italian Universities 1250-1600}, 24; and Harris Stoertz, “Suffering and Survival in Medieval English Childbirth,” 104.

\textsuperscript{119} Siraisi, \textit{Medieval and Early Renaissance Medicine}, 15.

\textsuperscript{120} Green, \textit{Making Women’s Medicine Masculine}, 4.
between developments in medical thought and in natural philosophy.”¹²¹ A number of fields, including medicine, incorporated holistic Aristotelian systems into their curricula, tying natural philosophy to theology, medicine, and other fields.¹²²

By the late thirteenth century medicine became even more clearly codified and structured as a discipline taught in the university, instead of through apprenticeship and oral transmission. This trend was intensified by the establishment of faculties in medicine, as well as collections of instructional texts in Latin for use in the university;¹²³ the development of a group of practitioners who were formally trained was accompanied by a proliferation of medical texts aimed at a more general audience of Latin-readers.¹²⁴ Throughout the thirteenth and fourteenth centuries, the intellectual community in the universities, including learned physicians, set about the task of analyzing the newly-available medical texts that had arrived through Constantinus Africanus, and assimilating them into the existing material to form a more cohesive and holistic view of medicine and natural philosophy. Generation was of interest both within the university medical curricula and, increasingly, in theological writings, as scholars examined ideas of


¹²³ Monica H. Green identifies Salerno, Bologna, Paris, Padua, and Montpellier as regions where medicine was integrated into philosophical traditions in the late eleventh century and on. She adds, “University training of surgeons is documented only at Montpellier and certain northern Italian universities.” Green, *Making Women’s Medicine Masculine*, 4-5.

conception, generation, and procreation. One of the most influential writers was Albertus Magnus, a thirteenth-century natural philosopher who wrote a number of works on anatomy that drew from Aristotle’s *libri naturales* and other classical and Arabic medical texts, sometimes pointing out differences as well as similarities. Many medical writers cited Albertus in their work: “Thus various medical authors of the later thirteenth and fourteenth centuries, who were normally reluctant to cite by name in their works recent Latin scholars in disciplines other than medicine, made an exception for Albert[us].” His name therefore became a stand-in for authoritative medical knowledge, which might be one reason the *De secretis mulierum* was attributed to him.

As scholars such as Albertus Magnus began to point out, the classical authorities did not always agree with each other. It was during the thirteenth century, when many of Aristotle’s works had been translated into Latin, that the differences between Aristotelian and Galenic medicine became a subject of discussion and debate. The most important difference in gynecology was in explanations for the process of conception. Aristotle held the one-seed theory, where the male provided the major shaping influence in conception through the contribution of his seed, while the female provided the raw material that was to be shaped. Galen held the two-seed theory, where each parent contributed seeds to

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125 Nancy Siraisi notes that “By the beginning of the fourteenth century, learned physicians … had developed a focus on differences between ancient authorities (and inconsistencies within them) that drew attention not only to problems of some importance in themselves, but also to the existence of discrepancies within the body of ancient scientific learning.” Siraisi, *Medicine and the Italian Universities 1250-1600*, 155.


127 See above, 40.

determine the nature of the child. These theories were frequently discussed in commentaries, as they had implications for paternity, responsibility for infertility and disability, and the need for female orgasm in conception. The discovery and analysis of these discrepancies is one factor leading to a proliferation of texts on human conception through the universities or by university-trained scholars.

Many other university texts survive that touch on issues of women’s health in theoretical frameworks, especially relating to theories of conception. These texts were originally long and comprehensive texts on natural philosophy and anatomy with short sections on gynecology and obstetrical medicine. Sexuality and generation, originally treated in philosophical instead of medical portions of these encyclopedic works, gradually became linked with the gynecological and obstetrical material in the thirteenth and fourteenth centuries. Katherine Park writes:

The permeation of literature on women’s medicine by an intense preoccupation with generation had significant ramifications. Not only were women and their medical needs increasingly defined primarily or exclusively in relation to their reproductive organs and functions – which had not been the case in earlier writing on women’s illnesses – but the topics of sexuality and generation were also couched in terms shaped by Aristotelian natural philosophy and Christian theology, both of which had strong antifeminist elements.129

Gynecological and obstetrical advice became used by, and even aimed toward, a more general Latin-reading audience interested in the moral and philosophical implications of

129 Park, Secrets of Women. 93.
aspects of women’s medicine.\textsuperscript{130} Indeed, sometimes gynecological and obstetrical material, which had formerly been contained in comprehensive texts on women’s medicine, were separated and the obstetrical material became linked with considerations of human sexuality and procreation.

In the universities there was also a rise in medical works depicting or discussing womb anatomy and fetus positioning. In medical and anatomical texts, the male body was most often depicted as the normative – analysis and representations of the female body focus on the womb and female reproductive system.\textsuperscript{131} Although this had the effect of reducing the female body to the reproductive organs, Katharine Park argues that this was not an entirely derogatory view: “representations of the female body came to stand both for the interior of the human body and for the powers of dissection-based anatomy to reveal its hidden truths. At the same time, however, the uterus retained its specific identity as the enigmatic space where both life and knowledge began and within which the male seed was mysteriously transmuted into a human child.”\textsuperscript{132} Even when university and medical texts discuss childbirth, they rarely address normal, uncomplicated birth processes as known or knowable occasions. They instead are anxious about the womb as an unknowable, mysterious, and potentially dangerous organ of contamination.


\textsuperscript{131} Park, \textit{Secrets of Women}, 26-27.

\textsuperscript{132} Park, \textit{Secrets of Women}, 33-35.
By the fourteenth and fifteenth centuries, a number of these theoretical texts were available in England, usually in Latin, but sometimes in English translations. Monica H. Green and Linne Mooney write, “The juxtaposition of such texts as the pseudo-Galenic *De spermate*, Constantine the African’s *De coitu*, and tracts on the elements and astrology alongside seemingly ‘practical’ gynecology had, in fact, become quite common throughout Europe by the fifteenth century.” Fiona Harris Stoertz adds, “Substantial texts devoted to women’s health problems were adapted, translated, and written in the High and Late Middle Ages, appearing in England with compendia or on their own. Some included suggestions for problems ignored by early medieval texts … in addition to many of the standard herbal or medical remedies.” Based on book records and extant manuscripts, the *Sekenesse of Wymmen* was the most common gynecological text in late medieval England.

It is based on Gilbertus Anglicus’s *Compendium* (c. 1240), which was itself translated into English as well. There are two versions of the *Sekenesse of Wymmen*. *Sekenesse 1* exists in twelve copies, making it the most common extant obstetrical text in late medieval England. *Sekenesse 1* includes fifteen of Gilbertus’s

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133 For example, Avicenna’s *Canon* was used in university curricula throughout the Middle Ages and into the sixteenth century, and was also used by practitioners outside of the university. Siraisi, *Medicine and the Italian Universities 1250-1600*, 25, 63. Monica H. Green argues that nearly all of the major gynecological works produced on the Continent in the high Middle Ages made their way to England in the subsequent centuries. Monica H. Green, “Making Motherhood in Medieval England: The Evidence from Medicine,” in *Motherhood, Religion, and Society in Medieval Europe, 400-1400: Essays Presented to Henrietta Leyser*, eds. Conrad Leyser and Lesley Smith, 173-204 (Burlington, VT: Ashgate, 2011), 175, 181, 190-191.


135 Harris Stoertz, “Suffering and Survival in Medieval English Childbirth,” 104.

twenty-two chapters on women’s diseases and circulated widely in England throughout the fifteenth century, either with the English *Compendium* or by itself. Sekenesse 2 exists in four manuscripts and was “rearranged and amplified” from Sekenesse 1 and from the English *Compendium* of Gilbertus in the middle of the fifteenth century. These texts appear to be addressed to men, as they do not contain second-person addresses or instructions, and they tell the reader to instruct the midwife or ‘a prevy womman’ instead of addressing these women directly. They also contain Latin/English code-switching and references to Avicenna, Bernard de Gordon, and Rhazes, implying a scholastic audience.

The large numbers of surviving theoretical and Latin texts on conception and procreation, and their spread throughout medieval Europe, support the idea that scholars were fascinated with the subject. The prominence of these areas in scholastic inquiry provided a complex mechanism by which men could both produce and consume texts about women’s medicine through the rhetoric of secrecy. At the same time, that very secrecy was superseded through the proliferation of texts and the wide-ranging theoretical knowledge about female bodies and generation.

5. Trota of Salerno and the Integration of Scholastic and Practiced Medicine

In addition to this theoretical interest in female bodies and their integration with natural philosophy, another factor leading to the burgeoning medical concentration on conception and procreation was the inclusion of some practical medicine in medical texts.


The distinctions and hierarchies between theoretical and practical obstetrical medicine were generally highlighted in texts by clerics, and we have more surviving evidence regarding obstetrical and gynecological theory than evidence about birthing practices. Yet there are some texts that do mention experienced-based knowledge. For example, there is an important collection of gynecological texts created in twelfth-century Salerno that was informed by the practiced medicine in the area. The first known reference to the medical school at Salerno was in 924,\textsuperscript{139} and within the next several centuries, the Arabic medical texts and re-discovered Roman and Greek texts merged with local obstetrical and gynecological traditions in southern Italy to produce a distinct Salernitan medical tradition. This tradition is best known through the so-called Trotula texts, created in the late twelfth century and possibly associated with the University of Salerno.\textsuperscript{140} These are a set of three texts, attributed to a woman named Trota or Trotula of Salerno, that were widely known and copied, and the name Trotula became synonymous with gynecological medicine for centuries throughout Europe.\textsuperscript{141} The texts are the \textit{Conditions of Women}, the \textit{Treatments of Women}, and \textit{Women’s Cosmetics}. Monica H. Green has demonstrated that only the \textit{Treatments of Women} can be attributed to Trota of Salerno, who was a medical


\textsuperscript{140} Monica H. Green, ed. and trans., \textit{The Trotula: A Medieval Compendium of Women’s Medicine} (Philadelphia: University of Pennsylania Press, 2001); and Caballero-Navas, \textit{The ‘Book of Women’s Love’}, 81.

practitioner, but all three texts were grouped together and circulated under the name of Trotula.¹⁴²

A large number of the gynecological and obstetrical texts present in late medieval England were derived from the Trotula texts. Monica H. Green writes, “more than three dozen of the 118 extant Latin Trotula manuscripts were copied in England,” and there are “at least five independent versions” of The Conditions of Women and The Treatments of Women in English.¹⁴³ The translations include Trotula A, also called the Knowing of Woman’s Kind in Childing, contained in five manuscripts; the Trotula B or Liber Trotuli, which claims to be written by Galen and Hippocrates and of which only one copy is known; the Trotula C or “Boke Mad [by] a Woman Named Rota,” contained in two manuscripts; the Trotula D or Secreta mulierum, contained in three manuscripts; and Trotula E, a fragmentary text only contained in one manuscript. Knowing of Woman’s Kind in Childing was written in the late fourteenth or early fifteenth century, and is a combination of an Old French version of one of the so-called Trotula texts, the Liber de sinthomatibus mulierum, and several other Latin texts with additional gynecological and obstetrical information.¹⁴⁴ A number of the Trotula texts re-attribute themselves to more authoritative (male) sources like Galen and Hippocrates, though some maintain the name

¹⁴² Green, Making Women’s Medicine Masculine, 48-57, 60.

¹⁴³ For details of these manuscripts, see Green, “Obstetrical and Gynaecological Texts in Middle English,” 64, 68-71.

¹⁴⁴ Barratt, The Knowing of Woman’s Kind in Childing, 1.
Trotula as a female author.\textsuperscript{145} None of these contains clear evidence of female readership or direct use by midwives, however.\textsuperscript{146}

Although the medical studies and writings during this time reflect great interest and engagement with medical theory, one result of the influx of medical writings was delineation between the scholastic medicine of university scholars and physicians, and the practical medicine of surgeons, barber-surgeons, barbers, and other practitioners. Robert Gottfried writes that scholastic medicine relied almost exclusively on logic and authority, without direct observation or anatomical evidence for any of the claims or premises.\textsuperscript{147} The medicine present in the university curricula was wide-ranging in its scope but was not generally informed by empirical study. There was a clear distinction between scholastic medicine, generally physicians writing theoretical treatises in the universities, and the medicine of practitioners like surgeons, barbers, and non-professionals, including midwives and birth attendants. Gottfried writes that this separation was “reinforced by two social theories: trifunctionalism and the blood taboo. Trifunctionalism, which became popular about the same time as the new texts appeared, posited an authoritarian, highly structured, and stable society. Its first class, which was constituted by thinkers, included the university-educated physicians. The third class, the

\textsuperscript{145} Both Knowing of Woman’s Kind and Sekenesse 2 include a large amount of obstetrical material from Muscio’s Genecia. Green and Mooney, “The Sickness of Women,” 463.

\textsuperscript{146} James Weldon argues that the anonymous mid-fifteenth century anthology Biblioteca Nazionale, Naples, MS XIII.B.29 is among the first texts containing obstetrical recipes with clear evidence of being targeted towards a female audience. James Weldon, “The Naples Manuscript and the Case for a Female Readership,” Neophilologus 93.4 (2009): 703-722.

workers, included all other practitioners, even surgeons.\textsuperscript{148} The blood taboo, the second social theory Gottfried proposes to explain separation between scholastic and practical medicine, arose from the idea that blood was a pollutant. Helen Rodnite Lemay writes, “Scientific medicine came to bolster the popular notion that menstrual blood is harmful: the substance was believed to cause grass to die, iron to rust, dogs to become rabid, and people to become ill.”\textsuperscript{149} Menstrual blood was considered particularly polluting, but there was a stigma about any practitioner who dealt with blood, not just midwives or those who deal with menstruation: “Thus butchers, executioners, barbers, and even surgeons were burdened not just with being craftsmen, but of being tainted craftsmen to boot.”\textsuperscript{150} Practical medicine was therefore low in the medical hierarchy, and women’s medicine even lower.

Although scholastic and practical medicine were carefully delineated in the writings of some university physicians, the legal texts indicate a respect for midwives and their practices and characters that occasionally is reflected in the scholastic medical texts of the time as well. Many texts written by physicians mention midwives and folk medicine.\textsuperscript{151} Some of these are derogatory; for example, Katharine Park writes that “[A] surgical scholar, Bruno of Longobucco, identified (Latin) literacy as a minimum requirement for practice and lamented that ‘vile and presumptuous women have usurped

\textsuperscript{148} Gottfried, \textit{Doctors and Medicine in Medieval England, 1340-1530}, 54.

\textsuperscript{149} Lemay, “Women and the Literature of Obstetrics and Gynecology,” 196.

\textsuperscript{150} Gottfried, \textit{Doctors and Medicine in Medieval England, 1340-1530}, 55.

and abused this art [of healing], since, although they treat [patients], … they possess neither art nor wit.”

Yet other scholarly texts incorporate folk medicine or mention it more positively. William of Saliceto (d. before 1286) studied medicine just before a formal medical faculty was established at Bologna, and wrote Surgery (c. 1268 and 1275) and Summa on the Preservation [of Health] and Healing, a physic textbook. In both of these, he wrote that the experienced-based knowledge of practicing women was not necessarily true and that it needed verification by physicians, but he also “acknowledged that they [the women] could be a useful source of information; for example, he noted that some things concerning generation and birth – specifically, the structure of the placenta and umbilical cord – could be known only through the reports of midwives.”

Although his remarks are ambivalent, he admits the value of sensory knowledge that can only be obtained by midwives and other female assistants. He explicitly mentions that his knowledge is “verified by anatomy [probably a reference to animal dissection], by the reports of midwives, and by women with children and those who have experienced many births and miscarriages. And without miscarriages, it seems to me that they [births] cannot be verified in any other way by the physician.”

William’s words clearly

152 “Sunt [surgeons] etiam viri litterati, aut ab eo qui novit litteras ad minus artem adiscant, vix enim aliquem absque litteris hanc artem comprehendere puto, sed tempore presente nedum ydiote. Immo quod indecentius et horribilius iudicatur, viles femine et presumptuose artem hanc usurpaverunt et abutuntur ea, quia licet curant, ut refert Almansor, nec artem nec ingenium habent.” Park, Secrets of Women, 85, 297 n. 24.

153 Park, Secrets of Women, 86.

154 “Hec autem narrationes de panniculis et umbilico et generatione cordis et epatis et cerebri ex cvesicis dictis superius et superfluitatibus que retinentur cum fetu usque ad horam fetus phisque sunt, et verificate per anothomiam et narrationem obstetricum et mulierum filiantium, et que partus multos suis temporibus sustinuerint cum aborsu, et absque aborsu michi non videtur quod ista per medicum modis aliis possint verificari.”
indicate a separation between male theoretical and anatomical knowledge and female
experiential knowledge, but they recognize a purpose for both.

Similarly, the Frenchman Guy de Chauliac (c. 1300-1368) gave obstetrical recipes
and procedures but indicated that women should handle the births themselves. When
describing what to do in certain difficult cases, Guy de Chauliac addresses the midwives
directly in phrases that are repeated in a fifteenth-century English translation of his
Chirurgia magna (1363): “Neþerlez mydwifez ar to be warred …”¹⁵⁵ His obstetrical
advice seems to be written for midwives, female attendants, or those who teach them, not
for men who might themselves physically practice in the birthing chamber. Helen
Rodnite Lemay writes,

We see, then, that medieval obstetrics and gynecology are not a simple story of
learned doctors versus ignorant midwives, the one passing on Galenic and
Aristotelian notions from above, the other monopolizing supernatural forces;
rather, magic had a wide-ranging influence in medieval women’s medicine.
Respected medical authorities unconsciously adopted folkloric remedies in their
prescriptions, setting them within a humeral context and thereby providing them
with a scientific justification. In manuscripts composed by less exalted medieval
physicians, we find more overt examples of superstitious cures, which are drawn

¹⁵⁵ Margaret S. Ogden, ed., The Cyrurgie of Guy de Chauliac (London: Oxford
University Press, 1971), 530. See also Harris Stoertz, “Suffering and Survival in
Medieval English Childbirth,” 110.
from the woman’s culture and juxtaposed with citations from Galen and Avicenna.\textsuperscript{156}

Although there was attempted demarcation between scholastic and practical medicine in many of the texts written in the universities or by scholars, medieval obstetrical texts have a stubborn vagueness in the distinction between theoretical and folk remedies. As Dallas G. Denery II argues, “university scholars, for all their specialized training, were still members of their society, shaped by its expectations and participants in its practices.”\textsuperscript{157} A second reason for this overlap lies in standards of propriety; both male practitioners and female patients might not have wanted to risk their reputation through contact over such intimate medicine. This led to coordination between male physicians and female midwives or other assistants, who performed examinations and some procedures at the instruction of the physicians.\textsuperscript{158} Elizabeth L’Estrange therefore notes that “textual and oral sources, physicians and midwives, were not always as polarised as some scholarship has claimed.”\textsuperscript{159}

\textsuperscript{156} Lemay, “Women and the Literature of Obstetrics and Gynecology,” 201.

\textsuperscript{157} Dallas G. Denery II, Seeing and Being Seen in the Later Medieval World: Optics, Theology and Religious Life (Cambridge: Cambridge University Press, 2005), 120.

\textsuperscript{158} Green, “Medicine and Medieval Women,” 651. There are records indicating that husbands, too, sometimes instructed or communicated with those within the chamber. For example, in 1404, a husband instructed a midwife to check for the heartbeat of his wife in the birthing chamber, but did not enter the chamber himself. R. C. Finucane, *The Rescue of the Innocents: Endangered Children in Medieval Miracles* (New York: St. Martin’s Press, 1997), 31.

Throughout the latter part of the Middle Ages, these major shifts in the treatment of gynecological medicine in medical and university texts, and the inclusion of practical medicine, changed the landscape of obstetrics and midwifery. Because of the proliferation of theoretical texts, physicians and even philosophers considered themselves well informed despite, sometimes, a lack of experience with actual childbirth. Their new attention to the theories of birth led to claims to reveal the ‘secrets’ of women’s medicine, and at the very least, created a culture where birth was no longer only a woman’s realm.

6. The Importance of Baptism in Midwifery

It is during this period of simultaneous separation and overlap of theoretical and practical medicine that pastoral and other religious texts begin to engage with obstetrical details. In the early Middle Ages, there was no unified religious treatment of procreation and women’s medicine, though procreation and sexuality were addressed in penitential manuals to some extent.\textsuperscript{160} As the university system codified medical (and other) education during the thirteenth and fourteenth centuries, there was more clarity in the relationship between medicine and religion. The Council of Rheims in 1131 officially forbade clergy to practice medicine, but the Church continued to work with the medical schools.\textsuperscript{161} Additionally, the Fourth Lateran Council of 1215 placed heavy emphasis on the sacrament of baptism, insisting that it be performed correctly. Previously, canon law

\textsuperscript{160}Green, “Constantinus Africanus and the Conflict Between Religion and Science,” 51.

\textsuperscript{161}Nancy Nenno writes, “The collaboration of the Church leadership with the new medical institutions suggests not only the attempt to consolidate the power of the new medical establishment and its ability to regulate the practice of medicine. It also indicates a desire to clarify the distinctions between magical and medical practices.” Nenno, “Between Magic and Medicine,” 57-58.
allowed anyone, including laypeople, to baptize an infant in case of emergency.\textsuperscript{162} From the thirteenth century, the desire to ensure correct infant baptisms led to priests instructing the laity, including those who might attend births, in the baptismal formula.\textsuperscript{163} There were a number of Church councils during the thirteenth century and after that regulated birth attendants and gave instructions for their duties of baptizing, including those of Canterbury in 1236, Rouen in 1278, and Trêves in 1310.\textsuperscript{164} For example, the Council of Canterbury in 1236 instructed birth attendants to prepare water in case they needed to baptize the child in an emergency.\textsuperscript{165} Thomas of Cantimpré, a thirteenth-century theologian and natural philosopher, “demanded that midwives be trained by priests to perform the rite.”\textsuperscript{166} He asked “those with care of souls” to call together “some more discerning midwives, and train them in secret, and others may be trained by

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\textsuperscript{162} Ginger L. Smoak, “Midwives as Agents of Social Control: Ecclesiastical and Municipal Regulation of Midwifery in the Late Middle Ages,” Quidditas 33 (2012): 81. Even in non-emergency baptisms, which took place in church, the midwife was sometimes involved in the procession to the church. Katherine L. French, The Good Women of the Parish: Gender and Religion after the Black Death (Philadelphia: University of Pennsylvania Press, 2008), 60.

\textsuperscript{163} Green, “Medicine and Medieval Women,” 648.

\textsuperscript{164} Blumenfeld-Kosinski, 102; and Caley McCarthy, “Midwives, Medicine, and the Reproductive Female Body in Manosque, 1289-1500” (MA Thesis, University of Waterloo, 2011), 83.


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them." Not long afterward, the 1311 Paris Synod required priests to instruct parishioners in their baptismal duties, and added that “on account of this there should be in every vill skilled midwives sworn to perform emergency baptism.” These moves indicate anxiety about the proper practice of baptism, including recitation of the correct formula. Green writes, “Beginning in the early fourteenth century … midwives were singled out for special instruction and came under the scrutiny of ecclesiastical synods, bishops, and local parish priests.” Due to Church emphasis on the significance of baptism, lay education became especially important.

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169 Ginger Smoak writes, “While the Church officially condemned certain birthing and healing practices, such as the use of charms, incantations and what could be construed as *maleficium*, it unofficially condoned midwives if they acted correctly as religious agents.” Smoak, “Midwives as Agents of Social Control,” 81.

170 Green, *Making Women’s Medicine Masculine*, 137.
Several pastoral texts in England directly address birth and midwifery, including *Handlyng Synne* (1305) by Robert Mannyng, John Mirk’s *Instructions for Parish Priests* (late fourteenth century), John Mirk’s *Festial* (c. 1400), and the anonymous *Jacob’s Well* (c. 1400). Culpability for medical and sacramental errors could be associated with anyone in the birthing chamber. *Jacob’s Well* contains a passage that assigns blame and even sin to those ignorant of correct procedure in the birthing chamber. In the section on the vice of recklessness, the author includes, “whanne þe moderys or þe chyldren in chylde-byrthe perysschyn for defawte of kepyng & of kunnyng; and whanne a womman wyth chylde is recheless, &, throug here recheles gouernauns, þe chyld perysscheth.” This brief passage demonstrates that there were moral issues related to correct birthing procedures. Even further, it was considered sin to have a “defawte of kepyng & of kunnyng” when helping in a childbirth; all persons present, excepting the infant, were thus held accountable for any potential problems. The text implies that medical ignorance on the part of birth attendants might lead to moral culpability in the case of infant or maternal death. Additionally, the mother herself was accountable for any reckless acts while she was pregnant; her body was not necessarily entirely her own, as she could only do things that would not endanger the fetus. The entire birthing chamber was therefore implicated in any moral wrongdoing, according to the author of the text.

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172 Brandeis, ed., *Jacob’s Well*, 35.

Although the author of *Jacob’s Well* emphasizes physical well-being of mother and child, most of the texts are concerned more with spiritual well-being. The most important spiritual aspect of birth that appears in these pastoral texts is that of baptism. The passages on baptism sometimes explicitly comment on the practices of midwives, though the authors almost certainly had no direct knowledge of the birthing chamber. Midwives participated directly in some important elements of religious rituals. They washed the baby and tied the umbilical cord, which was considered important preparation for baptism, and, if the baby’s life was in danger, they themselves pronounced the baptismal formula.¹⁷⁴

The infamous trial of Walter Brut for heresy before the Bishop of Hereford in 1391-1393 sheds light on contemporary opinions of midwives’ authority to baptize in the fourteenth century. Brut used midwives’ authority to baptize as part of his argument that women could perform priestly duties.¹⁷⁵ The record that remains of the trial is a


collection of summaries, instead of a transcript of Brut’s actual words. The collection

gives this account:

After these things thus discussed, he inferreth consequently upon the same, an
other briefe tractation of wemen and lay men, whether in defecte of the other, they
may exercise the action of prayer, and ministration of Sacraments belonging to
priestes: wherein he declareth the vse receaued in the Popes churche, for women to
baptise, which, saith he, cannot be wythout remission of sins. wherfore seinge that
wemen haue power by the Pope to remitte sinne, and to baptise, why may they not
aswell bee admitted to minister the Lordes supper, in like case of necessitie?
Wherin also he maketh relation of Pope Iohn. 8. a woman Pope, mouing certaine
questions of her.176

Brut’s general arguments for female priests were rebutted by a number of theologians
during the trial, but midwives’ ability to baptize was not challenged.177 Although Walter
Brut was wholly condemned for his views, the inclusion of this issue in the records of
Brut’s trial indicates a cultural anxiety over female administration of the sacraments,
especially during the life and death situations that so often occurred in childbirth.

Robert Mannyng of Brunne’s Handlyng Synne (1303) contains instructions on the
correct words of the baptismal formula so that everyone who might be present at a birth

consists of trial records that were copied and translated by John Foxe in 1570 from a
collection of sources including bishops’ registers.

177 Blamires and Marx, “Women Not to Preach,” 34-63.

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would be able to correctly baptize. He explicitly states that ignorance would not be an excuse:

Loke also ʒyf þou euer ware

Yn place þer wymmen chyldren bare.

ʒyf þou sawe hyt yn perel of ded,

And þou ne coudest do bote ne red,

Ne seye wrd, ne helpe at nede,

So þat hyt to þe deþ ʒede,

Þou shalt þarfore perel haue:

Vncunynge shal þe nat saue.178

His address is intended for those who might find themselves in the birthing chamber, implying an audience of women. Although the author is unlikely to have attended births himself, his address to those who might is didactic; his knowledge of the spiritual perils of childbirth outweighs any knowledge his female audience might have through their own bodies, their own experiences, or their own oral transmission of childbirth traditions. The ‘women’s secrets’ are no longer secrets kept from outsiders like male religious; instead it is those male religious who are informing women of their obligations in the birthing chamber. Indeed, Robert Mannyng criticizes women especially for their potential failure of knowledge and says that a plea of ignorance will not suffice; he emphasizes that those who practice are obligated to acquire the most important knowledge, that of correct baptism. The focus of authors like Mannyng is the souls of the mother and child, and fear of not attaining salvation eclipses any fear of death. The ‘shame’ of childbirth expands to

178 Robert Mannyng of Brunne, Handlyng Synne, 239-240, ll. 9591-9612.
encompass the potential failures of birth attendant in spiritual duties as well as those relating to female bodies.

Mannyng attempts to impart this knowledge to anyone who might find herself (or himself) at the birthing chamber, yet he also adds a cautionary *exemplum* about a fallible midwife designed to drive the point home:

> Y shal ʒow telle of a mydwyff
> ṭat loste a chylde boþe soule & lyff.
> He told hyt yn hys sermoun
> And ʒaf heſe ofte hys malysoun.
> ṭys mydwyff ʒan ʒe chyld was bore,
> She held hyt on here lappe byfore,
> And when she sagh ʒat hyt shuld dye,
> She bygan loude for to crye,
> And seyde, “god & seynt Ioun,
> Crysene ʒe chylde boþe flesshe & bone.”
> ṭys mydwyff noght elles seyde
> And yn ʒe cherche ʒerd ʒeʃe ſld h̆te ſaue leyde
> As a nouþer chylde shulde ha þe
> ṭat had receyued þe solempste.
> þe preste asked þe mydwyff
> ʒyʃ hyt were crystened when hyt had lyff,
> And who hyt crystened & on what manere,
> And what was seyd þat any myght heere.
This midwife is well-intentioned but ignorant, and her failure to correctly memorize the baptismal formula costs the child its soul. It is not only her own reputation and spiritual health at stake, therefore, but also that of her patients. This narrative supports Mannyng’s criticism of practitioners and alerts his audience to midwives’ ignorance. Even though she is willing, this midwife is unable to retain the correct formula in memory; she has come a long way from Soranus’s well-educated, literate, and highly-skilled midwife of the second century.

John Mirk’s *Instructions for Parish Priests* (c. 1400), quoted at the beginning of this chapter, takes Mannyng’s instructions for midwives even further through the

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inclusion of specific detail about the midwife’s physical actions as well as her religious ones. He writes that the priest should teach the midwife:

Thenne bydde hyre spare for no shame,
To folowe the chylde there at hame,
And thaghe þe chylde bote half be bore
Hed and neck and no more,
Bydde hyre spare, neuer þe later,
To crystene hyt and caste on water;
And but scho mowe se þe hede,
Loke scho folowe hyt for no [d]red;

The midwife is instructed in the specific positions and kinds of touch she must achieve in order to ensure correct baptism takes place. Shame is discredited as a reason not to touch the parturient woman’s genitalia or the half-born child; while Mirk may suggest that the midwife might feel shame in what she does as a practitioner, he does not grant that shame any weight. This passage touches on the issues of moral obligation that accompany the delivery of a child, but it also emphasizes that moral obligation must override the shame inherent in women’s medicine, laboring bodies, and midwifery. The shame of both female genitalia and the practice and knowledge of women’s medicine are thus superseded by the urgency of the spiritual needs of the mother and child. Indeed, the secrecy of obstetrics is no longer present when John Mirk includes such explicit details about the birthing process in a book intended for male religious.

These pastoral texts function both to bring women’s bodies and childbirth practices to light in texts intended for wide dissemination to the laity, and also to devalue
the experience-based knowledge of mothers and midwives through the influx of male religious instruction.\footnote{Katharine Park argues that the Church’s emphasis on baptism changed lay attitudes and practices by the end of the thirteenth century, as demonstrated by surviving texts, burial records, and other records. See Park, “Birth and Death,” 17-41.} Midwives were relegated to the receiving end of pastoral, theological, and even medical instruction from parish priests, instead of holding authority over their own practice and their own exclusively female domains. Male religious thus gained authority over the female-coded space of the birthing chamber despite their reluctance to pierce its veil through actually entering the physical space.

7. Male Physicians Enter the Birthing Chamber

The combination of theological and medical interest in procreation and the female body encouraged a shift in the practice of obstetrical medicine by the end of the Middle Ages. Over the course of the fourteenth to sixteenth centuries, the duties of female midwives were taken over by male physicians, resulting in changes to obstetrical practices such as the integration of female assistants and male physicians mentioned above.\footnote{Green, Making Women’s Medicine Masculine, 8, 26.} These changes were intended to save lives and souls through elimination of ineptitude and superstition. Park writes, “The interior of women’s bodies became a matter of interest to medical scholars and practitioners as well as to literate laymen, and by the middle of the fifteenth century male medical writers had developed enough confidence in their mastery of the subject that they began to present themselves as equal or even superior to female experts, notably midwives.”\footnote{Park, Secrets of Women, 92.} It is important to note here that the
contact of male physicians with midwives at a birth usually occurred only if something had gone wrong and either mother or child was in danger. This could have led to bias in physician perception of midwife capabilities.\textsuperscript{183}

By the fifteenth century, there are indications of some male practitioners in the birthing chamber. Anthonius Guainerius (d. 1440) wrote \textit{Tractatus de matricibus}, in which he indicates that “he not only examined the bodies of his female patients, sometimes even touching and inspecting their genitals, but also personally attended births.”\textsuperscript{184} Guainerius worked with midwives in the room, telling them how to examine and manipulate female organs even when he himself did not touch the suffering women. His works indicate that he respected the knowledge and authority of midwives and female practitioners, describing them as learned (\textit{docte}) regarding obstetrical medicine. He implied that physicians could learn from these practitioners. At the same time, however, he noted that often they did make errors and that these errors resulted in medical problems.\textsuperscript{185}

Similarly, Michele Savonarola, writing in the 1450s, focused on potential midwife errors, though Savonarola more clearly emphasized his greater knowledge and authority on childbirth, especially on any pregnancies and births that were abnormal in any way.\textsuperscript{186}

\textsuperscript{183} Guardiola, \textit{Within and Without}, 24.

\textsuperscript{184} Park, \textit{Secrets of Women}, 100. Also see Lemay, “Women and the Literature of Obstetrics and Gynecology,” 189-209.


\textsuperscript{186} Park, \textit{Secrets of Women}, 101.
This indicates a narrowing of the acknowledged expertise of midwives to normal pregnancies and births only, and indeed, upper class women who were able to afford to have male physicians on call seem to have done so.\textsuperscript{187} Obstetrical gynecological texts were probably not read by women practitioners (or any women) until the sixteenth century, when new texts and copies indicate female readership and ownership. Monica H. Green and Linne Mooney write:

\begin{quote}
At the moment we can say little about the potential audience of literate midwives that might have existed in fifteenth-century England for a specialized book on obstetrics. We suspect that the obstetrical information that did appear in medical texts such as this was often read to midwives or communicated to them through other indirect means.\textsuperscript{188}
\end{quote}

There are indeed a number of obstetrical remedies scattered in English medical manuscripts, but there are very few texts that indicate female ownership or use until the sixteenth century. Medical texts were usually in “highly technical Latin,” making them fairly inaccessible to those without “advanced training in scholastic discourse.”\textsuperscript{189} Hellwarth argues:

\begin{quote}
Several things clearly happened with the advent of printed texts focused on women's medical needs in the late-fifteenth and early-sixteenth century. The texts take on an instructional, almost corrective tone, they become more clearly addressed to a particular readership (or at least we have more access to
\end{quote}

\begin{footnotes}
\item[187] Green, \textit{Making Women's Medicine Masculine}, 165.
\item[188] Green and Mooney, “The Sickness of Women,” 462.
\item[189] Green, “Medicine and Medieval Women,” 651.
\end{footnotes}
information about the readership for whom they were intended), and, I argue, they are actively interested in constructing a fear in women about childbirth, their bodies, and the midwives who attended them.  

The combination of medical and religious interest in childbirth and the regulation of midwifery inflected the texts produced in the late Middle Ages, and they became more instructional and less willing to admit women’s experiential evidence. The first known medieval tract for midwives is a late fifteenth-century German text that was a ‘prelude’ for Eucharius Rösslin’s popular *Rosegarden for Pregnant Women and Midwives*, written in German in 1513.  

By the sixteenth century, however, obstetrical medicine was practiced by male physicians and surgeons, and these men were understood to have significantly more authority than their female practitioner counterparts in the birthing chamber because of their theoretical knowledge and university education.  

It was also at the end of the Middle Ages that midwives began to be licensed. Midwife licensing started to take place systematically in the fifteenth century on the Continent; some French municipalities started appointing women to assist in childbirth from 1302, but the earliest example of licensing is in Brussels in 1424.  

English midwife licensure happened even later, in the early sixteenth century.  

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194 “The first municipal ordinances involving the regulation and licensing of midwives occurred in Nuremberg in 1381 and in Regensburg in 1452. The first such ordinance in
There were at least some indications that midwifery was of interest to governmental officials by the first half of the fifteenth century, even we have no records of official licensure. Margaret Wade Labarge writes that “By 1421 parliament was petitioning the English king, in much the same terms as the Paris faculty had used, to ban practice by untrained or on-the-job trained surgeons, apothecaries and their apprentices, but also including in the forbidden categories ‘a wise woman, lay sister in a convent and midwife.’ The petition was approved in 1423, but … could not be effectively enforced.” Regulation of medical practice by midwives seems to have been either difficult or deemed unimportant, for even after there was regulation in place, their licensure oaths dealt more with moral behavior than with medical skill.

8. Conclusion

The twelfth and thirteenth centuries saw the rise of scholastic medicine, including theories relating to generation and procreation, and the fourteenth and fifteenth centuries saw the slow integration of that medicine into the practice of women’s medicine. In a parallel trend, the Church’s decrees regarding baptism gradually filtered into pastoral

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196 Harris Stoertz, “Suffering and Survival in Medieval English Childbirth,” 120 n. 71.
handbooks, leading to heightened interest in the birthing chamber by religious men. The time period covered in this dissertation therefore stands at the crossroads in the practice and representation of midwifery, where female practitioners were alternately derided and praised, and where their expertise was acknowledged, albeit reluctantly. Although we have few texts detailing their methods in the birthing chamber, there are many texts by outsiders relating to both medical and spiritual matters, which become progressively instructional in tone. These trends in the rhetoric of birth and midwifery in the medical and pastoral texts of late medieval England inform our understanding of sermons, miracle stories, and other forms of religious rhetoric.
“WITH GRETE TRAUAILL HYM NORISHID”: PREGNANT NERO, MIDWIFE
SAINTS, AND THE MORAL TRADITION

This chapter moves from changing medical practices and prescriptions for correct midwifery to descriptions of monstrous births, as well as their opposites, miraculous births, as they are presented in miracle tales and collections of moral *exempla*. Childbirth is both a deeply emotional event and a common one, which makes it ideal for didactic use. Indeed, stories of miraculous or monstrous births were frequent in hagiographies and moral tales, used to indicate the moral character of the parents or children, to teach lessons about how to behave, or to inspire awe at saintly intercessors. As pastoral handbooks examined the potential failings of midwives in performing religious duties relating to baptism, and as encyclopedic and medical texts expressed doubt about their medical capabilities, *legenda* and *exempla* provided positive examples of birth attendants in the forms of the less fallible saints, as well as the Virgin Mary. Sins, punishments, virtues, and rewards were embodied both in the text and on the bodies of the people in the stories, which became tools in the moral tradition of late medieval England. Childbirth was suited to such didactic uses even, or perhaps particularly, when birth stories were extraordinary or outside the boundaries of ordinary childbirth; tales of the monstrous and the miraculous illuminated the borders of what was socially acceptable and humanly

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197 I use “moral tradition” here to refer to the collection of systemized strictures regarding vice and virtue developed over the centuries following the Fourth Lateran Council and to the treatises and handbooks that both codified and disseminated this system. For more on *exempla* as both constructing and reflecting social and moral ideologies, see Larry Scanlon, *Narrative, Authority, and Power: The Medieval Exemplum and the Chaucerian Tradition* (Cambridge: Cambridge University Press, 1994).
attainable. This chapter argues that these exempla and legenda reveal an interest in the pregnant and laboring body that aligns with a more general focus on the body during this time period,\textsuperscript{198} and especially on questions of knowledge – who could and should have knowledge about women’s bodies, and especially about their sins? Correlated with this was the unruly female body, which sometimes, against a woman’s will, exposed her indiscretions through the signs of pregnancy.

Both exempla and legenda about birth revolve around epistemological issues, such as the revealing of a woman’s adultery through her pregnancy, or the concealing of a woman’s indiscretions through miracles. Late medieval English versions illuminate specific and gendered debates over women’s medicine: who was allowed to have practical knowledge of childbirth, how this knowledge was to be obtained, and when this knowledge should be made known to the wider community. Childbirth took place in the private-yet-communal space of the birthing room, which made it an ideal event for exploring intersections of private and public, family and community. As described in Chapter 2, the handbooks of the fourteenth century textually opened the birthing chamber to a wider audience, including priests, through advice to midwives and laboring mothers. The exempla and legenda of the late Middle Ages continued this opening through sermon material that described birth and birthing practices in detail in tales of saints’ miracles and in cautionary exempla. Although pregnancy and labor were frequently represented, details involving the female body were often omitted or obscured. Birth – and the female body by association – as spectacle was at once condemned and perpetuated in these exempla. The secrecy of the female body was lauded and violated through the increasing

\textsuperscript{198} See, for example, Bynum, \textit{Christian Materiality}; and Park, \textit{Secrets of Women}. 

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details included in the *exempla* and texts intended for dissemination to the clergy and, through them, the public.

1. “Agaynes Reyson and Kynde”: Nero’s Monstrous Pregnancy

   This chapter begins with one particular story that may seem an odd choice for a chapter on birth, as it is about a man. The story of Emperor Nero’s attempt to experience childbirth for himself is one of the most curious tales about monstrous birth circulating in late medieval England. Yet accounts of Emperor Nero’s transgressive appropriation of childbirth offer implicit commentary on women’s experiences in birth: the monstrous illuminates the ordinary. His desire for practical, experienced knowledge about women’s medicine and obstetrics is both unnatural and sinful, and he is therefore punished.

   Nero’s murder of his mother Agrippina was recorded in classical sources, but her dissection and Nero’s simulated pregnancy were a later modification, with various additions in translations and adaptations. The pregnancy portion of Nero’s story appears in Jacobus de Voragine’s widely-copied *Legenda Aurea* (c. 1260), the *Chronicon*


200 “The principal ancient sources on which it was based were Suetonius, *Lives of the Caesars* 6.34, which describes Nero’s handling of Agrippina’s limbs and his call for drink; Tacitus, *Annals* 14.9, which indicates that he had her stabbed in the womb, but not that he had her body opened; Dio Cassius, *Roman History* 61.1 (ditto); and the brief reference in Boethius, *Consolation of Philosophy* 2.m6.” Park, *Secrets of Women*, 328 n. 89. See also Glynnis M. Cropp, “Nero, Emperor and Tyrant, in the Medieval French Tradition,” *Florilegium* 24 (2006): 21-22.

pontificum et imperatorum of Martin of Opava (c. 1278), and numerous translations and adaptations of these texts available in England in the following centuries, including Ranulf Higden’s Polychronicon, written in the mid-thirteenth century; the Polychronicon’s English translation by John Trevisa (1387);\(^{202}\) John Mirk’s Festial;\(^{203}\) the Chronicle of Robert of Gloucester;\(^ {204}\) the Alphabetum Narrationum by Arnold of Liège (1308);\(^ {205}\) an early fifteenth-century anonymous English translation of the Alphabetum Narrationum called An Alphabet of Tales;\(^ {206}\) and The Gouernaunce of Prynces, a version of the popular Secreta Secretorum (a mid-twelfth-century Latin translation of a tenth-century Arabic text) translated by James Yonge in 1422.\(^ {207}\)

I use this last version, a particularly detailed late medieval English version of the story, to demonstrate how the Nero exemplum spoke to contemporary ideas of pregnancy, birth and the female body. In The Gouernaunce of Prynces, the Nero story is found in a section on the value of prudence. It reads as follows:

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\(^{203}\) Powell, ed., John Mirk’s Festial.


\(^{205}\) The Alphabetum Narrationum was “extant in over ninety manuscripts of the fourteenth and fifteenth centuries (twelve of English provenance), as well as in translations into Middle English, Old French, and Catalanian.” DiMarco, “Nero’s Nets and Seneca’s Veins,” 386.


Boyce in the boke of consolacioun seyth, that this Nero makyd his brodyr to be slayn, and his modyr he made be slayn and oppenyd, for that he wolde witte and See, how he was in the maris y-bore and fedde. And for-als-moche as the Ficiciens and lechys hym reprouyd of the deth of his modyr, for hit was agaynes reyson and kynde, that the sone sholde do slee his modyr that grette doloure for hym sufferid and with grete trauaill hym norishid, Than sayde Nero, “make ye me with chylde, and ber a chylde that I may knowe how grete doloure and Payne hadd my modyr wyth me,” and the Ficiciens sayde, “That may not be, for hit is agaynys kynde.” Than sayde ham Nero, “If ye make me not wyth chylde, wyth cruel dethe I shall make you al dye.” Sethyn thay hym yaue pryuely a lytill toode in a drynke, and by crafe thay makyd hit grow in his bely, and his bely sawlte hit wax grete, that hit suffyre he ne myght, a thynge agaynes kynde; Wherfor he demyd that he was wyth chylde. And the lechis makyd hym Suche metis to het whyche makyd the litill toode grow accordynge to hys kynde, and to hym sayde, “Sethyn thow wilte concewyn and chylde bere, women mettis wyth chylde thow moste ette.” Hitte be-fell that throw the growynge of the toode, So grette was his doloure that longyr he myght not suffyre, and ther-for he sayde to his lechis, “Haste ye the tyme of my chylde berrynge, for the doloure is to me so stronge, that wyth nede y may my breth wyth-drawe.” Than thay yaue hym a drynke to caste owte, and he keste owte a toode strongly fowle and hydows. Nero be-helde his chylde, and grisnesse therof hadd, and hym merwelid of Suche an shape; And the lechis hym sayde, “The shappe is suche, for-why thow woldyst not abyde the
tyme of chylde-berryng." Sethyn he commaundid to kepe his chylde and welle to
norryshe, and that hit were Enclosid in a vaut of stone. 208

This story is notable and provocative in a number of ways that a modern audience can
still appreciate, especially in its gender-bending and its implausible toad. 209 At the same
time, this narrative, like other cautionary exempla depicting birth, offers lessons about the
dangers of undue interest in corporeality – especially excessive curiosity about birth from
a man. The figure of Nero was used for various moral lessons throughout the Middle
Ages; he was condemned for his excesses, his poor rulership, his sexual immorality, his
inconstancy, his cruelty, and his suicide. 210 I concentrate here on the lessons particularly
associated with the story of the dissection of his mother, his ‘pregnancy,’ and the ‘birth.’

The messages most easily read in Nero’s story are about medicine and morality,
which clearly intersect with the concerns articulated in the pastoral texts of Chapter 2.
Vivisection and dissection were topics of debate in the medieval world, but there is little
evidence that human dissection was practiced before the late thirteenth century. 211
Surgery and most of the practical medical procedures became the task of surgeons and
barbers during the rise of the university system in the twelfth and thirteenth centuries;

208 Steele, ed., Three Prose Versions of the Secreta Secretorum, 152-153.

209 Some versions have a frog instead. Frogs were associated with Nero in classical
sources, though not as part of a pregnancy narrative but instead in reference to the poor
quality of his singing voice. Roberto Zapperi, The Pregnant Man, trans. Brian Williams
(London: Harwood, 1991), 113; and Cropp, “Nero, Emperor and Tyrant,” 25. For
example, see Plutarch, Plutarch’s Moralia, vol. 7, “On the Delays of the Divine
Vengeance,” trans. Phillip H. de Lacy and Benedict Einarson (Cambridge, MA, and

210 Cropp, “Nero, Emperor and Tyrant,” 24-25.

211 Blumenfeld-Kosinski, Not of Woman Born, 28-30.
university-trained physicians, on the other hand, became more invested in medical theory and less in the practice. Much of medieval medicine relied on classical authorities, such as Galen, Hippocrates, and Soranus of Ephesos, and physical experiments like dissection and vivisection were not encouraged.\textsuperscript{212} For the first few centuries it was practiced, dissection often explored female bodies with greater frequency and interest than male bodies; the male body was considered known, but the female body offered additional secrets that needed exploring, especially the uterus. Katharine Park writes, “The uterus acquired a special, symbolic weight as the organ that only dissection could truly reveal, and as a result, it came to stand for the body’s hidden interior. … Thus the female figure has come to illustrate internal anatomy in general, apparently by association with the uterus: where the male bodies are mostly surfaces, the woman is identified with a visualizable inside.”\textsuperscript{213} The presence of Nero’s mother’s dissected body in Nero’s \textit{exemplum} reflects a larger cultural and intellectual anxiety about kinds of knowledge that can or should be pursued, especially those relating to the workings of the female body.\textsuperscript{214}

\textsuperscript{212} Blumenfeld-Kosinski, \textit{Not of Woman Born}, 18, 30; see also above, Chapter 2, 56-58.

\textsuperscript{213} Park, \textit{Secrets of Women}, 27.

\textsuperscript{214} A similar story about Nero experimenting with understanding the interior of the body appears in Gower’s \textit{Confessio Amantis} in reference to gluttony. Instead of Nero’s mother, it is three men of similar age and complexion to himself that Nero dissects. He performs an experiment in which he asks each to eat the same food he does, and after eating he has them conduct differing activities. Nero then opens each man to see what effect the activities had on their internal organs; he uses these dissections to test how he should proceed with his life in order to live longer. Although this story does not address excessive curiosity about the opposite gender, the story’s placement in a discussion of Nero’s sinfulness has the effect of implying that human dissection to gain knowledge about anatomy is immoral. John Gower, \textit{Confessio Amantis}, ed. Russell A. Peck, trans. Andrew Galloway, 3 vols. (Kalamazoo, MI: Medieval Institute Publications, 2000–2004), Book VI, ll.1151-1209.
The fact that anatomical curiosity is associated with such a reviled character as Nero makes a statement about the morality of this curiosity. Augustine and many of the moralists who followed him linked curiosity with pride and lechery as the three major categories the other sins fell into, and curiosity and lechery had similarities in their excessive attention to worldly matters.\footnote{Richard Newhauser, “Augustinian \textit{vitium curiositatis} and its reception,” in \textit{Sin: Essays on the Moral Tradition in the Western Middle Ages}, 99-124 (Aldershot: Ashgate, 2007), 106.} Richard Newhauser writes,

For Augustine … both lust and \textit{vitium curiositatis} [the vice of curiosity] were impurities which immersed the sinner in the world of perception, but the decisive distinction for Augustine was that whereas the former derived pleasure from the objects of sensation, the latter enjoyed – in its Augustinian meaning – the senses for the mere experience of perception. In this way, the objects of sinful curiosity were at times also the opposites of the beautiful, harmonious, fragrant, pleasant or soft objects of lust.\footnote{“Ex hoc autem autem evidentius discernitur, quid voluptatis, quid curiositatis agatur per sensus, quod uoluptas pulchra, canora, suauia, sapida, lenia sectatur, curiositas autem etiam his contraria temptandi causa non ad subeundam molestiam, sed experiendi noscendique libidine.” Newhauser, “Augustinian \textit{vitium curiositatis} and its reception,” 113, citing Augustine, \textit{Confessions}, 10.35.55.}

At the same time as its censure of Nero’s excessive curiosity about worldly matters, the story indulges in exactly the kind of fascination with earthly things, including the grotesque, that Augustine condemned. Nero’s experiment is horrifying yet fascinating, and lingering too long on it without obtaining a clear moral lesson may be dangerous. It has the potential to subvert its own messages about medical experimentation, as it describes in detail the consequences of the experiment and satisfies – albeit only through
narrative instead of direct physical experience – the excessive curiosity one might have about such an unnatural act as Nero’s. *Exempla* make moral lessons able to be imagined and envisioned, yet they also make those same moral lessons worldlier in the process.

Nero’s murder of his mother and subsequent opening of her body is well known to scholars from Chaucer’s “Monk’s Tale,” among other sources. Condemnation of Nero’s action is evident even in this brief reference, where the Monk describes Nero’s depravity, saying:

His mooder made he in pitous array,
For he hire wombe slitte to biholde
Where he conceyved was – so weilaway
That he so litel of his mooder tolde!  

The “Monk’s Tale” version focuses on Nero’s desire to see where he was conceived. As the Monk tells it, Nero’s desire and the dissection are clearly abominations. The first few sentences of *The Gouernaunce of Prynces* agree, and the passage adds that Nero “wolde witte and See, how he was in the maris y-bore and fedde.” The opening of a human body to satisfy curiosity, even if it is about one’s own past, is condemned. Nero’s opening of his mother and slitting of her “wombe” are one way of making her female body and the process of conception more readable, yet they also reduce her to that body. The idea of using dissection as a means to understand natural law, which is divinely created and ordered, was clearly considered perverse.

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218 Steele, ed., *Three Prose Versions of the Secreta Secretorum*, 152.
At the same time, the body itself was not condemned in medieval thought. Park argues, “late medieval Christianity saw the human body as one of the principle elements connecting the natural and the supernatural worlds. Like the body of Christ, who died like a criminal, mutilated on the cross, or like the scattered bones of long-dead martyrs, the body was a conduit for divine grace.”\textsuperscript{219} Nero does not approach his mother’s body with the respect it deserves, nor does he treat his own as the potential conduit of grace it might be otherwise. His reasons for his actions also indicate that he is acting with excessive curiosity instead of reverence. He wanted to see how he himself had been inside her and how he was “fedde” and “norishid” while inside her: practical questions, though immoral, as the text makes quite clear. The phrasing “for that he wold witte and See” makes it clear that Nero’s mother’s body was cut open so that Nero might have his curiosity assuaged.\textsuperscript{220} Robert of Gloucester’s Chroni\textit{c}\text{le}, too, explicitly states that Nero killed her in order to assuage his curiosity, not that he killed her first and then became curious; the vice of curiosity leads to murder and then to even more excessive curiosity.\textsuperscript{221} Nero’s inquisitiveness about his mother’s body and about women’s experiences is to be condemned because it does not help him live a moral life or focus more on the divine.

\textsuperscript{219} Park, \textit{Secrets of Women}, 24.

\textsuperscript{220} The link of Nero with curiosity occurred in the twelfth century in the middle-high German \textit{Kaiserchronik}, a “weighty anonymous compilation which at least two monks cobbled together in many thousands of verses in middle-high German.” Zapperi, \textit{The Pregnant Man}, 118.

\textsuperscript{221} Wright, ed., \textit{The Metrical Chronicle of Robert of Gloucester}, 110. Curiosity was not one of the seven deadly sins, yet from the tenth century it was listed along with others as a sin to be confessed, and it included both excessive curiosity and excessive care of worldly things. Richard Newhauser, “Towards a History of Human Curiosity: A Prolegomenon to its Medieval Phase,” in \textit{Sin: Essays on the Moral Tradition in the Western Middle Ages}, 559-575 (Aldershot: Ashgate, 2007), 560.
The desire for practical knowledge about the human body was thus lumped with other vices as excessive focus on the corporeal.

This story also exposes the epistemological gaps in gendered medical knowledge. By the time Nero’s story turns to his own attempt at pregnancy, his mother Agrippina’s body has been opened through dissection and her suffering becomes the topic of discussion for a group of men, Nero and his physicians. The birthing chamber may be reserved for the bodies of women, but it is the subject of curiosity, debate, and categorical statements of knowledge by men who were not actually present at the birth in this story. This is similar to the phenomenon of the creation, collection, and transmission of knowledge about birth through handbooks written by and for religious men.222

Nero’s acts are condemned by the physicians because of his excessive curiosity about the reproductive process and the body in general, but they are also excoriated as unnatural. The physicians reprove Nero twice with the phrase “agaynes reyson and kynde,” first in relation to the murder of his mother and second in relation to the wish to be pregnant.223 In An Alphabet of Tales, an early fifteenth century English translation with headings designating the sin or lesson to be learned, the heading of Nero’s story is “Cruelty against nature ought to be detested.”224 As Teresa Tavormina writes, “Medieval

222 See above, Chapter 2, 67-73.

223 The word “kynde” is one of the most difficult Middle English words to pin down, as many scholars have noted. It means nature, but it also usually means the nature that is created by God, and is therefore divinely inspired. Hugh White, Nature, Sex, and Goodness in a Medieval Literary Tradition (Oxford: Oxford University Press, 2000), 9-13, 48-55.

civilians and canonists regularly cited matrimony and the upbringing of children as examples of human institutions established by natural law” and natural law is itself created by God.\textsuperscript{225} Nero’s acts are against natural law and God’s created law, and it is neither reasonable nor natural to murder and dissect a person who underwent such suffering on his behalf. Nor is it reasonable or natural to want to undergo pregnancy and birth as a man. His belly growing is labeled “a thynge agaynes kynde” – the physical ramifications are unnatural and indicate the immorality of his act, as well as the earlier expression of his desires. The physicians state that it is unnatural to cross these barriers, and they are only able to help Nero perform femaleness through that most revealing of biological markers, pregnancy. They themselves have the knowledge to approximate birth but not produce it; they cannot subvert God’s natural law even when their lives are at stake. Nero is able to appear to become pregnant and give birth despite his maleness – but the product of his attempt to render his body dual-sexed is monstrous, and his is not an actual pregnancy and birth resulting in a human child.

Crossing the barriers of the gender binary was both a biological and a moral concern, as Joan Cadden makes clear with her analysis of male/female and masculine/feminine binaries.\textsuperscript{226} Male and female were often distinguished in non-obstetrical texts based on their “complexion” – the balance of various aspects, and especially of heat, in the body. This concept of health as equilibrium implies that it is


\textsuperscript{226} Joan Cadden, \textit{The Meanings of Sex Difference in the Middle Ages: Medicine, Science, and Culture} (Cambridge: Cambridge University Press, 1993), 170, 201, 209.
possible to become out of balance with respect to one’s sex.\footnote{Cadden, \textit{The Meanings of Sex Difference in the Middle Ages}, 170-171, 184.} The masculine/feminine descriptors then have the potential to illustrate the sickness or unnaturalness of a person; a feminine man is possible, if problematic. Obstetrical texts, on the other hand, usually identify the womb and the menses as the most important identifying characteristics of a woman, preferring the biological indications to those of complexion.\footnote{Cadden, \textit{The Meanings of Sex Difference in the Middle Ages}, 173.} These texts focus on women’s childbearing as their most important act according to natural law, though some of them do indicate an awareness that not all women want or need to procreate.\footnote{Joan Cadden, “Medieval Scientific and Medical Views of Sexuality: Questions of Propriety,” \textit{Mediaevalia et Humanistica} n.s. 14 (1986): 162-163. Virginity was also emphasized as virtuous in non-medical texts. See Marina Warner, \textit{Alone of All Her Sex: The Myth and the Cult of the Virgin Mary} (Oxford: Oxford University Press, 1976); and Karen A. Winstead, ed. and trans., \textit{Chaste Passions: Medieval English Virgin Martyr Legends} (Ithaca: Cornell University Press, 2000). For more on the morality of female sexuality, see Michael Goodich, “Sexuality, Family, and the Supernatural in the Fourteenth Century,” \textit{Journal of the History of Sexuality} 4 (1994): 493-516.}

It is important to note that despite Nero’s expressed desire to understand his mother’s womb, Nero in these tales does not want to merely explore the medical issues of female reproductive processes. If he did, then he would just end his exploration with the dissection of his mother and his sight of the actual womb that housed and fed him. Instead, he wants the experience itself, and he wants to transgress by transferring the bodily event to a different sex. His ‘giving birth’ through the neck and head is appropriate in terms of medical terminology; many gynecological texts use the phrase ‘neck of the womb’ to refer to the cervix and vagina, and ‘cervix’ is the Latin word for neck. Nero, as a man, turns the process of birth inside out both figuratively (as a man performing a
female act) and literally, as he gives birth through the neck at the other end of his body. His desire is not just for knowledge, but also for experience; birth is something that women go through but men cannot – and should not attempt to – undergo themselves.

Indeed, the story implicitly praises female pregnancy, labor, and child raising through the references to Agrippina’s suffering. The physicians argue that it is especially bad to kill one’s mother because she has suffered pain: “hit was agaynes reyson and kynde, that the sone sholde do slee his modyr that grette doloure for hym sufferid and with grette travaill hym norishid” (italics mine). Their condemnation certainly reflects the Fourth Commandment to honor one’s father and mother, yet the physicians draw on her suffering instead of Biblical law here as justification for their reproof.230 A mother’s pain in childbirth is thus elevated to a sacrifice for the child, or even into a debt the child must repay. Nero is obligated through his mother’s suffering to treat her body well, especially the part of her – her womb – that suffered and bore him. This highlights the positive valences of birth; even when used in negative exempla such as Nero’s, it demonstrates the potential virtue of normal, female birth. Nero’s story indicates that pregnancy and birth were naturally and morally tied to the female body in medieval thought, and that attempts to subvert these ties were considered unnatural and immoral. Additionally, the story touches on the mystery of the female womb and the birth process through Nero’s curiosity, resulting in implicit praise for women’s suffering in childbirth.

Equally important to the story and the topic of childbirth is the idea of unnatural curiosity about the body. A potential conflict between experiential and theoretical knowledge of the human body, and especially the female body, was entwined in medical matters, again reminiscent of the developments in obstetrical discussed in Chapter 2. Nero’s story provides a counterargument, of sorts, to the increase of knowledge about and interest in women’s medicine demonstrated in sermons and other pastoral texts. Nero’s desire to understand more about the “doloure and Payne” of women is condemned. At the same time, it is important to note that it is only his desire for practical, experiential knowledge that causes his downfall. The physicians who treat him have knowledge about birth, but it is theoretical. It is Nero’s desire to try the experience for himself that is decried as unnatural, since he is a man trying to experience an event that is only possible for women. This ultimately protects the exclusivity of female, practical knowledge of birth. The exemplum condones the restrictions of certain kinds of knowledge – practical, experiential knowledge – about birth to those who have the capacity to undergo it themselves, as women.

2. Pregnancy and Birth as Moral Goad: Making Confession Public

Cultural concerns of the high and late Middle Ages were reflected in the exempla of the time, but the exempla were also instrumental in shaping culture. Katherine Little argues that narratives such as those found in the late medieval English collections of exempla “offer an identity in terms of exculpation and reintegration” from Church
hierarchies. For Little, *exempla* created communities through the categorization and subsequent expulsion of sin in the individual, implying that *exempla* formed part of a homogenous system of morality and community. Yet Little takes communal homogeneity as a given in late medieval English Christianity. Allan Mitchell rightly challenges this idea with his desire “to inaugurate a larger-scale critique of modern versions of medieval exemplary morality, in particular a critique of the notion that morality in the Middle Ages was invariably restricted to a uniform system of values, a naive conception of divine-command, or prescriptive ideological statements.”

*Exempla* were intended as sermon material and therefore as didactic tools, but Mitchell asks us to “dispel the notions that morality is transmitted just one-way (from norm to narrative), that moral meaning is unaffected by historical circumstance, and that readers are passive consumers.”

*Exempla*, then, are texts to criticize, analyze, and consider in terms of their cultural context, and the narratives both shaped and were shaped by contemporary concerns. Stories of birth in sermons exemplify the cross-pollination of individual, familial, and communal concerns and reflect the interest of the Church in procreative matters. Birth was an event that the entire community would generally know about, and it usually resulted in communal gatherings to help the laboring woman and her family.

The intersection between private and public is vital to the discussion of birth in the moral tradition. Pregnancy and birth were sometimes visible indicators of sexual

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impropriety and sin, and as such, revealed a woman’s moral state to her community. Katherine Little argues in her comparison of explicitly Wycliffite sermons and what she calls “traditional” sermons that orthodox discussions of the seven sins, the virtues, and the works of mercy rely on “exterior signs” as “a means through which one might approach or discuss the interior.” I suggest that knowledge can be linked to visibility with respect to the already too-worldly female body in medieval thought. The female body and the birthing chamber, when displayed or represented in public arenas, might more easily be understood and controlled. The pregnant and laboring female body showed more clearly that a woman was either inside or outside traditional moral boundaries. If a faithful wife, her pregnancy demonstrated that she offered her husband marital obligations and produced heirs. If unmarried or unfaithful, her pregnancy provided obvious proof of her immorality.

The gendered implications of birth exempla, where women’s indiscretions were readily revealed through their pregnant bodies, relate to another gendered issue in the stories. Beth Allison Barr argues, “In Mirk’s Festial, exemplum characters that conceal sin or are ashamed to confess sin are almost exclusively female.” Men do not confess out of lack of sorrow or stubbornness, but women do not confess because they are

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234 Little, Confession and Resistance, 43.

235 Females were associated with physicality and therefore inferior to males, who were associated with spirituality. Blamires, Women Defamed and Women Defended, 2.


ashamed. Barr adds, “The gendered responses of these exempla characters perhaps suggested to clerical readers that they should approach male and female penitents differently. Persuasion, for example, seemed futile with male exempla penitents, whereas female exempla penitents needed to be cajoled, coerced, and sometimes threatened to uncover their concealed sins.” If the confessor is to cajole the sins out of the woman, then he must have knowledge about those sins; this is most easily and most truthfully read in her body, in the case of pregnancy. The thirteenth-century penitential of Thomas of Chobham describes how a confessor should read the body of any penitent for the truth through the penitent’s sighs, tears, or blushes; the body is taken to be more accurate than words. Visible signs, then, betray the sinner and help the confessor force the sinner to confess if he or she is unwilling or ashamed. The exempla imply that women are more ashamed, especially of sins relating to their sexuality, and their bodies therefore publicly force them to reveal their transgression in order to help them towards confession.

It is more often the adulterous pregnancies that are present in exempla, perhaps because the narratives are generally about a sinner’s punishment or redemption. Nero’s monstrous act is reflected in the actual physical characteristics of the ‘child’ he brings

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239 “Et sicut medicus corporalis multa signa et indicia inquirit de morbo patientis utrum possit curari vel non, ita medicus spiritualis per multa signa debet considerare circa penitentem si vere peniteat vel non, veluti si gemat, si ploret, si erubescat, et cetera talia faciat. Vel si rideat vel se peccasse neget vel peccata sua defendat et similia.’ [And just as a doctor of the body inquires of the patient’s disease through many signs and indications whether it can be cured or not, thus the doctor of the spirit should consider by means of many signs concerning the penitent if he might be truly penitent or not, for example if he should sigh, if he should cry, if he should blush, and should do other such things. Either if he should laugh or deny that he had sinned or should defend his sins and similar things.]” Thomas of Chobham, *Thomae de Chobham Summa Confessorum*, 240-241. Translated in Little, *Confession and Resistance*, 53-54.
forth, and his inadequacy as a receptacle is therefore made visible; both he and the physicians recognize its ugliness in nearly all the versions of the story.\textsuperscript{240} He does not use this as impetus to learn from his mistakes or reform his life, but there are a number of \textit{exempla} where a woman’s pregnancy and birth force her to admit her sins and atone for them. The female body physically demonstrates its sin in cases of adultery and allows that sin to be easily read by her community, but this visible proof of her sin may be an impetus to greater remorse and increased chances of confession and penance.

Some \textit{exempla} explicitly comment on the ways the transgressions of individuals or couples implicate the larger community. \textit{Jacob’s Well}, an anonymous early fifteenth-century sermon collection, contains a passage on the fruits of adulterous unions attributed to Pope Boniface, and focusing on the vices inherent in the English: “ȝif englyschmen brekyn þe knot of matrimonye, & folowyn avowtrye & spousebreche, of hem schal springe in tyme comynge a wycked seed. Þat seed schal ben here chylderyn, falsely begetyn in avowterye as bastardes & false eyres; þe which schul miltyplie so fer-forth in Inglond, þat þe peple schal be graceles, vnmyȝty in batayle, & vnstedfast in þe feyth of holy cherch.”\textsuperscript{241} In this statement, the children are not visibly disfigured but morally; because of their parents’ faithlessness in marriage, they are faithless to the Church. The bearing of children thus becomes not only an individual or familial concern but also one

\textsuperscript{240} Only in Robert of Gloucester’s \textit{Chronicle} does he appear unaware of, or at least indifferent to, the ugly appearance of his ‘child’: “ȝut þis gidie wrecche louede þis foule best / As wommon deþ hire child.” Wright, ed., \textit{The Metrical Chronicle of Robert of Gloucester}, 112.

\textsuperscript{241} Brandeis, ed., \textit{Jacob’s Well}, 161. \textit{Jacob’s Well} survives only in the mid-fifteenth-century MS Salisbury Cathedral 103, but was likely composed between 1400 and 1425. Leo Carruthers, “Where did \textit{Jacob’s Well} come from? The provenance and dialect of Ms Salisbury Cathedral 103,” \textit{English Studies} 71.4 (1990): 340.
important to the entire Church through the children’s immorality and inability to be good Christian soldiers.

The Book for a Simple and Devout Woman, an English text adapted and translated from William Peraldus’ Summa de vitiis et virtutibus and Friar Laurent’s Somme le Roi, repeats the idea that parental sin leads to malformed children and emphasizes the child as a visible sign of the sin. The following passage is adapted from Somme le Roi, and it lays out, as many medieval authors do, the times when sex is permissible and when it is not. The author adds that men who lie with their wives while they are pregnant do so against God’s will, because:

Godes biddynge þei breke þat forbode þat men nat nyȝhe hure wyues, whiles þei buþe in suche state, for perele þat myȝte falle to þe children þat in suche tyme buþ geton. For Sen Jerom seþ þat children þat in suche tyme buþ geton, some buþ blynde, some dombe or def, mesel or crokede, or wandeþ hure riȝte lymes – þat þe synne þat þe fader and þe moder wrouȝten in vntyme, be schewed in hure children to alle mennes syȝte, to ekene euer newe hure sorwe when þei hure children seen.242

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242 Diekstra, ed., Book for a Simple and Devout Woman, 228-229. This is adapted/translated from Somme le Roi, fol 164r, “Li seconz cas ou l’en puet pechier en mariage est quant li hons va a sa fame en tens que l’en n’i doit pas aler, c’est quant ele est en la maladie qui suet avenir es fames communement. Cil qui n’espergne sa fame quant il set qu’elle est en tel point, peche griément, et pour ce que Dieux desfent que li hons n’ait compaignie a sa fame en cel estat, et pour le peril de sa lignie. Car si com dit Sainz Jeroîmes, en tel estat son sovent conceu li contret, li avugle, li clop et li mesel. Dont la fame doit bien dire a son seigneur quant ele est en tel estat, que il se seuffre d’estre avec li, et il s’en doit bien sosfrir tant comme ele est en tel point.” Diekstra, ed., Book for a Simple and Devoit Woman, 403, n. 5032-83.
This passage explicitly links transgression with ideas of causation; those who misbehave will have malformed – literally misbegotten – children. The passage ends with a repetition of the notion of sight; the child is the sin made literally visible to the community through its disfigurement. The sin and its consequences then become readable by the community through the appearance of the child, making the private parental transgression into public knowledge.

These passages deal with the product of birth, that is, ill-formed infants that result from parental sin; however, parental transgressions are sometimes reflected in the conditions of the birth instead. The story of Pope Joan in An Alphabet of Tales is also about a horribly visible birth, where an individual’s transgression is made public through the birth of her child. Pope Joan commits adultery as pope and even though she does not show her pregnancy, the birth itself is extremely public and visible since it occurs on procession in the middle of the city of Rome:

So hur happend on a day to com in procession fro Saynt Peturs vnto Saynt Iohn Latarenens, and þer sho began at travell, and bare hur chylde betwix Colliseum & Saynt Cleemt kurk; & þer sho dyed, & þer þai berid hur. And because of þat detestable dead, þe pope vsid neuer syne to com þer-away with procession, and here-for hur name is not putt emang other popes namys in the Martiloge.²⁴³

It is unclear whether she dies because her labor was difficult or for another reason. This story refers to “þat detestable dead” without specifying if it is her sexual activity, her cross-dressing and deception, her pregnancy, or her public birthing that is detestable. Her sins were unknown until the act of birth, however, and the birth is what reveals her earlier

²⁴³ Banks, ed., An Alphabet of Tales, 401-402.
transgressions. She is not given the opportunity to repent or make a public apology, as she dies immediately after the birth. She is removed from the written record for her transgressions, eliminating her presence from the textual records of the Church, if not from the collections of narratives like *An Alphabet of Tales*.

Transgression may be revealed through prolonged or particularly painful labor as well, but these tales are about a redemptive process where the pain of labor encourages confession and repentance. For this reason, they describe how sustained and painful labor may be alleviated through spiritual intercession or the prayers of the wronged party. One *exemplum* in *An Alphabet of Tales* tells of a priest’s daughter who “happened to be corrupte & be with childe” and falsely accuses a deacon of impregnating her.\(^{244}\) The deacon denies the accusation, and when his deaconship is removed and he is asked to marry her, he refuses and goes to a monastery. The story continues to the day of the child’s birth:

And when þe day of hur byrth drew nere, sho traueld vij dayes to-gedur, & was hugelie vexid with grete paynys, so mekull þat sho mot nowder eate, nor drink, nor slepe, bod trowed hur selfe verelie at sho sulde dye. And sho was passand ferd at sho sulde be dampanyd, and þan sho began to cry horrible & sayd; ‘Wo is me, wriche! for I am fallen into a dubble perill. Furst, for I hafe loste my maydenhed; and þe secund, I hafe putt a fals cryme vppon þe Deken.’\(^{245}\)

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\(^{244}\) It is possible that the daughter’s sinfulness is partially attributable to her identity as a priest’s daughter; she may have inherited the sin of lechery from her father.

The prayers of others have no effect, and it is only when the bishop asks the falsely-accused deacon to pray for the woman that she is able to deliver the child. Her fault is in two places, as she herself remarks: losing her maidenhead and falsely accusing the deacon. The first crime, the circumstances of which are not explained, becomes visible in her pregnancy, and the second becomes visible in the lengthy delivery that is only alleviated when she confesses and makes public the wrong she has done. Her lies are not known or visible to the general public until her body makes them so by forcing her confession. The woman is explicitly punished with an extraordinarily long and painful labor for her sins. Her suffering during labor, unlike most parturient women, is not alleviated through the delivery of the child in due course; instead, her pain ends when she makes her sins public and rights the wrong she has done to the deacon. She also only is relieved from her suffering by the prayers of the deacon; ultimately, it is his actions that permit her birth to occur. The public nature of this punishment and confession tie in with the issues of visibility; her sin of losing her maidenhead is made forcibly public by her body, and the only remedy for her sin of false accusation is making it public as well. Women’s corporeality and visible pregnancy and birth make private sin impossible in cases of adultery. The female body usually displays physical signs of pregnancy and laboring women usually reveal the travail they undergo, whether willingly or not.\footnote{Visible pregnancy and pain in labor cannot be taken as universal experiences of pregnant and parturient women. Some women do not have very visible signs of pregnancy or do not even know they are pregnant, in what is called cryptic pregnancy, and others experience very little pain in labor and delivery. M. Del Giudice, “The Evolutionary Biology of Cryptic Pregnancy: A Re-appraisal of the ‘Denied Pregnancy’ Phenomenon,” \textit{Medical Hypotheses} 68 (2007): 250-258.} The female body is thus particularly inclined toward the production of external signs in these
cases where pregnancy and painful labor reveal underlying moral failures. Male adultery is not visible in the same way, however, and the real father of the woman’s child is never identified in this story. It is implied that knowledge about male transgression should not be public; their confession may remain private, and their bodies do not reveal their sins to the community.247

Although the woman in this exemplum is clearly suffering because of her transgressions, it is not necessarily true that the story encourages the audience to revile her; instead, it may function as a demonstration of how to perform repentance. The Sekenesse of Wymmen identifies ‘sickness’ for women as a wide range of maladies, including childbirth situations that involve unusually high levels of pain or other complications. The author argues, “But neuertheles whosuemever he be that [dispisith] a womman for hir sikenes that she hath of the ordynaunce of God, he doeth a grete synne, for he dispisith nat al only hem but God that sendith hem suche sikenes for their best; and therfor no man shuld dispise other for the disease that God sendith hym, but to have compassioun of hym and releve hym if he myght.”248 This passage implies that the sufferings of women in childbirth, as with other medical ailments, are divinely-ordained, strengthening the notion that those who confess were given their suffering by God as a goad to penance.

247 The male lack of accountability for illegitimate children in these exempla is not representative of legal practice. Richard Helmholz writes that church courts records indicate that fathers, where known, were required to support their illegitimate children. They might be asked to pay for the expectant mother’s confinement, purification, and even dowry. Richard H. Helmholz, “Support Orders, Church Courts, and the Rule of ‘Filius Nullius’: A Reassessment of the Common Law,” Virginia Law Review 431 (1977): 438-439.

Another version of the above story about the accused deacon, from the fifteenth-century collection of sermon stories *Speculum Sacerdotale*, makes the immunity of men to public exposure from birth even clearer at the same time that it removes the woman’s ability to confess of her own will. In this version, the woman is the daughter of a rich man instead of a priest, but she becomes pregnant after adultery and falsely accuses a deacon. The apostles Simon and Jude arrive shortly after the infant is born and ask the infant to be brought forth by the people who were holding the deacon imprisoned. They ask the infant whether the deacon was the father, and miraculously the infant is able to speak:

> And the childe þrouȝ the vertu of the Holy Gost answerd and saide thus: ‘The dekyn is chaste and holy, and he neuer fowled his body with no woman.’ And þen they made instante to the apostles for to telle hem who was the fader. And the apostles sayde to hem aȝeyn: ‘Vs moste lowse and asoyle hem that are gilty and noȝt to accuse hem. And it semeþ noȝt vs to se hem persche that ben clene innocentes and vngiltye.’ And þerfore, sires, honoureþ and loueþ the feste of these holy apostles, Simon and Jude, et cetera.\(^{249}\)

The people who held the deacon desired to know the father so as to bring justice, but the apostles refuse. They are only interested in exonerating the deacon, but that leaves the woman as the only one whose sin is made visible by her body. The father’s adulterous act is invisible to society, and the fact that he does not come forth and confess to his sin is ignored. Instead, it is female bodies and female transgressions that are revealed through

birth, and only some cases detail the ability of the women to repent and confess. This
d version of the story does not describe the woman’s thought process or allow her the
opportunity to speak; instead, the exemplum functions as a cautionary tale against similar
transgressions.

Another story about a Jewish woman in An Alphabet of Tales outlines painful
childbirth as particularly related to the sin of the woman instead of the man, where acts
committed by the man remain secret and unpunished. A Christian cleric impregnates the
Jewish woman. Afraid of discovery, he puts a reed in the Jewish family’s wall, and
whispers through the reed that their daughter is a virgin who has conceived the messiah.
As a result of this mysterious voice, the parents feel the girl’s body to confirm her
pregnancy: “þai gраЬid þe þogþeþ bodie & fand at sho was with childe. & þai askid hur
how sho conseyvid, and sho ansswerd as þe clerk had bedyn hur, & sayd; ‘I wote neuer
whe þer I be with childe or nay, bod I know wele I am a mayden & neuer at do with
man.’” The parents believe her and think that the child is the messiah, and they tell all the
other Jews in the city, who gather when she is in labor. But the girl’s labor does not
confirm the messiah story: “And in hur travellyng sho had grete payn, & at þe laste with
grete sorow & crying sho bare a doghter, þat cryed & grete & made mekyll mornyng.
And when þai saw þis þai all war confusid passynglie, to so mekill þat ane of þaim in a
tene tuke þis childe be þe legg & threw it agayn þe wall & killid it.”250 The story follows
in a common anti-Semitic tradition of associating Jews with ignorance and violence,
especially related to the reversal of, or failure to understand, Christian miracles like the

250 Banks, ed., An Alphabet of Tales, 278.
Eucharist or the virgin birth.\textsuperscript{251} The Jewish woman’s labor involves “grete payn” and the birth occurs “at þe laste with grete sorow & crying,” implying that she has taken a very long time to deliver and that her experience was painful. The absolute dissimilarity with the virgin birth is clear from both of these facts, as the Virgin’s labor contains none of the visible signs of corporeality, like blood or pain. The author does not explicitly tie the girl’s pain to her transgressions, but the girl would have been considered immoral because she is an unmarried pregnant woman and a Jew, and she lies to her parents about the origin of her pregnancy. The consequences of these faults extend even past the great labor she undergoes; her own people kill her child because it is not the messiah. The cleric, however, is not condemned in this story, despite his sins.

All of these stories touch on the pregnant body’s capacity for making transgression visible. Each of these women is somehow forced by her unruly and pain-inducing pregnant body to make her adultery and confessions public, though only some are given the opportunity to repent. The woman who accused the deacon suffers lengthy and painful labor until she does, the Jewish woman’s lies about being the mother of the messiah are revealed by her painful labor and female offspring, and Joan’s body, though it conceals the pregnancy until the last minute, betrays her in so ignominious a place as the public streets of Rome, resulting in her infamy and death. These stories of labor and birth are about misbehavior and disobedience, and as such, they are only some among many of the late medieval \textit{exempla} about transgression. My focus here, however, is on an increased visibility of the laboring woman in religious discourse intended for

dissemination to the laity. A woman’s sexuality could be read in her pregnant body, and while pregnancy was often lauded as obedience to familial and religious obligations, pregnancy could also be a very physical signifier of sexual transgression in cases of adultery. There was a double standard for female and male sexual transgression as read through these stories of labor; female transgression must be confessed publicly, and in fact a woman’s own body forced her to do so. The didactic purpose of the *exempla* was one where the expression of devotion and repentance were rewarded by the cease of bodily suffering. Women who confessed were rewarded.

3. Childbirth in Saints’ Lives and Miracle Stories

We can see from these *exempla* that birth was certainly one way to make transgression public through changes in the female body. Yet as I mentioned earlier, pregnancy and birth were not always immoral; God’s commandment to be fertile, in addition to the laws on matrimonial obligations, made pregnancy and birth moral in many circumstances. Many miracle stories focus on the intercessions that holy figures make on behalf of laboring women when those women (or sometimes the birth attendants with them) express devotion or prayer. The positive stories with vivid birth scenes usually involve birth miracles enacted by Christ, the Virgin Mary, Mary Magdalene, Margaret, and other holy men and women – Eamon Duffy calls them “auxiliary midwives.” These narratives result in virtue and grace made manifest, as miracles demonstrate

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252 Cohen, “Be Fertile and Increase, Fill the Earth and Master It,” 290.

through birth and baptism either the worthiness of the recipient or the beneficence of God. There are many variations on these birth miracles: the mother’s and child’s lives may be saved, the mother’s life may be saved, or the child’s life may be saved just long enough to be baptized.

As the cautionary narratives do, these exemplary narratives often make the individual’s state public. In this case, however, it is usually virtue made visible, or transgression concealed through intercession, that is the focus of the stories. In these stories, the audience is asked to believe, not question, the details of the miracles; curiosity about the inner workings of the body is not satisfied. Sometimes the problematic intrusions of the corporeal body are concealed or divinely mitigated, just as they are revealed and emphasized in the stories above. Unlike Nero’s story, however, these stories contain very little detail about the medical processes, nor do they perform any sort of cutting to open the body or excessive curiosity. Instead, the saints merely lay a hand on the penitent sinners and save lives. The concerns with dissection reflected in Nero’s story demonstrate the crossover between medical and moral concerns that may be addressed through pastoral exempla as well as the handbooks discussed in Chapter 2. The detailed description of physical processes is mirrored by the grossness of the immorality in Nero’s narrative. Conversely, the saintly intercessors remove the medical and moral concerns of the penitents in the narratives through aiding them in childbirth, and these legenda also often omit specific details about the laboring female body. In these miracle birth stories, saintly intercessors sometimes serve as physical assistants in the birth scenes, at least touching the laboring woman to give aid. Many legenda involve stories where the saints save the souls of others; unlike the midwife who forgets the correct baptismal formula,
they enable salvation instead of preventing it. In some cases, these saints actually provide care as midwives themselves; they are a holy substitute for the midwives who were being chastised and educated in the pastoral literature of the same time period. While universities were emphasizing the ignorance of female practitioners and pastoral handbooks were expressing skepticism about their morality, the valuable work of saints to help laboring women was unquestioned.

The birth miracles involve an intercessor, usually Mary Magdalene, Margaret, or the Virgin Mary, who helps the laboring woman and her child. The Virgin’s assistance was requested because of her own experience as a mother, though of course she did not suffer in the same way that ordinary laboring women do. Christ’s delivery was painless because of her own sinlessness. This held its own appeal, though, as women prayed to be delivered from their pain like Mary was. For example, one English prayer recorded in a handbook for priests asks for divine aid to make her birth experience like Mary’s:

“‘Merci iesu crist, fader / ant sone ant holi gost. Deleuere me of mine / childe aze wez aze yi moder milde was deleuered / of ye.’” The prayer is addressed to the Father, Son, and Holy Ghost, but the comparison with the earthly experience of the Virgin Mary implies the praying woman’s desired identification with the holy birth and the holy mother.

The English translation of Archbishop Gregorsson’s *Officium Sanctae Birgittai* (1376), describes the Virgin Mary serving as just such an aid to Birgitta of Sweden (1303-1373) before her conversion to holy life:

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Fell in one tyme þat scho [Birgitta] was in dispaire of hir life in trauellinge of childe, and sodanli þare entirde one woman, þe faireste þat eur scho saw, clothed in white silke, and laide hir hand on all þe partise of hir bodi, and als sone as þat woman was went furth againe scho was deliuered withouten any perell: and sho wiste wele it was oure ladi, als sho schewed vnto Bride eftirward.\textsuperscript{256}

This description of Birgitta’s vision emphasizes the physical movements and the touch of the Virgin. Although she leaves the room before the actual birth, she performs the kind of physical adjustment that midwives did for laboring women. She “laide hir hand on all þe partise of hir bodi,” which serves to deliver Birgitta from the threat of death and even from the additional pain of lengthy labor. This is one of the most explicit of these kinds of stories, as it does indicate that the Virgin touches Birgitta all over instead of just laying a hand on Birgitta’s body.

In Birgitta’s vision, the Virgin’s supernatural power becomes embodied through her actions as midwife, and there can be no shame in being touched by such a holy figure. Childbirth was an event that required the help of others with the shamefully visceral processes of the body. In the oft-cited passage on pregnancy and childbirth from the early thirteenth-century \textit{Hali Maidenhed}, written to persuade women to remain virgins, the author describes childbirth as unbearably painful and also shameful: birth occurs in front of the “alde wifes scheome creft þe cunnen of þet wa-siþ, hwas help þe bihoueþ, ne beo hit neauer se uncumelich, ant nede most hit þolien þet te þerin itimeþ.”\textsuperscript{257} Yet in tales of

\begin{footnotesize}
\begin{itemize}
\item[256] Ellis, ed., \textit{The Liber Celestis of St. Bridget of Sweden}, 1-2.
\item[257] “… old wives who know about that painful ordeal, whose help is necessary, however indecent it may be; and there you must put up with whatever happens to you.” Millet and Wogan-Browne, \textit{Medieval English Prose for Women}, 32-33.
\end{itemize}
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miraculous births, saints obscure the corporeal nature of the laboring woman through swift or near-painless labor.

Mary Magdalene was another of the holy figures associated with pregnancy and birth. Those miracles surrounding the figure of Mary Magdalene often were associated with her assistance to the barren and then pregnant and laboring duchess (also sometimes called the queen or princess) of Marseilles. This story is about Mary Magdalene’s life, not the miracles that occur after her death, yet she is able to help the duchess survive the difficult childbirth from afar. Mary Magdalene converts the duke and his wife, and as a result the duchess conceives a child in spite of her earlier barrenness. Pregnancy is therefore a reward for the couple’s conversion; like many legenda, this story emphasizes procreation and birth as positive. While at sea, the duchess bears the child, but the woman appears dead and the child cannot eat. The duke therefore leaves them on an island. Two years later the family is reunited and the duchess thanks Mary Magdalene for her midwifing assistance.

In the version of this story contained in the early-fifteenth-century collection *An Alphabet of Tales*, the duchess cries, “O, þou Magdalen! þou erte of grete merett, whilk þat in my childyng was medwife vnto me, & evur syne has helpid me in all my nedis!” Mary Magdalene’s continued assistance through the duchess’s life is

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258 This particular story is reminiscent of the Anglo-Saxon story of Appollonius, later translated by John Gower in Book 8 of the *Confessio Amantis*. Appollonius’s wife gives birth on a ship and the seemingly dead mother is left on an island, while the daughter is placed with a family to grow up. Gower, *Confessio Amantis*, Book 8, ll. 374-2004.

259 Banks, ed., *An Alphabet of Tales*, 313.
emphasized. Similarly, in Osbern Bokenham’s *Life of Mary Magdalene* (c. 1445), the duchess says,

‘Gramercy, lady, wych me helpyng
Where, þorgh þi greth grace & cheryte,
In alle þe pressurs of my chyldyng,
And my mydwyf eek vouchyddyst-saf to be;
And more-ouyr þorgh þi benygnyte
In yche nede to me were as redy
As euere was handmayde to hyr lady.’

Mary Magdalene’s role as midwife is particularly praised and the other assistance is not specifically named. Mary Magdalene has saved the duke and his wife in a number of instances, including converting them to Christianity and delivering the duchess from barrenness. Yet it is birth that is the duchess’s “moste grefe,” and it is the Magdalene’s role as “midwife in moste mischefe” that is praised here; these acts are particularly noteworthy to the duchess.

Sometimes these *legenda* compare the change in spiritual health with childbirth itself, and the spiritual assistant becomes a spiritual midwife as well as a literal one. Margaret was known as the patron saint of childbirth due to her experiences and the particular trials she suffered before her martyrdom. In the Margaret *vitae*, Margaret is a virgin who refuses marriage and is tortured and imprisoned by her thwarted suitor. She prays to be able to see her enemy before she dies and her prayer is granted when a devil

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appears in the form of a dragon. She defeats it in various versions with a sword, a cross, or simply with the sign of the cross, all of which split the dragon’s belly open, and thereafter she prays that women in childbirth might be aided if they think of her. She is associated with protection for children from the ninth century Latin and Old English lives, and the specific protection for mothers and expectant mothers is added in Wace’s Anglo-Norman life of Margaret (1135). Some versions of the Margaret prayer combine pleas for medical and spiritual help. A fifteenth-century life of Margaret found in Ashmole 61 reads:

    Iff any woman be with chyld,
    I praye to oure lady meke & myld
    Off hyre peynes þat sche be vbond
    And be lyuerd saue & [f]ond;
    Jhesu Cryst, I besech þe
    That, when sche callys vpone þe,
    That þou wold be þer socure!  

This association of the intercessor with medical assistance solidifies the concept of medical and spiritual aid as intertwined. What Margaret and Christ do for the laboring

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women is to “unbind” them from their pains. This evokes the special power of priests and the Church to “bind and unbind,” yet it is physical ailments – the ‘peynes’ of childbirth – that are the subject of this unbinding. The obligations of intercessor and medical professional are again interrelated.

John Lydgate’s version of the story of Margaret is even more explicit about the ways spiritual figures, or even divine ones, can aid as medical professionals do. Lydgate’s “The Lyfe of Seynt Margarete” (c. 1415-1426) mentions God as ‘leche’ to women in childbirth, as Margaret prays:

‘And Lorde,’ quod she, ‘to alle be socoure
That for thi sake done to me honoure.

‘And specyally to thee I beseche
To alle wymmen whiche of childe travayle,
For my sake, oo Lorde, be thou her leche;
Lat my prayere unto hem availe.
Suffre no myschief tho wymmen, Lorde,assaile,
That calle to me for helpe in theire grevaunce,
But for my sake save hem fro myschaunce.

‘Lat hem, Lorde, not perisshe in theire childynge;
Be thou her conforte and consolacyoun,
To be delivered thurgh grace of thyn helpynge;
Socoure hem, Lorde, in theire tribulacyoun.
This is my praier, this is myn orisoun,
And specially do alle folkes grace

That calle to me for helpe in any place! \footnote{263 John Lydgate, \textit{The Lyfe of Seynt Margarete}, in \textit{Middle English Legends of Women Saints}, edited by Sherry L. Reames (Kalamazoo, MI: Medieval Institute Publications, 2003), ll. 461-476.}

This prayer asks for “socoure,” spiritual aid or comfort, but it also asks that God be “her leche.” The word “leche” was often used to describe spiritual aid as well as medical, but in this context it is explicitly linked with pains of the body. Margaret does not say how she hopes the divine leech will help the laboring women, but her prayer ties these two forms of aid, physical and spiritual, together.

In one story about Mary Magdalene, the tradition associating these holy figures with spiritual and physical aid to laboring women is conflated with the delivery of pregnant women from death in any circumstance. In this miracle story in the \textit{Speculum Sacerdotale}, a fifteenth-century collection of sermon stories, a woman close to labor cries out to Mary Magdalene for help when she and others are caught in a flood:

But as the mayny were in drenchyng, it sterde in-to the mynde of a certeyn womman of hem that sche schuld crie and speke with as hye a voyce as she myȝt in these words: ‘O Seynt marie Magdalen, so wele beloued with Crist, I praye the by þy byttre terys þat þou wettest Cristis feet with for to delyuer me fro this peril of dep.’ And this same womman was grete with childe, and she made a vowe to God for to þeue hure childe ȝif that he schuld be a man to be made a monke in an abbey there-beside. And a-none there aperyd to hire a womman of gentel schap and put hire hande yn-to the womman and toke hire by the chynne and brouȝt hire
vp saf and sownde vnto the banke. And so was the womman delyuered þrouþ help of God and of Mary Magdaleyn, and alle the toþer pereschid ychone.  

Mary Magdalene “put hire hande vn-to the womman and toke hire by the chynne”; this is a very specific description of how Mary Magdalene helped a pregnant woman escape death by drowning in physical ways. She reaches down to the woman and takes the woman by the chin in order to lift her out of the water, just as a child might be drawn from the waters of the womb, though this connection is not explicitly made in the text. Although Mary Magdalene does not help in the actual labor process, she delivers the pregnant woman from certain death, thereby saving the lives and possibly also the souls of both woman and child, just as midwives were responsible for both body and soul of the women and children they assisted.

4. “Vanysshid Away”: The Removal of Bodily Signs

In some circumstances, pregnancy was a very clear indicator of adultery, and unwanted pregnancies would become public, and possibly unwilling, confessions of guilt, as discussed above. Sometimes, however, the pregnancy was concealed until the moment of birth, as in the case of Pope Joan. In several stories circulating in late medieval England, an unwanted fetus is removed by a holy figure, either through miraculously swift birth and delivery, or by simply disappearing. Just as these focus on mercy and grace instead of transgression and punishment, so the consequences of transgression – the pregnancies, painful childbirths, and children, are made invisible to society by the intercessors. If the woman is penitent, she may avoid exposure through prayer and

devotion, and her transgression will therefore not necessarily be made public. The
Northern Homily Cycle (c. 1315) contains a story about the Virgin laying her hand on the
womb of a pregnant prioress, thereby causing her to go into labor and avoid exposure and
punishment:

   Than sone to hir come oure Ladie
   And reprovid hir of hir folie,
   And on hir wambe scho laide hir hand,
   And this priores was all slepeand
   Delyvir of a knave chylde,
   That sithen was a gude man and a mylde.²⁶⁵

The Virgin Mary lays her hand on the “wambe” of the prioress and helps her deliver the
child through physical touch, just as midwives and birth attendants physically help their
charges. The sins of the mother are also not perpetuated on the child, who becomes “a
gude man and a mylde”; the consequences of the prioress’s action are mitigated for
herself and for her child through the physical touch of the Virgin.

   The importance of devotion in acquiring these intercessions of concealment is
made clear in a narrative where the Virgin Mary helps an abbess in a story in An
Alphabet of Tales. The tale is under a Latin heading about devotion: “Abbesses always
ought to subject themselves to discipline, and to have devotion toward the Blessed Virgin

Mary,” emphasizing the importance of devotion from the beginning. The abbess of this story “was called gude of gouernans bothe in wurde & dede; & with a spirituall luf sho did þe cure þat sho had taken of hir sisters, & with grete aw & straytnes, þe congregacion att sho had gouernan[s] of, sho compellid to kepe þer ordur.” She is valuable, therefore, because of her good governance, which any sin or indiscretion would ruin. She becomes pregnant, however, and her sisters notice her growing body and accuse her to the bishop. Her moral failings are literally embodied in her pregnant womb. However, the abbess, unlike Pope Joan, is explicitly described as being penitent, praying devoutly, and falling on her knees to the Virgin Mary throughout her pregnancy and as she awaits the coming of the bishop. The Virgin comes to the abbess and says she has interceded with Christ on the abbess’ behalf, and that the Virgin will therefore help her.

And onone sho was delyvur of hur childe, & our ladie chargid þies ij angels to hafe it vnto ane hermette, & chargid hym to bryng it vp vnto it was vij yere olde; and þai did as sho commaundid þaim; & onone our ladie vanysshid away. And þan þis abbatiss wakynd & grapid hur selfe, & feld hur selfe delyvurd of hur childe, & hole & sownde; & sho thankid almighti God & our blissid ladie þat þus h[ad] delyvurd hur. The passage does not address any labor, but simply announces that the abbess “was delyvur of hur childe.” She was in a private chapel and that may explain the fact that the

266 “Abbatissa semper subjectas sibi in dissiplina debet regere, et ad beatam mariam virginem deuocionem habere.” Banks, ed., An Alphabet of Tales, 11.

267 Banks, ed., An Alphabet of Tales, 11-12.

268 Banks, ed., An Alphabet of Tales, 11-12.
birth was not discovered by the sisters, yet the lack of any attendants, pain, or noise is notable when compared with the cautionary exempla. This birth thus emulates the virgin birth. It is not out of the sinlessness of the abbess that the birth is rendered so easy, however; instead it is through the kindness of the Virgin Mary and the penitence of the abbess. The implication is that the sisters must not find out or else they will devolve into immoral behavior in imitation of their leader.

The story continues with the aftermath of the birth in order to confirm its miraculous nature, focusing on the abbess’s virginal body and her later confession. When the bishop comes, the abbess says she is innocent but the bishop disbelieves her.

he said he wolde serge hur hym selfe; & so he did, & he cuthe not fynde in hur no synge ṭat sho sulde be with childe. And ṭan ṭis bishopp fell downe befor hur on his kneis, & askid hur forgifnes of ṭe wrong at he had done vnto hur; and all ṭaim ṭat had accusid hur, he chargid at ṭai sulde be putt oute of ṭe place. And ṭis abbatis besoght hym nay, and forgaff ṭaim at ṭai had saide vppon hur. And ṭan sho tuke ṭis bishopp in confession & tolde hym all how it had happend hur, & how owr ladie had delyverd hur; and ṭis bishopp had grete mervayle ṭerof.269

Like Pope Joan, the abbess commits her indiscretion while in a position of authority, yet unlike the Pope, her value to her community outweighs the ill effects her sin might have, and her penitence occurs before the birth and the intercession. At the very least, her prayers demonstrate the morally correct action when facing the consequences of sin; instead of simply going about her business publicly as Pope Joan does, the abbess goes to a private chapel and prays. Her desire to be forgiven and keep her authority over the nuns

269 Banks, ed., An Alphabet of Tales, 12.
is granted, while Pope Joan’s indiscretion is punished with a public scandal as well as with her death and removal from lists of popes. Additionally, the abbess’ confession to the bishop demonstrates her acknowledgement of male authority and of the Church hierarchy, while Pope Joan knowingly flouts this authority. Just as in the *exempla* where women are punished for their sins until they repent, these *legenda* emphasize that only women who repent may gain concealment of their transgression.

5. Conclusion

Nero’s story is associated with cruelty, lechery, and gluttony in various retellings, and could therefore provide a dramatic prohibition against each of these. Beth Allison Barr argues, “Exempla and legenda were rooted in reality. The point of sermon stories was to teach parishioners how to behave and what to believe. As such, the narratives providing examples to emulate had to be realistic enough to convince people of their value.” The Nero story does not describe an account that is realistic, but the narrative does touch both explicitly and implicitly on moral issues of concern in the religious climate of late medieval England. It is unlikely that ordinary parishioners intended to kill their mothers, perform dissection, or become pregnant by swallowing frogs, but the excesses of the story gave it vividness in the imagination, and its association with particular vices allowed it to serve as warning against those vices. In addition, the implied moral lessons about curiosity and the desire to understand the inner workings of the human body and human sexuality were clarified through the experiences

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270 Barr, *The Pastoral Care of Women in Late Medieval England*, 69.
and punishments of the characters. At the same time, saints became substitutes for fallible midwives like those discussed in Chapter 2 through their life- and soul-saving actions.\textsuperscript{271}

Birth imagery was utilized as a didactic tool for encouraging moral and spiritual growth. It provided a fertile ground for moral lessons about earthly concerns, with stories about earthly and concrete consequences and punishments. At the same time, as Nero’s story demonstrates, these \textit{exempla} had the potential to indulge in the same kind of curiosity about earthly affairs that they admonished, either through the fascination of the grotesque or the wonder of the miracle. These \textit{exempla} demonstrate the ways reproduction and procreation were represented both as dangerous and as potentially miraculous. Birth was seen as an event that created an opportunity for interaction with divine or holy intermediaries; it was at once viscerally corporeal and also potentially spiritual. As didactic tools, the \textit{exempla} are consistent; the sinner’s state of mind determines the outcome instead of any other factor. Just as Nero’s impious intentions are key to the condemnation of his interest in dissection, only those women who express devotion and repentance are granted the opportunity for penance and concealment of their transgression.

The narratives illuminate an increased presence of the pregnant body in religious didactic material, but often the pregnant or laboring body is either punished for the physical and public signs of transgression or else, through penitence, cleared of its transgressive signs. In some ways, then, these \textit{exempla} demonstrate that the female, and particularly the pregnant, body rested in a precarious and unstable place in both religious rhetoric and society. The pregnant and parturient woman has a body that is both readable

\textsuperscript{271} See above, Chapter 2, 41-42.
– visibly professing sin or punishment – and capable of acting outside the woman’s
desires. The body acts on its own, naturally and according to “kynde,” yet this visible
femininity also often forces the woman to make her transgressions public. These issues of
readability and visibility became even more potentially problematic when transferred to
the genre of drama. Exempla and legenda were read or heard, not performed on a stage –
but the late Middle Ages saw the advent of the cycle plays, where dramatic versions of
the birthing chamber were visible to the entire community.
CHAPTER 4

“TAST WITH YOUR HAND”: THE NATIVITY AND THE DOUBTING MIDWIFE

There is no birth in Christianity more momentous and miraculous than the nativity, when God became flesh in the world. Mary Fissell writes, “The central narrative about reproduction in late medieval England was a sacred one: the story of Mary’s miraculous conception of Christ.”\(^{272}\) She adds that women “were encouraged to identify with [the Virgin] while pregnant” so that they might have an easier childbirth, in emulation of the nativity. The mystery or cycle plays, which allowed people to perform and watch important religious events on stage, created the opportunity for audience members to empathize with what they were seeing.\(^{273}\) The cycle plays depict the course of salvation history, and they usually included the nativity as a major event in this cycle. Birth therefore was represented on stage, even if the nativity is a birth that is atypical in many ways. This, even more than the exempla and legend discussed in the previous chapter, allows us to see birth representations as rhetorical acts with particular valences modified by their performers and audiences. The cycle plays brought birth to a larger audience through visual means, extending the considerations of corporeality and knowledge that were discussed in the first two chapters.


\(^{273}\) Garrett P. J. Epp, “Ecce Homo,” in Queering the Middle Ages, eds. Glenn Burger and Steven F. Kruger, 236-251 (Minneapolis, University of Minnesota Press, 2001), 243. Gail McMurray Gibson also argues that the cycle plays are distinctly late medieval: “What fired the popular imagination about late medieval religion was religion’s focus on just these human rites of passage in the lives of Christ and his mother and his saints, events whose less holy but still recognizable patterns were revered and celebrated in their own lives.” Gail McMurray Gibson, The Theater of Devotion: East Anglian Drama and Society in the Late Middle Ages (Chicago: University of Chicago Press, 1989), 41.
Several of the plays involving the nativity included a familiarizing element that might surprise modern audiences: two midwives in a miracle story about belief and disbelief set in the first moments of Christ’s life on earth. The story of these midwives, the first with a variable name and the second always named Salome, has been largely neglected in medieval scholarship, except in inferences about late medieval midwifery practices that can be gleaned from their depictions. Yet the narrative provides humor, shock, and moral edification in preachers’ handbooks as well as on the stage, and the late medieval dispute over the veracity of the story can be tied to larger questions of faith and doubt, corporeality and divinity.

In the early fifteenth-century Chester play of the Annunciation and Nativity, Christ’s birth is depicted on stage, though details of the presentation are unclear.274 Joseph settles Mary in the stable and then goes to fetch midwives. He eventually returns, saying that he has found two midwives, Tebell and Salome. Mary responds:

\[\text{MARIA : Syr, the be welcome without were,}\]
\[\text{But God will worke of his powere}\]
\[\text{full sonne for mee, my lefe fere,}\]
\[\text{as best is nowe and aye.}\]
\[\text{Tunc paululum acquir(e)scunt.}\]
\[\text{A, Joseph, tydinges aright!}\]
\[\text{I have a sonne, a sweete wight.}\]

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Lord, thanked bee thow, full of might,
for preeved is thy postee.
Payne felte I non this night.
But right soe as hee in mee light,
commen hee is here in this sight –
Godes Sonne, as thou maye see.275

The birth is instantaneous and painless, and Christ’s exit from her body mirrors the way
Christ entered into her womb, “right soe as hee in mee light,” an important link in many
theological texts. But the scene does not end here. Shortly thereafter the two midwives
Joseph found arrive on the scene, and while Tebell immediately intuits that a virgin has
given birth and speaks her praise, Salome provides a more doubting response to the
miracle of the virgin birth:

    SALOME: Be styll, Tebell, I thee praye,
    for that is false, in good faye.
    Was never woman cleane maye
    and chyld without man.
    But never the latter, I will assaye
    whether shee bee cleane maye,
    and know yt if I cann.

    Tunc Salome tentabit tangere Mariam in sexu secreto, et statim arentur
    manus eius, et clamando dicit:

275 R. M. Lumiansky and David Mills, eds., The Chester Mystery Cycle, 2 vols. (London:
Oxford University Press, 1974), I.117-118. All future references to the Chester Nativity
play are from this edition.
Alas, alas, alas, alas,

mee ys betyde an evyll case!

My handes bee dryed up in this place,

that feelinge none have I.

Vengeance on mee ys nowe light,

for I would tempte Goddes might.

Alas, that I came here tonight,

to suffer such anoye.

Salome expresses her disbelief of both the miracle and her fellow midwife Tebell’s words, and she determines to test the claim. In this play she does not explicitly ask permission, and it is only through the stage directions that we see her attempt to touch Mary “in sexu secreto.” The actor’s outcries of woe and, perhaps, miming the loss of an arm would make Salome’s punishment clear to the audience, however. Salome’s automatic assumption that the Virgin is a sexual body like other women, with “secret places” that can and should be examined and touched, is punished. An angel then tells Salome to pray to the infant Christ, and she is healed. Yet the explicit nature of the scene, with the midwives acting an attempted examination of Mary’s genitalia, is both shocking and intriguing, and raises questions about the nature and form of belief in the play.

The nativity is the clearest intersection of religion and childbirth, yet its extraordinary nature renders it unable to be compared with regular birth in many ways. This chapter explores the depictions of the Virgin Mary’s labor and delivery in late medieval English texts and plays in order to demonstrate how the nativity scene may have functioned as a didactic tool. It also examines how the representation of birth and
midwifery on stage, however extraordinary a birth, may be understood in the context of
the widening audience for matters regarding female bodies and generation. It first
explores descriptions of the nativity that emphasize Mary’s cleanness and purity, and
especially the metaphor of light passing through glass used so often to describe the birth.
Mary’s body needed to be extraordinary, and though necessarily female and eventually
maternal, it needed to be distanced from the literal and metaphorical blood and filth
associated with parturient women. The chapter then examines the various forms of the
nativity midwife legend in late medieval non-dramatic textual variants, before returning
to the Chester play and other plays, in order to discuss the importance of materialism and
sight in the story. Nativity depictions often humanize the characters in some ways,
allowing audiences to have a window onto the private and sacred birth scene and making
it public, while at the same time emphasizing the differences from ordinary childbirth.
Finally, I discuss the ways in which these representations illuminate late medieval
English patterns of lay theology and devotion.

1. Light Through Glass: The Miracle of the Virgin’s Body

Not every medieval representation of the birth includes midwives; many accounts
instead emphasize the miraculous, otherworldly nature of the birth. A typical, and quite
common, representation of the birth is Nicholas Love’s *Mirror of the Blessed Life of
Jesus Christ*, an early fifteenth-century translation of the *Meditaciones Vitae Christi*,
which emphasizes the extraordinary nature of the birth in this passage:

> when tyme of þat blessed birþe was come, þat is to sey þe soneday at midniȝt,
goddes son of heuen as he was conceyued in his modere wombe by þe holi gost,
without sede of man, so goyng oute of þat wombe without trauaile or sorowe, sodeynly was vpon hey at his modere feet, & anone she deouhtly enclinande with souereyn ioy toke him in hire armes …

The focus of the passage is the lack of “trauaile or sorowe” and the suddenness of the birth, which provide evidence for the extraordinary nature of the nativity. There is a common metaphor used in medieval accounts of the nativity to explain the apparent physical impossibility of the virgin birth: that of light going through glass. This metaphor was frequently used to describe Christ’s conception as well as his birth, and some iterations elaborated on the idea of light passing through glass with both being unharmed. Many versions of the metaphor in various languages exist and it was used to describe both conception and birth, but in English texts it was much more commonly associated with the birth than with conception. The first known instance in English is from a thirteenth-century translation of the hymn “Stabat iuxta Christi crucem,” which contains the lines, “so gleam glidis thurt the glass / of thi bodi born he was.” The image of the gleam gliding through glass is a concrete way to visualize the birth without getting into the gore and mess of ordinary childbirth, and solidifies the conception of the nativity as extraordinary, unlike corporeal birth. Not only that, but the purity of the Virgin’s body is emphasized through comparison with the clear glass, and its unbroken nature is made


understandable through the visual image. The body of the Virgin functions as glass, allowing that light to pass through in ways that ordinary matter does not. Glass is not broken by the light that passes through it, just as Mary’s body is not harmed or bloodied by the passage of Christ through her. At the same time, glass does not ordinarily distort or harm the light that passes through it, just as Christ does not suffer during the birth. Glass is also clear, implying that Mary’s genitalia are not associated with filth as other women’s are. As glass is transparent, Mary’s virginity is made public through the miracle of the virgin birth. We have a supernatural view through this metaphoric glass into the womb that held Christ, and it becomes more public and more visible than other women’s wombs in its exceptional purity. Her glass-like body implies visibility of her innermost secrets, and a lack of shame, guilt, or even ordinary corporeality that she would need to hide.

The metaphor was occasionally used to describe conception but not birth, as in the *Lyf of Our Lady* by John Lydgate (c. 1370-1451): “Right as the sonne persheth thorugh the glas, / Thorugh the cristall, byrell or spectacle / Withoutyn harme, right so by miracle / Into hir closet the Faders sapience / Entrede I withoutyn violence.”

Light passes undistorted through glass, and neither light nor glass are harmed; in this way the miracle of the painless birth can be explained. The metaphor of light through glass relies on the association of Christ with the light of the world, but it also associates Mary’s body with glass. No violent and sinful activity like copulation was needed for him to enter into her body. The conception takes place “withoutyn harme” to either body or soul of Mary. In

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the use of the metaphor for the conception, it is clear that women’s virginity is both fragile and precious, and the act of sex has not defiled Mary’s virginity. Like the glass in the image, her body is obviously intact. Lydgate’s poem continues to focus on the exceptional nature of Mary’s body in the nativity even during the birth scene, as I discuss later in this chapter.

Other accounts use the glass metaphor to describe both conception and the birth, emphasizing Mary’s virginity before, during, and after the birth. In the popular late medieval *Speculum Sacerdotale*’s version of the Annunciation, Mary doesn’t doubt the angel’s words when he tells her she will conceive though still a virgin, but she does ask how it will be done. She is told that as light goes through glass, so Christ will go into and also out of her: “‘For riȝt as the beme of the sonne thirleth the glas withoute any fowlynge of the glas, right so the sone of God schall entre in-to thy chambere withoute lesyoun or fowlynge of the.’” And then, quoting Augustine, the *Speculum Sacerdotale* adds, “‘riȝt as the sonne passeth fro the clowde and the bernacle fro the tre withoute generacion, and as Adam fro the clene erthe, and as the erthe cometh of the erthe, and the beme fro the sterre, so passed Crist fro the Virgine.’” This version adds several other metaphors to help the audience understand the miracle of the birth, including the “beme fro the sterre,” which also relies on associations of light, and the phrase “Adam fro the clene erthe,” which emphasizes the cleanness, earth notwithstanding, of the source of that light.

Although the light through glass metaphor functions to explain the conception, the metaphors used to describe the birth sometimes demonstrate the exceptional nature of the

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son as well as the mother. In the *Speculum Sacerdotale*, some of the metaphors, like that of the barnacle and the earth, ascribe corporeal traits to the Virgin’s son, instead of comparing him to light or star beams. The mixture of metaphors thus demonstrates the dual nature of Christ, both corporeal and divine, and his birth miraculously real yet supernatural. In a poem by William of Shoreham from around 1325, the same metaphor about glass is used to describe the virgin birth, especially the qualities of Christ which permitted Mary to retain her virginity. The lines read: “As the sone taketh hire pas / Withoute breche thorughout that glas, / Thy maidenhod onwemmed it was / For bere of thine childe.”

The metaphor was used not only to praise the purity of Mary’s body, but also to highlight the corporeality, and even filth, of ordinary women’s bodies in comparison with the Virgin. A short prose religious text on the Virgin in the Thornton Manuscript, compiled between 1422 and 1454, describes the joys of the Virgin, including the following:

Als the son schynes thorowe the glasse and lyghtenys the place with Ine & the glas es noghte brokyne ne fylide of the sonne whene he schynes, nor whene he withdrawes his bemys nor aftire, bot es aye clere and hale: reghte swa, lady, whene the godhede schane in thy saule and tuke Manhede of the and was borne of the, thou was noghte fylide; but thou was halowede of his presence swa that Mighte neuer be felyde.282

This passage uses “swa” and lengthier explanations to demonstrate that this is an image like the birth but not identical to the birth. The author explicitly states the parallel the audience is supposed to get: that Mary was “halowede of his presence” instead of “fylide.” This is a step removed from saying that the infant shone through the Virgin’s unharmed and clean body like light. Instead, this is a metaphor designed to teach that the Virgin’s body is always pure, before, during, and after birth. Of course, this implies that regular birth results in the woman’s body being “fylide,” which the ritual of purification was intended to combat.283 This text implies it is not just the sin of the sex presumably involved in conception that makes procreation somewhat tainted; birth, too, creates its own filth that can attach itself to the child being born. The stigma of childbirth, separate from the sexual activity that precedes it, may be linked to the punishment of Eve. Genesis contains God’s statement that Eve will greatly suffer giving birth to children, implying


that painful childbirth is the result of Eve’s sin.\textsuperscript{284} As I argued in the previous chapter, particularly painful childbirth could be used to demonstrate particularly great sin involved in the conception of the child.\textsuperscript{285} Conversely, Mary’s lack of pain is obviously a result of her lack of sin, and her exceptional nature that has not inherited the curse of womankind resulting from the fall.

The version of the metaphor used in MS Harley 2253 makes the virgin birth even less corporeal, by specifically mentioning the sanitized “side” through which the Virgin bears the Christ child:

\begin{quote}
In hire lyht on ledeth lyf,
ant shon thourh hire semly syde.
Thourh hyre side he shon
ase sonne doth thourh the glas;
wornmon nes wicked non
seththe he ybore was.\textsuperscript{286}
\end{quote}

This version specifies that Christ is born “thourh hyre side,” making it easier to visualize the miracle of the nativity without also visualizing women’s genitalia. This change makes it even clearer that the nativity is not birth as ordinary women know it; the Virgin’s body

\begin{quote}
\textsuperscript{284} Genesis 3:16: “Mulieri quoque dixit: Multiplicabo aerumnas tuas, et conceptus tuos: in dolore paries filios, et sub viri potestate eris, et ipse dominabitur tui.” [“To the woman also he said: I will multiply thy sorrows, and thy conceptions: in sorrow shalt thou bring forth children, and thou shalt be under thy husband’s power, and he shall have dominion over thee.”]
\end{quote}

\begin{quote}
\textsuperscript{285} See above, Chapter 3, 101-102.
\end{quote}

\begin{quote}
\end{quote}
is so de-sexualized that the natural opening of the womb is not mentioned. Instead, like light through her opaque yet somehow insubstantial side, he emerges from her body. Her body is not damaged in any way, nor does she experience pain.

The metaphor heightens the sense of miraculous bodies, but it also emphasizes the lack of violence involved in the birth. The birth and death of Christ are often linked or melded in temporality in Marian lyrics of late medieval England; lines such as “The blyssfull chyld was borne, / To were a crown of thorne”\(^{287}\) collapse the events of Christ’s life and invoke his violent death even while describing his birth. Yet in many of the descriptions of the birth, especially those involving the glass metaphor, the absence of violence and blood that could be linked to the Passion is notable. Christ was born to wear the crown of thorn, but to balance the excessive suffering of his death, there is no “violence,” as Lydgate says, in his birth. Mary’s supernatural purity and painless birth are therefore emphasized, but this also makes it impossible to read her childbirth as a complement or parallel to Christ’s Passion.

In addition to the purity of Mary and the dual nature of Christ, the glass metaphor evokes one further matter: that of sight and knowledge. Glass allows light to pass through, which means Christ could pass without damage to himself or his mother, but this also implies increased visibility through the glass. If Mary’s womb is compared with glass, then it becomes more easily visible to the outside, and indeed, there is nothing in Mary’s body to invoke the shame that pregnant and parturient women and their

attendants experienced. This implication provides a striking contrast between the Virgin and ordinary women, as she could endure such an ordinarily shameful event without humiliation. Her birth narrative was therefore more easily and publicly narrated; it was both an important part of sacred history and an occurrence that need not be concealed.

While the purity of the Virgin’s body set her apart from ordinary women, the existence of her birth narrative in public discourse sometimes allowed other women to identify with it. Birgitta of Sweden’s vision of the nativity was highly influential, and it offers insight into the ways the virgin birth resonated with the mother-turned-holy-woman. Birgitta describes a vision in which she is a witness to the birth of Christ; she becomes the outside observer who provides the audience with a key to the nativity that they cannot get from the Virgin herself. Birgitta of Sweden (1303-1373) wrote her vision of the nativity in the mid-fourteenth century, a vision that contained a much more materialist version of the birth than the metaphoric descriptions of light and glass. Her vision argues for an essentially human birth that is also supernaturally holy. Her account was translated into Middle English in the early fifteenth century, and Birgitta describes the actual birth as follows:

And when sho [the Virgin Mary] had made all redi, sho knelide downe with grete reuerens and praied, and sett hir bake againe þe cribe, and turned hir visage to þe este and helde vp hir handes and hir een vp into þe heuen, and sho was raised in contemplacion with so grete a swetenes þat hard it is to tell. And þan saw I in hir wombe a þinge stire; and sodanli sho bare hir son. And þare com so grete a light

See above, Chapter 2, 39-46, on midwifery and shame.
and brightnes þat it passed þe brightenes of þe son, and þe lightnes of þe candill þat Joseph sett on þe wall might noȝt be sene. And it was so sodan, þat beringe of þe child, þat I might noȝt persaiue þe passinge furthe of þe childe. Neuirþelesse I sawe þat blisfull childe liinge naked on þe erthe, and he had þe fairest skin þat euir I sawe, withouten spot. Also I sawe þe secondine, þat is þe rim þat þe child was born in, liand all white. Þan herde I sange of aungells wounder swete and likinge.

And when þe maiden felide þat sho had born hir childe, sho bowed doune hir heed and held vp hir handes and wirshipe[d] þe childe, and saide to him: ‘Welcom mi God, mi lord, and mi son!’

And þe child, wepand and tremeland for colde and hardnes of þe pament, streked him to seke refresheinge. Þan his modir tuke him in hir armes, and streined him to hir breste, and with hir cheke and hir breste scho warmed him with grete ioy and lykynge. Þan sat sho doune on þe erthe, and laide þe childe on hir kne, and tuke him and laide him, firste, in on linen clothe, and siften in one wolle, and band his bodi, his armes and his legges with one band; and þan sho band two linen litill cloþis, þat sho broght with hir, aboute his heued.²⁸⁹

Some elements, such as the emphasis on light at the moment of birth, are similar to texts describing the birth in abstracted and worshipful terms, yet this is clearly a far more explicit description of birth. The translation explains some of the details of Mary’s pregnancy and birth to those who would not have experience with it, like the presence of an afterbirth, and omits some of the details present in the Latin like the shrinking of the

²⁸⁹ Ellis, ed., The Liber Celestis of St Bridget of Sweden, 486.
womb, which would have less impact on an unfamiliar audience. Yet there is no blood and gore, no pain, and the exceptional nature of the birth is all the more obvious when the details like the afterbirth are mentioned. Neither baby nor placenta has any blood, as Christ is “withouten spot” and the afterbirth is “liand all white.” As Mary Dzon remarks, “This has obviously been a swift and tidy procedure, involving none of the bodily trauma of natural childbirth, which Birgitta herself experienced on a number of occasions.”

There is no midwife, other than the observant but inactive Birgitta, at this birth, because the problematic aspects of birth are not present and Mary is therefore capable of midwifing herself. Yet the humanizing element of a birth attendant, a personal witness to the miracle of the birth scene, is still there.

2. Salome, Anastasia, and the Infancy Gospels

Birgitta’s observations give her readers a description of the nativity scene, but Salome gives more – she provides a potential stand-in for the late medieval audience, as she acts in recognizable ways as a midwife and performs tests to determine the veracity of miracles. There are no midwives present in the Biblical accounts of the nativity, the gospels of Luke and Matthew.291 Neither of these accounts gives much detail about the birth itself; the more detailed accounts come from the so-called Infancy Gospels, a set of three second-century gospels that describe aspects of Mary’s life, Christ’s birth and Christ’s childhood. These apocryphal gospels are the Protevangelium of James; the Liber


de ortu beatae Mariae et infantia salvatoris, usually called the Gospel of Pseudo-Matthew; and the Liber de infantia salvatoris, also called the Liber de Nativitate Salvatoris.\textsuperscript{292} The stories told in these gospels were remarkably resilient in later versions of the nativity, “despite early papal condemnation.”\textsuperscript{293} The Protevangelium survives in many Greek copies and seems to have been widely used in eastern religious material, including homilies in the eighth and ninth centuries, though it does not seem to have been frequently copied in its Latin translation.\textsuperscript{294} The apocryphal gospel that had the most success in Latin was the Gospel of Pseudo-Matthew, based extensively on the Protevangelium, which “was granted an enormous success, being transmitted by almost 200 Latin manuscripts.”\textsuperscript{295} Since the third apocryphal gospel was not widely copied and was based on the other two, the focus here is on the Protevangelium and the Gospel of Pseudo-Matthew.\textsuperscript{296}

Both of these infancy gospels contain the Salome story. The Protevangelium contains the Salome episode in most detail, though in this version the unnamed first


\textsuperscript{293} Booton, “Variation on a Limbourg Theme,” 55.


\textsuperscript{295} Voicu, “Ways to Survival for the Infancy Apocrypha,” 410-411.

midwife, convinced of a miracle, informs Salome, who is not explicitly identified as a midwife. Salome is punished with her withered arm after inserting her finger for a postpartum examination; she dares to test the nature of Mary, even though she obtains Mary’s permission first. She then has a conversion experience inspired by an angel, touches the infant, and is healed. The Gospel of Pseudo-Matthew also contains the apocryphal story, but with a few adaptations. The first midwife performs an examination of the Virgin and promptly believes in the miracle. She tells Salome, who doubts, performs a second examination, and is punished. Jean-Daniel Kaestli remarks, “the gynaecological examination as a way of proving Mary's virginity is not condemned in itself” in this version. Instead, it is Salome’s doubt of her partner and of the possibility of the miracle that incurs punishment; a second proof should not be necessary. Again, Salome is healed after touching the infant. These two versions of the doubting midwife contain punishment for either violating the sanctity of Mary’s body or doubting the evidence and one’s fellow midwife, and both of these versions focus on touching the infant as the healing remedy.

Although the Protevangelium and Gospel of Pseudo-Matthew continued to be copied in the early Middle Ages, midwives, whether named or not, are not particularly prevalent in nativity stories until the twelfth century. From the twelfth century, however, midwives are often depicted in medieval art and sculpture of the nativity, sometimes clearly the doubting Salome and sometimes simply midwives attendant on the Virgin. One Nativ

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298 Booton, “Variation on a Limbourg Theme,” 61.
Holy Trinity Church, Long Melford, Suffolk. Fourteenth century,” includes the Virgin lying on a bed and attended by a midwife. Gail McMurray Gibson argues, “Far from her apocryphal gospel of beginning, Salome, the midwife who doubted, now stands believing and attending at Mary's bedside, touching with a human hand the mystery of Incarnation, but her hand touches also the mystery, terrifying and necessary, of childbirth itself.”

Midwives bring the reality of childbirth to the fore, but I argue that their inclusion helps viewers identify with the scenes, rather than invoking the terror of childbirth and associating it with fear of the divine. If mystery is invoked, it is that the extraordinary elements of the nativity are heightened when the familiar midwife figure is present.

In art depicting the nativity, Anastasia of Surmium was sometimes conflated with Salome, since both had miracle stories involving problems with hands. Anastasia was a fourth-century saint who had been born with no hands and was miraculously given them after prayer. This story is sometimes conflated with Salome’s, so that Anastasia becomes healed when she expresses faith in the Christ child and is permitted to hold him.

Anastasia is often presented as the innkeeper’s daughter who finds herself at the scene of the nativity, as in the early fourteenth-century English illuminated Holkham Bible with Anglo-Norman captions. “The Holkham Bible … illustrates her [Anastasia’s] story in three scenes contained within a single folio; the Anglo-Norman caption identifies

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“Anestace,” although she resembles Salome in appearance because the woman has both hands. ³⁰⁰ The caption for the illumination reads:

Between ox and donkey

Lay this noble lady.

Such a miracle was done for Anastasia

When she held my lord Jesus.

Like Salome, Anastasia has the use of her hand(s) restored by the miraculous child. Yet there are key differences between Anastasia and Salome: Anastasia never doubts and is immediately rewarded for her faith, while Salome is punished for her lack thereof. The story of the fourth-century Anastasia is less frequently found in English texts than in continental ones, which might explain the unfamiliarity with her story that led to its conflation with the Salome story in some texts and art. ³⁰¹ In any case, the prevalence of artistic representations of midwives at the nativity from the twelfth century indicates that artists were imagining the scene to have the standard trappings of childbirth, even if the newborn was also radiating light and demonstrating his divine nature. Both Anastasia and Salome fall easily into the category of midwife or birth attendant, the woman who stands ready to receive the swaddled infant.

³⁰⁰ “Entre un boef e un ane / Gisoyt cele noble dame. / Tot miracle de Anestace fu / Caunt ele metoyt meyn desure Jesu.” Booton, “Variation on a Limbourg Theme,” 62. See also M. R. James, “An English Bible picture book of the fourteenth century (Holkham MS 666),” Walpole Society 11 (1923): 4, 12-13, plate IV. The Holkham Bible is now known as BL Add. MS 47682.

3. The Nativity Midwives in Handbooks and Other Texts

Textual descriptions of the midwives generally use language that emphasizes the miraculous nature of the nativity and the Virgin’s body, as in the light through glass metaphors. In the midwife versions, however, the miracle of the virgin birth is supplemented by the testimony of midwives, either as expert witnesses to the details that demonstrate the miracle, or as part of a secondary miracle in the withering and restoring of Salome’s hand. In all versions, the midwives add a childbirth element familiar to the late medieval audiences of the texts, as they represent the community coming together to celebrate birth. Yet they also, through their very familiarity, emphasize the strange and extraordinary events surrounding the nativity. Additionally, they provide commentary, especially in a late medieval England interested in questions of materiality and the use of material objects for devotional purposes, on how touch ought to be employed.

Two of the Latin texts dealing with the life of Christ most widely copied and translated in late medieval England are the Meditaciones Vitae Christi, composed by an anonymous Franciscan around 1300, and the Legenda aurea, compiled between 1260 and 1275 by Jacobus de Voragine. The former does not mention the midwives, but does emphasize Mary’s extraordinary ability to give birth alone. The latter includes the midwife story as one of the five ‘proofs’ of Mary’s virginity.\(^{302}\) The Meditaciones Vitae Christi omits the midwives, but calls Mary herself “both mother and midwife.”\(^{303}\) The


Middle English translations usually followed the same formula, as in the late fourteenth-century Middle English anonymous translation of the early fourteenth-century *Vita Sancte Marie*, by Thomas of Hales, itself based on the *Meditaciones Vitae Christi*. The passage reads, “No midwyf was þere, no seruice of wymmen was þere present. Marie hirself wlappede in cloþis þe ʒonge chylde; she was boþe modir & midwyf.”  

Although the focus in these texts is on the miraculous body of the Virgin, who is capable of delivering her own child, the sentence also contains references to ordinary birth by invoking the typical midwife and women attendants. The extraordinary birth is more readily explained by saying what it is not than what it is; even so, using the language of childbirth makes the nativity more intelligible at the same time that it makes it more elevated.

In the *Legenda aurea*, the midwife incident occurs as in the Infancy Gospels: Joseph returns with two midwives, Zebel and Salome. The text continues, “When Zebel saw that Mary was a virgin, she cried out: ‘Truly, she is a virgin and she has given birth!’ But Salome did not believe this and wished to examine her; thereupon her hand withered and died. Then an angel appeared and bade her touch the child; and immediately she was cured.”

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Just as in the Gospel of Pseudo-Matthew, it is not a postpartum examination

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that Salome is punished for; it is for her disbelief of Zebel’s explanation. And just as in both Infancy Gospels, it is touch that restores her.

In England, texts relying on the *Legenda aurea* sometimes mention nativity midwives, though not always the story of the doubting midwife. The fourteenth-century *Stanzaic Life of Christ*, translated and adapted from Higden’s *Polychronicon* and Jacobus de Voragine’s *Legenda aurea*, retains the midwives but omits the idea of the doubting midwife and instead emphasizes that they were there in order to prove the miracle of the birth. The *Legenda aurea* remarks that it is Salome’s doubt in the miracle that is castigated, but the *Stanzaic Life of Christ* explicitly says that it is Salome’s touch of Mary’s “private place” that causes her arm to wither. The *Stanzaic Life of Christ* is mainly based on the *Legenda aurea*, so this difference from its source material is notable. The author of the *Stanzaic Life of Christ* overtly frames the story as proof of Mary’s virginity in and of itself, instead of using the story as an *exemplum* about the consequences of doubt. The passage reads as follows:

> the fyrth euidence verrayment
> that we witen ho maiden was,

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was by expresse experiment
the mydwif preuet in þat plas.

ffor, as I told biforn now he[re],
two mydwyues we[re] wih hir al nyȝt,
þat one wold preue ȝif hit so we[re]
that ho we[re] maiden by full insight,

And quen ho towchet priue plas,
hir honde drieden vp onone.
and als hou Ihesu born þer was
ny in what maner wist not one,

ffor clos womb conceyuet he was
And clos womb als out he went,
this preues hir maiden ful of gras
by expresse experiment.307

In this version, the midwives are with her all night during the birth and are therefore
witnesses to the actual birth instead of happening on the scene after the main event is
over. Similarly, this nativity does not happen suddenly or instantaneously, but continues
all night, just as a typical birth might. In some ways, this nullifies the separation from
normal birth that many nativities emphasize; the Virgin is not alone, above normal
women, but instead she is among them as she participates in a most human activity. It

also eliminates most of the potential for exploring faith and materiality, as the midwives are actually present to witness the miracle of the virgin birth. There is no test for them here, no withered arm; instead of providing a model of the consequences of doubt, they provide evidence to supplement the nativity story. Salome, though unnamed, still performs her impious touch, and in this version it is explicitly the touch of Mary’s “priue plas” that causes her punishment, as it was in the *Protevangelium*. The miracle of the withered and revived hand is the point of the story, because it confirms the miracle of the virgin birth. Salome’s doubt is not even mentioned in this version; instead the story remarks that Salome touches Mary’s “private place” and then her hand is withered. The author is interested in the withered and healed arm as a testimony of the virgin birth, instead of as an *exemplum* about doubt.

John Mirk’s *Festial*, composed in the 1380s and intended for pastoral use, contains a brief description of the nativity that does contain the doubting midwife. Yet the *Festial*, like the Gospel of Pseudo-Matthew, focuses not on the touch itself as bad, but instead on the way in which the touch is administered. Mirk’s account is as follows:

> þenne a lytyl byfore mydnyght owre Lady bad Ioseph geton hure mydwyves for heo schu'lde be delyuer. But whyl he was in þe toune aftur mydwyves, oure Lady was delyuered and lappud hure Sone in cloþus and layd hym in þe crach byfore þe oxe and þe asse. …

> þen sone aftur come I[o]seph wyth too [m]ydwyves, þebel and Salome. But when þebel fond wel þat oure Lady was klene maydon, heo cryed anon and sayde: ‘A maydon hath boren a chylde.’ þen þe oþur, Salome, wol not leue þat but

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boysturly hondeled oure Lady, and þerwyth anon hure hondes dried vp. þen co[m] þer an angel and bad hure towch þe chylde and heo schul be hol, and so dude and was hol.309

In this version, þebel, too, finds that the Virgin is indeed a maiden, presumably through examination, but she is not punished. It is only after Salome doubts that she “boysturly hondeled oure Lady”; her lack of faith is physically demonstrated by the violence with which she touches the Virgin. A fifteenth-century revision of the Festial expands on this idea of violence, changing the lines to “Then Salome, þat oþer woman, rudely and boysously came to our lady. But she wolde not belive þat Mary was mayde, and violently layde hande vpon oure lady.”310 This adds the words “rudely” and “violently” to the Festial’s original description, bringing to mind the sexual “violence” the Virgin had avoided by the miraculous conception. The Virgin’s body should not be subjected to violence, either sexual or medical. These words also emphasize that Salome’s actions are not those of a caring, professional midwife attempting to assess the medical situation. Indeed, this passage contains valences of the superstitious practices and the lack of respect or knowledge about religion that real midwives were accused of in the late fourteenth and fifteenth centuries. If a midwife was too focused on worldly things to believe in the virgin birth, might she also omit or mispronounce the correct baptismal formula? Yet the passage in the 15th-century Festial version also contains a new phrase about Salome’s repentance and prayer, which the original Festial omits. It ends by


310 Powell, ed., The Advent and Nativity Sermons, 83.
remarking on how Salome’s healing demonstrates God’s mercy; the point of the story is thus ultimately about repentance and mercy, not punishment.

In Mirk’s version, it is not the testing touch but the failure to believe before that tactile proof that becomes important. In fact, touch is redemptive as well as punitive for Salome; the doubting touch that caused her injuries is paralleled with the prayerful touch of the child that heals her arm in most versions. It is not just prayer alone, but prayer and the appropriately reverent touching of the child that cure Salome. Caroline Walker Bynum has argued for a late medieval English culture that turned to the use of material objects during devotion, indicated by the proliferation of relics, and other holy objects. She writes, “Because of the paradox not just of Christ’s Incarnation (God in the human) but also of divine creation (God’s presence in all that is infinitely distant from him), matter was that which both threatened and offered salvation.”

The emphasis on matter in spiritual contexts made touch an important aspect of certain kinds of devotion. The wide use of relics, charms and prayers written on parchment and birthing girdles, and even the prayer-inscribed apple testifies to the intersection of materiality with spiritual matters, especially the safety of mother’s and child’s souls during childbirth. Salome’s doubtful and then faithful touches demonstrate the appropriate way to touch. Touching

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313 See above, Chapter 2, 36-37.
holy people and objects must only be done when one’s heart and mind are appropriately awed.  

Reverent touch continued to be verified as an appropriate way to approach holy objects and people through the nativity story in Lydgate’s *Lyf of Our Lady*, composed in 1420, which also contains a version of the nativity midwife story. Lydgate’s poem, parts of which are translated from the Latin *Meditaciones vitae Christi*, was popular until the Reformation and survives (in partial or complete form) in almost fifty manuscripts. In this lengthy poem praising the Virgin and telling the story of her birth, early life, the annunciation, the nativity, and the purification, Lydgate focuses on the extraordinary purity of Mary throughout. Derek Pearsall writes that Lydgate’s Marian poems “are totally lacking in the tenderness, intimacy, fervour, and pseudo-eroticism of the Bernardine and Franciscan traditions, and concentrate on the celebration of the mystery and splendour of the Virgin.” The mystery of the Virgin is not untouchable, however; in Lydgate’s version, touch is not necessarily a bad or impure thing. Indeed, there is a beautiful passage where a young Mary reads the prophecies of Isaiah and imagines having the good fortune to meet the virgin destined to bear the son of God. She prays:

> And also lord, on me safe þou vouche

> Though I therto, have nowe noo worthynesse

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314 This bears a resemblance to contemporary discussions of priests blessing the Eucharist. Duffy, *The Stripping of the Altars*, 92-107.


That holy mayde, forto handyll and touche
Myn owne ladi, and myn maystresse
And that I maye, with humble buxumnesse
Uppon my feet, in all my best wyse
Go vnto hir, for to do servise.\textsuperscript{317}

If Mary herself, the ideal of purity and humbleness, might ask to “handyll and touche” the virgin destined to bear the Son of God, than the impulse to touch must not be a bad one. Unlike in the Chester play, the desire for tactile contact is not punished.

The midwife scene in Book III of \textit{Lyf of Our Lady} follows the Gospel of Pseudo-Matthew’s emphasis on appropriate and inappropriate touch, as Salome’s irreverent touch does not seem to be done in order to test Mary’s virginity. In Lydgate’s version, when Joseph goes to fetch midwives, the stable is filled with the light of a new star before, during, and after the painless birth. Joseph returns with the midwives after the birth, and both Mary and Joseph pray to the child. The midwives are frightened of the light, so Mary goes to welcome them in. Lydgate emphasizes that virginity has granted her body extraordinary capacities that the midwives should recognize as miraculous, including the lack of blood and physical incapacity. Mary’s ability to walk so soon after the birth is taken as evidence of her virginity. The first midwife, Scephora, recognizes the miracle as a virgin birth without any proof other than what she sees, and she begins to cry and praise God. The passage continues abruptly:

And than a-noon, for the grete offense

And for wantruste, hir felowe Solomée
Opynly, that all myght it see,
Waxe in that Arme dede and colde as stone,
With the whiche she was hardy for to gone
The childe to touche of presumcion;
And his mothir, with-outen Reuerence,
Devoyded of drede or devocion,
Or eny faythefull, humble aduertence,
Done as hir aughte to his magnyfycence.
Where-fore a-noon, for hir high trespaces,
All opynly in that same place,
She pun[i]shed was, that all myghten se

The “offense” is mentioned without explanation at first, and the punishment described before the actual misdeed is, perhaps relying on the audience’s presumed knowledge of the episode. In this version, it seems that Salome has touched both the child and the mother “with-outen Reuerence” – it is not that Salome doubted and wanted to conduct an actual examination of the Virgin’s genitalia to test her virginity. Instead, it is a more abstracted lack of “drede or devocion” that she is punished for, accompanied by the unsolicited touch of both holy persons. The inclusion of the infant in Salome’s doubting touch indicates that the problem was not with inappropriately intrusive midwifery or an attempt to determine virginity; it is impious touch in general that is punished.

Lydgate removes the most shocking elements of midwifery from his version and makes the impious touch happen to both Mary and Christ, though he keeps the emphasis on proper faith and removal of doubt. Katherine O’Sullivan argues that Lydgate’s version engages with theological questions, but only in such a way as to be clearly “canonical” in its approach.\(^{319}\) He, like Mirk, emphasizes the appropriate way to touch, with reverence and devotion, instead of with doubt that needs to be assuaged. Yet his ‘good’ midwife believes without touching, but only through the evidence of her eyes; though touch is not prohibited, it is not an important element of devotion at the nativity. Neither midwife ever attempts to practice their profession through genital examination. Instead, they simply demonstrate how to appropriately touch holy objects.\(^{320}\)

In this passage, and throughout the scene, there is also a heavy emphasis on sight and touch. The withered arm becomes Salome’s doubt made visible; her punishment “that all myghten se” because she herself did not see the miracle that she was presented with. Indeed, Lydgate’s miracle is a visible one, as he does not actually have either of his midwives conduct examinations. It is the lack of visible blood or mess and the Virgin’s mobility that are noted as evidence for the miracle. It is also the very visible light from the star and the child. It is certainly not the ‘secret’ miracle of the Virgin’s intact body that is the proof here. Lydgate’s midwives are far less explicit about the details of what

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\(^{320}\) This has interesting parallels with the late-fourteenth-century poem “Cleanness,” which explains through narratives how God is offended by filth and sin, and pleased by virtue and cleanliness. Part of this cleanness is reverence in one’s approach towards, or touch of, the divine: “Reken with reverence pay rychen His auter, / Pay hondel þer His aune body and vsen hit bope.” Malcolm Andrew and Ronald Waldon, eds., The Poems of the Pearl Manuscript, 4th ed. (Exeter: University of Exeter Press, 2002), 111.
they experience than those on stage. The midwives in Lydgate’s story do not have the opportunity to prove their faith, as it is what they see that they are expected to believe.

Salome’s disbelief in the miracle of the incarnation is often compared to the apostle Thomas’s skepticism in the face of the resurrection.321 In the story of doubting Thomas in the Gospel of John, Thomas had to place his hand in the wound on Christ’s side before he would believe that Christ had indeed risen. Mirk writes the story in his Festial, but the treatment of Thomas’s skepticism is different from that of Salome’s. The story is framed as valuable because Thomas “preuet so oure fey þat he laft not scrupul in no part þerin.”322 Although Jesus says to Thomas, “‘þou hast yseye me, þefore þou leuest, but blesset be þey þat seye me not and byleven in me,’” he does not condemn or punish Thomas. Although Thomas requires sensory evidence, Mirk praises Thomas for this incident because it granted later doubters evidence to help them believe.323 Mirk’s narrative about Salome has no such framing, and simply relates the facts in a few brief sentences without any discussion of the implications for later Christians.

The emphasis on signs, whether visual or tactile, in the Salome story seems to have the opposite effect of the message of the doubting Thomas story, where it is those who believe what is unseen who are labeled the truly faithful. At the same time, Mirk’s emphasis on the positive aspects of Thomas’s doubt indicate his respect for experiential evidence in matters of faith; it helps people to become and remain faithful. After

321 See, for example, Ryan, “Playing the Midwife’s Part,” 441.


recounting Thomas’s story, the sermon in Mirk’s *Festial* continues to explain that Thomas’s hand, after his death, caused a number of miracles to those who touched or saw it.³²⁴ Touch was a vital component in devotion in late medieval England. Not only remains of the saints but also holy objects that were used or worn by the living saints, or were associated with the remains, were imagined to have assumed a portion of the sanctity or virtue of that saint – sometimes called contact relics.³²⁵ This was a major factor in some contemporary objections to devotional practices, and so became all the more important in orthodox theology. In the Salome story, however, the lesson is to believe the miraculous sensory evidence that is readily available but not to insist upon additional, especially tactile, evidence. The *Festial*’s description of miracles based on Thomas’s hand and touch condones Thomas’s desire to touch and feel the corporeal presence of the divine, but Salome’s story simply condemns her and her touch. Mary’s body provides concrete proof of the miracle of her virginity before, during, and after Christ’s birth, yet Salome is reproved far more definitively than Thomas for her skepticism in all versions of this story. Her withered arm can be read as a warning against the desire to feel divine presence physically, and especially, perhaps, against female desire to touch the sacred. Mirk’s presentation of both stories indicates that it is not sensory evidence and testing in general that are condemned, but only the test of Salome, a woman attempting to determine the veracity of a miraculous female body.


4. Enter Midwife, Stage Right

At this point I return to the issue of drama and the staging of the nativity in the cycle plays. The performance of the plays was a visual experience; it had the potential, therefore, to stand in for the visual signs of the miracle of the virgin birth. The audience, too, became a participant in the drama of faith and doubt, and members gained a view of the private yet simultaneously public space of the nativity. In the plays with the doubting midwife, they might also see the consequences of doubt.

Both the N-Town and the Chester cycles contain the midwives, but the York cycle does not. The York cycle’s Nativity play, as Ruth Nisse argues, is about how “Mary experiences the birth of Jesus as a moment of the highest contemplative ecstasy,” and is modeled after Birgitta of Sweden’s nativity vision. The play thus places itself at the intersection of internal contemplation and external experience by laying the vision open through drama to a wide audience. This has the effect of expanding the birthing chamber

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326 Gibson discusses staging of the annunciation, representations of homunculi entering Mary’s womb, etc, especially in relation to stage techniques, special effects, and other kinds of dramatic props. The N-Town cycle pays particular attention to dramatizing this; especially because they have the wooden house that looks like where the annunciation occurred. The porta clausa is "the locked door in Ezekiel’s vision of the new Temple (Ezekiel 44:1-2)" and was used to represent how Mary “during and before and after childbirth remained virgin.” Gibson, The Theater of Devotion, 154.


from a private space with only the Virgin and her son – Joseph is always outside or off on an errand – through the medium of the textually-confined vision and the observer Birgitta, to a scene that could, albeit with actors in costumes, actually be viewed by the people at large. When this was staged, there was no longer one female mother-turned-birth attendant. Instead, the audience members served as attendants, regardless of sex or experience.

In the nativity scenes in the Chester and N-Town plays, however, the midwives are present in the scene, and the audience members could observe and learn from them. Birth as a visceral and corporeal event is juxtaposed with birth as spiritual and miraculous event in these representations, and Salome’s response in the Chester play provides an exemplum to the audience of how not to respond.\textsuperscript{329} Garrett Epp has argued that in the context of the cycle plays, the awareness of an actor's physical body can take the viewer out of the fantasy of the play. Thus, Epp argues, a Christ who is too physical, too human, can be blasphemous.\textsuperscript{330} Similarly, a midwife and a laboring woman had the potential to become too real, too human, through their corporeality as bodies on a stage, especially when there was an attempt to test virginity on stage.\textsuperscript{331} Yet the presence of the midwife

\textsuperscript{329} Lumiansky and Mills, eds., \textit{The Chester Mystery Cycle}, I.117-118.

\textsuperscript{330} Epp, “Ecce Homo,” 246.

\textsuperscript{331} Kathleen Coyne Kelly has persuasively argued that the physical traits of virginity were fluid and contested throughout the Middle Ages, but it is likely that legal virginity tests involved seeing or touching the genitalia, as women, instead of male physicians, were asked to perform them. Kathleen Coyne Kelly, \textit{Performing Virginity and Testing Chastity in the Middle Ages} (New York: Routledge, 2000), 36. The signs of virginity did not include the presence of a hymen, as medieval medicine did not generally admit its existence or intactness as sign of virginity. Esther Lastique and Helen Rodnite Lemay, “A Medieval Physician’s Guide to Virginity,” in \textit{Sex in the Middle Ages}, ed. Joyce Salisbury, 56-79 (New York: Garland, 1991), 58.
was also a normalizing element, giving the miracle more of the feel of an event that many women would have experienced first hand, either giving birth themselves or helping neighbors and family members to do so. Sue Niebrzydowski writes, “The Chester and N-Town playwrights incorporate the apocryphal narrative, found in the *Protevangelion* and the *Pseudo-Matthew* of midwives, Zelomi and Salome, who attend Mary. They do so in a manner that brings Mary’s experience closer to that of the women in the audience, and underlines the unique purity of the Mother of God.”

The N-Town play continues this representation of midwifery as normalizing when Salome introduces herself through reference to all the women she has helped:

*Salome:* Be of good chere and of glad mood –

We tweyn mydwyvys with thee wyll go.

Ther was nevyr woman in such plyght stood

But we were redy her help to do.

My name is Salomee – all men me knowe

For a mydwyff of wurthy fame.

Whan women travayl, grace doth growe.

Theras I come, I had nevyr shame.  

This passage in some sense defends both midwifery and even birth itself as a worthy “travayl” for a woman to engage in, since it results in grace. Carole Rawcliff reads the passage as follows: “Although one of them is briefly punished for questioning Mary’s

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332 Niebrzydowski, *Bonoure and Buxom*, 159.

virginity, the two obstetrics who attend the birth of Christ in the East Anglian N-Town play otherwise appear as practitioners of a reputable calling, albeit one superfluous at a virgin birth. Their arrival on stage may have prompted some comic business, but Salome’s address to Joseph, as concerned as any normal father ‘to saue my wyff from hurt and greff’, is far from satirical.”

334 The nativity is the prime example, but this passage presents every birth as both full of grace and shameless, stepping back from the light through glass metaphor and its implications of the filth of ordinary birthing practices and experiences. As discussed in the previous chapter, particularly painful childbirth could be linked with sinful behavior; yet suffering could also be read as penance or imitatio Christi, a way in which people could identify with the suffering Christ. Mary herself may not have experienced those pains, but the mention of women’s “travayl” in the N-Town play is validating. Additionally, midwives’ work is defended, as Salome argues that “Theras I come, I had nevyr shame.” Her work is valued, she says, and it is not shameful. Again, this may reflect some of the fifteenth-century doubts about midwifery that arose, especially those focusing on the shame of having a midwife perform genital examinations. Salome confidently says that there is no shame in what she does, implying that the act of birth itself is not shameful, nor is the gathering of women and the physical assistance that accompanies it. Salome seems assured of her contemporary fame, as she says “all men me knowe,” but this must also have resonated with her fifteenth-century audience as they watched the familiar story played out in front of them.

The N-Town plays also contain a brief description of the conception of Christ that uses the glass metaphor: “Lyke as the sunne doth perysch / -pierce the glas, / The glas not hurte of his nature, / Ryght so the godhed entryd has / The virgynes wombe and sche mayd pure.”

The N-Town cycle is one of the few places where midwives and the light through glass metaphor intersect, but it is important to note that the metaphor is not used to describe birth here. A birth wholly describable by light and glass parallels contradicts the ideas of essentially human, if miraculous, birth. The midwives are figures that serve to remind a reader or an audience of the ties to humanity, while the glass metaphor distances the Virgin and her son from normal human experience.

The N-Town play continues along the lines of the Gospel of Pseudo-Matthew with two examinations instead of one, as Zelomy, the first midwife, asks to touch Mary to determine whether she needs medicine or comfort. Mary says she needs nothing because the birth was painless, but she then does invite Zelomy to perform an examination:

Maria: I am clene mayde and pure virgyn:

Tast with youre hand yourself alon.

Hic palpat Zelomye Beatam Mariam Virginem, dicens:

Zelomy: O myythfulle God, have mercy on me!\(^{336}\)

Zelomy immediately recognizes that there has been a miraculous virgin birth, and invites Salome to see the Virgin’s milk-filled breasts and the clean child as evidence of the virgin birth – after her own physical palpations she turns to the visual evidence as conclusive. She, too, uses her expertise as midwife to assess the situation, yet in

\(^{335}\) Breeze, “The Blessed Virgin and the Sunbeam through Glass,” 58.

\(^{336}\) Sugano, ed., The N-Town Plays, 139.
Zelomy’s case it is in order to prove the miracle she sees and at the express invitation of Mary. Salome says she “shal nevyr trowe it, but I it preve / with hand towchynge, but I assay,” indicating that she is resistant to belief and will only be convinced by touch. Mary still invites Salome to touch her in order to believe:

*Maria:* Yow for to putt clene out of dowth,
towch whi youre hand and wele asay:
Wysely ransake and trye the trewthe owth
Whethyr I be fowlyd or a clene may.

*Hic tangit Salomee Mariam et cum arescerit manus*

eius, ululando et quasi flendo dicit:

*Salomee:* Alas, alas, and weleawaye,
For my grett dowth and fals beleve!
Myne hand is ded and drye as claye!
My fals untrost hath wrought myscheve!

Mary’s acquiescence to the second request for a post-partum examination allows a direct comparison between the two touching midwives. One touches with the intention of healing and helping, and then proclaims her faith immediately. The other touches because she already doubts; she is the one who has been told of the miracle by others and yet does not believe. In late medieval English religious culture, the model Zelomy provides of the immediate conversion of someone who has just discovered Christianity is far less relevant than the one Salome provides. Salome is the parishioner who refuses to listen and learn from others but instead doubts until she receives a miracle she can touch and

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feel. In its way, then, this is an implicit condemnation of aspects of the materialist trends in devotional practices; as with doubting Thomas the Apostle, to whom Christ said, “Because thou hast seen me, Thomas, thou hast believed: blessed are they that have not seen and have believed.” Thomas needed the physical proof of placing his hand in the wound of Christ after the Resurrection before he would believe that Christ had risen from the dead. Zelomy does this as well, and Mary allows the test by touch, but just as Christ said to Thomas that those who follow and believe without proof are more blessed, so is Salome implicitly condemned for wanting to repeat the test. Those who believe in the virgin birth, or in any other Christian miracle, without the proof of sight or touch are therefore praised more than those who rely on the senses. Salome’s withered arm can be read as a warning against the desire to feel divine presence physically. Carolyn Walker Bynum’s *Christian Materiality* analyzes the use and function of material objects in devotional practice, arguing that Western culture, “never completely lost an awareness that … manifesting the divine in the material is at best a paradox, at worst an invitation to idolatry.” Even as late medieval devotional practice often revolved around the sight or touch of relics or the Eucharist, Salome’s story indicates that there was not unqualified cultural endorsement of devotional touch.

In any version of the story, however, the signs that the midwives are given, and their responses to those signs, raise the issue of verification through the senses versus true faith. The Salome narrative therefore both questions and validates women as observers.

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and receivers of sensory evidence, through descriptions of the midwives’ collection of that evidence to support their readings of the nativity scene. Mary’s body provides tactile proof of the miracle of her virginity before, during, and after Christ’s birth, yet Salome is reproved far more definitively than Thomas for her skepticism in all versions of this story. Thomas putting his hand in Christ’s side can be clearly paralleled with Salome putting her hand on Mary’s “syde,” yet they are treated differently by these holy figures. This gendered response to touch invokes the story of Christ’s response to Mary Magdalene seeing him after his resurrection. He said to her, “noli me tangere,” while Thomas was allowed to touch him to confirm the Resurrection; the touch of a woman in order to verify a miracle is again condemned.

Unlike in the Chester play, the N-Town version portrays Salome’s hand as “ded” instead of unfeeling; this invokes the spiritual death that results from doubt. Merrall Llewelyn Price reads this passage as being an anti-Semitic commentary on the need for tactile or sensory proof for the miracle of the virgin birth, saying that Salome, “following the Pauline stereotype of the Jew as stubbornly blind to the truth, prefers to place her faith in her own common sense and experience of the world.” Her analysis of the tradition of anti-Semitic references to proof is persuasive and there certainly seem to be elements of that present here. Yet as Price notes, the specific references to Salome as Jewish in heritage and faith in the Protevangelium are removed here. The emphasis in both Chester and N-Town plays seems to be on Salome as a midwife and as doubter, a


practitioner who is unable to forget her experiential knowledge in order to accept the miracle, and a stand-in for all who do not yet accept the miracle of the virgin birth but can still be convinced of it.

Later, however, Salome laments, “Alas, that evyr I her assayde!” This implies that she had in fact tested the Virgin’s claims, that her action was more a result of doubt than the action of a practitioner to determine the status of a post-parturient body. Price adds, “both women touch Mary’s genitals in the N-Town ‘Nativity,’ but in entirely different spirits: Zelomye because of concern for Mary, Salomé, as she immediately recognizes, because of her desire to ‘tempte’ Mary.” Caroline Bicks argues that this is a demonstration of good and bad midwifery: “A good midwife only touches in order to help care for the body, while a bad one trespasses upon it.” There is more going on here than commentary on medical practices, however, because this is no ordinary birth but a miraculous one. The first midwife demonstrates an appropriate form of practice wherein she is receptive to miracles without tactile proof. She uses her knowledge of the female body to confirm Mary’s extraordinary nature. Salome, on the other hand, uses her knowledge of the female body to reason that Mary’s body, because female, must therefore function as other female bodies.

In the Chester play that this chapter opened with, touch is particularly condemned. The emphasis in this version is clearly on Salome’s touching hands, despite the visual nature of the theater. The audience watches Salome touch (or at least appear to touch) the

342 Sugano, ed., The N-Town Plays, 140.
343 Price, “Re-membering the Jews,” 442.
344 Bicks, Midwiving Subjects in Shakespeare’s England, 67.
Virgin’s genitalia, after announcing her intention to “assaye / whether shee bee cleane maye.” As a practicing midwife, Salome’s desire for evidence immediately focuses on the physical and on the tactile, instead of the verbal. Tebell does not desire tactile proof because she allows the testament of her eyes and her heart to suffice, while Salome’s understandable reliance upon her skills, training, and experience backfires horribly. The lesson is clear; where the Christ Child and the Virgin are concerned, experience can never give sufficient understanding. Faith without proof is the only viable response. In fact, it is particularly in her sense of touch that Salome is punished; her hand is so withered that “that feelinge none have I.” Her ability to sense via touch is taken away because of her overreliance upon her senses to prove miracles. But if she had relied on the sense of sight as proof, she would have been rewarded; it is in her doubt of the ocular proof that she is condemned.

Salome’s desire to sexualize the Virgin – in the sense of assigning a sexed body to her – is particularly intriguing in light of late medieval trends in humanizing the nativity and the Passion, in relation to both Christ and his mother. Sue Niebrzydowski argues that the presence of the midwives in the Chester and N-Town plays “brings Mary’s experience closer to that of the women in the audience, and underlines the unique purity of the Mother of God.” The tactile proof of miraculous virginity that Salome desires is exactly the kind of materialistic approach to miracles that is a subject of debate in late medieval England, and the intersections with the medium – theater that gives visual form to Biblical miracles – again mirror that debate on physical proof.

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345 Lumiansky and Mills, eds., The Chester Mystery Cycle.

346 Niebrzydowski, Bonoure and Buxom, 159.
Salome’s cure is effected in different ways in the fifteenth century than it is in most of the previous versions. With the exception of the fifteenth-century version of the Festial, the fifteenth-century versions do not include Salome’s touch of the child. Instead, the Chester play omits the healing touch entirely, while Lydgate and the N-town author shift the action to a touch of the child’s cloth wrappings instead of his body. Caroline Walker Bynum has argued for a late medieval English culture that turned to the use of material objects during devotion, indicated by the proliferation of relics and other holy objects, which made touch an important aspect of certain kinds of devotion. This emphasis on touching the child’s garments instead of his body shows a concern with the kinds of contact relics that the medieval audience might be familiar with, like cloth that had belonged to a holy person. Just as with the signs of virginity, which included details of midwives’ duties that a contemporary audience might have been familiar with, these later versions mention the kind of devotional act a parishioner might have made in touching a holy object.

One contemporary source suggests that the cycle plays did have an effect on parishioners’ beliefs – and especially women’s beliefs – about the power of touching holy objects. The early fifteenth-century poem “Pierce the Plowman’s Creed” has a passage about midwives in the Nativity plays and implies that they are responsible for women’s superstitious beliefs about charms and girdles:

And at the lulling of oure Ladie, the wymmen to lyken,

And miracles of mydwyves, and maken wymmen to wenen

That the lace of oure Ladie smok lighteth hem of children.

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The prechen nought of Powel, ne penaunce for synne,
But all of mercy and mensk that Marie may helpen.\textsuperscript{348}

These lines chastise the plays for refocusing audience attention on the midwives and the power of the Lady’s smock – a material object – in aiding them. The poem therefore argues that the plays would have done better to preach or teach about penance. This poem also implies that the presence of the midwives does more to persuade the audience about the ability of the Virgin to help late medieval childbirth than it does educate them about what happened at the nativity scene itself. The midwives’ touches provide commentary on how touch ought to function, and how material objects are to be treated. This author takes a step further in identifying the midwife episode as a demonstration of the Virgin’s ability to help contemporary women in childbirth through scraps of fabric or other material objects. For this author, however, faith and penance are identified as far more important lessons than how to appropriately touch holy bodies or use material objects for the relief of pain.\textsuperscript{349} The superstitious use of objects is linked to feminine forms of belief, and is supplanted in this poem by a non-object-oriented system of devotion that is implicitly aligned with masculinity and rationality. It was not until well into the sixteenth century, however, that the Chester plays were shut down and the Salome story ceased to


\textsuperscript{349} Caroline Walker Bynum writes, “It is clear that Waldensians and Lollards came to reject images, Eucharistic miracles, and other forms of holy matter in part because they objected to the wealth and power of the clergy who consecrated or managed them.” Bynum, \textit{Christian Materiality}, 170.
be performed; the play seems to have prevailed over the “Pierce” author’s plea for quite some time.

5. Conclusion

The nativity in the cycle plays, with and without its apocryphal midwives, uses birth as a means to raise the problems of sensory proof and explore the nature of the Virgin’s miraculous body. The light through glass metaphor demonstrates the extraordinary capabilities of her body and that of her son and evokes the wonder and mystery of the virgin birth. Yet at the same time, it emphasizes the strange and unintelligible nature of the holy bodies, as they act unlike material bodies in this most natural and common event of childbirth. Birgitta’s vision provides a bridge to the midwives through her silent but awed presence as onlooker at the nativity. Her description of the afterbirth and other details of the birth simultaneously provide references to the experiences of ordinary women during birth and emphasize how different the nativity is from those experiences. Similarly, the apocryphal midwives give familiarity to the story. The apocryphal narrative of Salome, as it appears in late medieval England, links the medical, the literary, and the spiritual in its descriptions of the nativity scene, and demonstrates the importance of gender at the intersections of these fields. The story focuses on female bodies throughout – on their capacities and vulnerabilities, and on the ways women’s medicine and spirituality were tied together. The versions frequently elaborate on the signs of virginity a late medieval audience would have understood, comparing the nativity to contemporary childbirth. The narrative responds to contemporary desires for corporeal signs of female sanctity through its elaboration of the
physical proofs of virginity. Although Salome’s story ostensibly condemns experimentation and the desire for sensory evidence, these versions carefully distinguish between good touch and bad, and between faithful verification of miracles and doubtful tests. It demonstrates that midwives are particularly well suited for the spiritual aspects of their job, as they have experiential and sensory evidence of how the female body works, but it also cautions that midwives must approach these aspects of their profession with humility and careful attention to their inner, spiritual sight. The narrative presents late medieval midwifery as resisting the overlay of male, privileged, and theoretical knowledge, while also confining female experiential knowledge inside the limits of prescribed areas; touch must be both careful and devotional. As Salome’s story reveals, gender is a vital factor in the importance of experience-based knowledge in both medicine and devotional practice. The liminal status of midwives and birth attendants in both medicine and religion make them particularly valuable figures for the analysis of gender, the senses, and new paradigms of knowledge in late medieval England.
CHAPTER 5

“3IF YOULE WYLTY CHYLDEN A CHYLD TO GOD”: METAPHORIC BIRTH AND MIDWIFERY

While birth and midwives were making an appearance on the stage in fourteenth- and fifteenth-century England, they were also entering a different genre: visionary texts written by and about women. The visions of women such as Birgitta of Sweden and Catherine of Siena were being translated into English, many of which integrated language and metaphors arising from their authors’ experiences as women. Although childbirth metaphors had long been used in Christian rhetoric, these texts often added vibrancy, detail, and a sense of communal support and obligation to the meaning of rebirth. Just as birth descriptions were used didactically in sermons and plays, they was frequently used metaphorically in visionary texts to explore, explain, and sometimes even justify spiritual experiences.

Margery Kempe, a woman deeply inspired by the writings of other visionaries, tied her experiences of childbearing with her spiritual rebirth, or calling to holy life. Margery’s Book says that the beginning of her spiritual path began after her marriage and

350 It is important to note that many visionary texts may not be the unadulterated language of the female visionaries, but were instead produced with, or later amended by, religious men. Determining whether the visionary or her amanuensis wrote specific portions of the text proves an impossible distinction to make. See Janette Dillon, “Holy Women and their Confessors or Confessors and their Holy Women? Margery Kempe and Continental Tradition,” in Prophets Abroad: The Reception of Continental Holy Women in Late-Medieval England, ed. Rosalynn Voaden, 115-140 (Cambridge: D.S. Brewer, 1996), 131-132.

first pregnancy: “And aftyr that sche had conceyved, sche was labowrd wyth grett 
accessys tyl the chyld was born and than, what for labowr sche had in chyldyng and for 
sekenesse goyng befor, sche dyspered of hyr lyfe, wenying sche mygth not levyn.”

Margery called for her confessor to come to her so that she could confess a previously 
un-confessed sin burdening her conscience (which she never does reveal), but the 
confessor “was a lytyl to hastye” and cut her off with reproofs before she confessed the 
sin. Margery subsequently “went owt of hir mende” for over half a year. However, it was 
during this time, which modern scholars now frequently call an episode of postpartum 
 depression, that Christ came to her and encouraged her turn to a holy life; he appeared 
to her even though she was mentally and physically distressed and “desyryd all 
wykkydnesse”:

And whan sche had long ben labowrd in thes and many other temptacyons, that 
men wend sche schuld nevyr a skapyd ne levyd, than on a tym, as sche lay aloone 
and hir kepars wer fro hir, owyr mercyful Lord Crist Jhesu, evyr to be trostyd,

352 Windeatt, ed., The Book of Margery Kempe, 54.

353 See, for example, William B. Ober, “Margery Kempe: Hysteria and Mysticism 
Reconciled,” in Literature and Medicine, ed. Peter W. Graham, vol. 4 Psychiatry and 
Literature, 24-40 (Baltimore: Johns Hopkins University Press, 1985), 28; Trudy Drucker, 
Becky R. Lee, “The Medieval Hysteric and the Psychedelic Psychologist: A Revaluation 
of the Mysticism of Margery Kempe in the Light of the Transpersonal Psychology of 
Stanislav Grof,” Studia Mystica 23 (2002): 113; and Emily Rebekah Huber, “For Y am 
sorwe, and sorwe ys Y”: Melancholy, Despair, and Pathology in Middle English 
Literature (PhD diss., University of Rochester, 2008), accessed June 1, 2013, 
https://urresearch.rochester.edu.
worshypd be hys name, nevyr forsakyng hys servawnt in tyme of nede, aperyd to hys creatur whych had forsakyn hym in lyknesse of a man\(^{354}\)

Although her spiritual journey was long and varied even after this holy appearance, the event was the catalyst for Margery’s calling. Her experiences after birth are thus linked to her metaphorical birth into a more spiritual life; physically giving birth is the beginning of the process of spiritual rebirth for Margery. The first part of this process is pain, temptation, and despair. Critics have compared Margery’s uncontrollable writhing and weeping after this time to the experience of being in labor; her spirituality is always infused with her identity as a woman. The failure of her confessor – his haste and unwillingness to listen to Margery’s full confession – provides a marked contrast to Christ’s patience and mercy. The confessor, for all his authority, does not have a gentle enough touch, figuratively speaking, to obtain the confession of a reluctant penitent. Yet Christ comes to her after all her labor against temptation to remind her that she is part of his Christian community.

I begin with Margery’s conversion because her story contains many pieces of the puzzle that medieval birth metaphors present. In this account, birth is narratively linked to desire for confession, temptation, despair, and Margery’s own laboring, fallible, female body. Yet it also provides the occasion for Christ’s visit and her calling towards a holy life, a calling she later uses as motivation to help those around her. While other critics have discussed metaphorical birth and the prevalence of birth imagery in the later Middle

Ages, this chapter expands these ideas toward a related, but distinct, concept: mystical midwifery. The same kinds of intercession described in Chapter 3 – saints becoming metaphoric midwives in order to save the lives and souls of women and children during childbirth – also take place when individuals encourage spiritual renewal in each other.

The first form of metaphoric birth this chapter analyzes is the descriptions of the birth of vice and virtue in an individual soul, most commonly used in prescriptive religious texts and focusing on the soul as laboring mother and birth as an act of pain and production. This form includes the comparison of midwives and confessors, who must gently and skillfully extract the unwilling confession from the penitent. The second form of metaphoric birth is in expressions of spiritual rebirth, with valences of suffering and transformation, which appear in a wide range of Biblical and other writings circulating in late medieval England. While many of these use the basic idea of childbirth to represent painful transformation, either as laboring mother or as newborn infant, the texts written by and about visionary women in the fourteenth and fifteenth centuries often depict fluid, multiple, and simultaneous roles in the birth process. The final, and most remarkable, form is in metaphors that focus on midwives and birth attendants as part of a larger, communal process of birth, purification, and integration. These represent visionary women as capable of bringing – or even compelled to bring – the birth of Christ in their souls to a wider audience, just as the midwife brings a child from the internal space of the womb into the female community of the birthing chamber, and then ushers both baby and

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355 For example, C. Annette Grisé argues that the use of maternal and other feminine imagery in texts addressed to women was prescriptive; it provided positive examples of culturally-acceptable roles for women, such as wives and mothers. C. Annette Grisé, “Women’s Devotional Reading in Late-Medieval England and the Gendered Reader,” *Medium Aevum* 71.2 (2002): 219.
mother into the wider Christian community. It is in these last metaphors that we find
the strongest statement of potential authorization for women to act as caretakers to the
community, spiritually as well as physically.

1. Birth of Vices and Virtues in the Mind

Childbirth was frequently used to describe the production of vice and virtue, good
deeds and sinful ones, by the individual. These texts often focus on birth as bringing forth
products, instead of as a process that can be compared with the actual experiences of a
woman in labor. A number of devotional and instructional manuals use childbirth
metaphors to describe how vices and virtues may be ‘born’ inside the individual soul.
Some of these metaphors rely mainly on the words ‘conceive’ and ‘bear’ in abstracted
senses, without connecting them to the process of literal birth. The Pore Caitif, a late
fourteenth century instructional manual, includes the advice that people must be humble
if they want to ‘conceive’ Christ inside themselves. In the section titled “Off mekenes,”
the author writes: “mekenes is þe modir of cris as seyne Bernard seip / ffor þer þoruʒ
principali þe blessid virgyn marie conseuyede þe swete child ihesu / ffor hadde not marie
be meke, al be it þat she was virgyn, ʒit hadde she not conseuyed crist. þerfor if þou wolt
conseyue ijesu þat is saluacioun eþip helpe of soule, bicome þou meke …”356 The
metaphor uses the idea of conception to make a point but does not dwell further on the
details. In the same vein, the author of The Pore Caitif later advises, “I write þis
temperaunce of marie cristis modir þe which crisostom rehersiþ þat ech man & woman

356 Mary Teresa Brady, The Pore Caitif, Edited from MS. Harley 2336 With Introduction
and Notes (PhD diss., Fordham University, 1954), 164.
Both of these passages use the language of conception and birth but without specifics; the authors may not have literal childbirth in mind at all but may be using contemporary meanings of the words that are disassociated from birth.

Other metaphors more clearly bring childbirth to mind. The author of the late fourteenth century Book to a Mother spends a significant time on metaphors of birth involving vice. The book was written by a man instructing his widowed mother in how to live a holy life without entering a nunnery. He writes:

For ʒif Crist [be] departede from a soule, alle þe children þat suche a soule bringeþ forþ – þat ben þouȝtes, wordis and workes – been bore out of wedlack; and so þei ben mysbigete children, for þe deuel is here fadur. And noper he ne madde dame his ladi ne his children, þouȝ þei multeplie mony fold, schal haue þe heritage in þe blisse of heuene, as Seint Poul seþ and witnessed. …

þerfore, my leue dere modur, charge muche þe wedlac of Crist and þi soule. For ʒif Crist be þin hosbonde, þanne þou schalt bringe forþ children fre in trewe wedlac, þat ben chaste þouȝtes, clene wordis and goode werkes: and alle suche Crist wol knowe for his children.358

This passage makes the metaphoric birth of “clene wordis and goode werkes” one of the ways by which Christ will know the faithful Christian. This “birth” becomes evidence of the cleanness of a soul and determines the soul’s ability to attain salvation. Birth thus functions as a piece of evidence; just like the deformed children born from sinful actions,

357 Brady, The Pore Caitif, 177.

358 McCarthy, ed., Book to a Mother, 90-91.
here the products of birth, good and bad works, become the visible signs of the internal state of a soul. In this metaphor, the soul and Christ are represented as in “wedlac” – an idea that is even more common in the metaphors about spiritual rebirth I will discuss in the next section.

A second passage from Book to a Mother functions similarly in explaining that deeds originate and gestate internally, again focusing on sin instead of good acts. In a section titled “On despair,” the author refers to Job’s despairing cry, “‘Whi in þe wombe nadde I be ded?’” The author then describes both thoughts and deeds as originating in “wombs”:

þe furste wombe of synne is þe furste þouȝt of synne, or mynde; and ʒif a man slow þe furste þouȝt, he schulde bringe forþe none wicked werkes. Aftur þat, þouȝt is brouȝt forþ bi likinge of alle his wittis, þat ben soget to do synne in dede wipouten-forþ, as þe child is leid on his modir knees; and so þe synneful man ʒeueþ his cursede childe souke wiþ two tetis of his fyue wittis, and nor[i]ʃeþ hit wiþ fals bileue and hope of Godis merci, wiþ fals excusaciouns and wickede defendinges þoruȝ yuele ensample of oþere synful men.359

The passage continues to describe the process of being led astray and its similarities with a child nursing from a “cursed modur.” This author uses the idea of wombs as origins but also creates parallels with parenting through the descriptions of specific moments like that of the child laid on his mother’s knees after birth. In either case, the association is negative, since the author is referring to the production of vice. The passage avoids direct

359 McCarthy, ed., Book to a Mother, 132-133.
statements about the weakness or wickedness of women, but it still compares sin to the normal actions of a woman during childbirth and child rearing.

Other texts focus less on the negative implications of birth imagery, and instead simply use the metaphor to express the permanence of the “child” or of the deeds one performs in life. The Treatise of the Perfection of the Sons of God is an early fifteenth century translation of Willem Jordaens’ Latin version (1372) of Jan van Ruusbroec’s Vanden blinckenden Steen. The treatise contains a version of this metaphor, noting that the “apocalips” says:

Blissed be tho dede the whiche are dede in oure lord. Worthely forsothe he callys thame blystlye dede, the whiche by dys euerlastyngly dedic, that is to saye, fro thameselfe and into that vsable oned of god thay are drownde, and also thay are eueremore newly dyinge in loue be þe inentrynge formacioun of the same.

Wherfore fro nowe forthe says the spirit þat thay myȝt ryste of þer labores, for þer werkys folowes thame. For sothelly in the same manere where that of god we are borne in spirytualle verteuouse lyfe, and where we bere oure werkys afore vs as oure oblacioun vnto god, and also in þat hyest where in god we dye into euerlasynge blissed lyfe, þer forsothe oure werkys folous vs; for thay are one lyfe with vs. ³⁶⁰

This makes connections between death and birth, work and the labor of childbirth, clear.

It also indicates that the products of birth, deeds, are permanent: “oure werkys folous vs.”

This author’s concern seems to be more with sinful works and their permanence than

with good works. Although not as negative as the *Book to a Mother*, this passage is still cautionary. For this author, then, motherhood and childbirth are not to be lauded as parallel with the spiritual experience of conversion or rebirth, but instead are potentially weighed down with sin.

Not all devotional texts have a negative or even warning focus on metaphoric birth, however. The *Book for a Simple and Devout Woman*, a late fourteenth century English devotional guide, focuses on the bearing of good works instead of bad ones. The author writes:

> On þis wise God, oure trew spouse, commaundeþ vs þat we folwe only his wil. þe fend in þat oþer side biddeþ alwey to folwe his wil. If þen þe wil of mon only acordiþ to þe wil of God, he schal conceyue and bere þorw steryng of þe Holi Goste trew children, as is trew spouse auȝte to do, þat ys to sey, vertues and goode þewes and gode werkis, þat schulleþ pley bifore hym in heuene.\(^\text{362}\)


\(^{362}\) Diekstra, ed., *Book for a Simple and Devout Woman*, Ch 2, lines 93-98. Diekstra identifies the source for this material as St Anselm’s *De Humanis Moribus*, I.2-5:

> “Voluntas itaque illa, quae est instrumentum volendi, sic est inter deum et diabolum, quomodo mulier inter suum legitimum virum et aliquem adulterum. Vir ei præcipit, ut sibi soli coniungatur; adulter vero persuadet, ut et sibi copuletur. Si itaque se soli legitimo vrio coniungat, legitima est et ipsa, filiosque legitimos generat. Si autem adultero se iunxerit, adultera est et ipsa, filiosque adulterinos parit. Similiter ergo deus imperat voluntati, ut societur ipsi soli. Diabolus vero ex alia parte suggerit, ut coniungatur et sibi. Si itaque se soli deo coniunxerit, id est sancti spiritus suggestionem velut bonum semen receperit, fit eius coniux legitima filiosque legitimos generat, id est virtutes et opera bona. Mox enim ad imperium eius aperiuntur animae omnes et corporis sensus ad adimplendum quod præcipit deus.” Diekstra, ed., *Book for a Simple and Devout Woman*, 331 n. 85-108.
The passage begins by setting up God as “oure trew spouse,” and then continues to identify the partnership between divinity and humanity as a potentially generative one. The passage then imbues the relationship between God and humanity with the additional blessing of the Holy Ghost, that which was the means of conception for the Virgin Mary. It adds a note about the obligation of spouses to produce children, an oddly earthly comparison to make, and it ends with the description of the products of the union, good deeds. The implication is that the reverse is true of a union between humanity and “þe fend,” and although such a union would also be productive, it would only produce vices and bad deeds.

The images of vices and virtues being born in the soul are common and are usually found in instructional works designed to keep the audience from straying. These metaphorical uses retain a sense of birth as laborious, dangerous, and potentially filthy, as the soul may birth unwanted thoughts and deeds. Not all birth metaphors are so negative, however, and many present birth either as an abstract but positive transition or as a more concrete comparison with the specific experiences of a parturient woman.

2. “Obstetricante manu educendus est coluber tortuosus”: Confession and Salvation

If the body was imagined as a womb in which vices and virtues were conceived and born, then there must be a method of extracting the vices in the penitent Christian. There was a tradition of metaphorical birth imagery used to describe the expulsion of vices and sins instead of the bringing forth of something positive, especially relating to confession. The bringing forth in confession metaphors necessarily involved a second person, a birth assistant, to help in the process and to receive the confession. The book of
Job uses the Latin word “obstetricante” to describe the way in which God rescues the spirit, translated here as ‘obstetric’: “His spirit hath adorned the heavens, and his obstetric hand brought forth the winding serpent.” This word invokes the helping hand of the obstetrix – a midwife or female obstetrical physician. The metaphor hints that midwifery is a positive element, as the assistance that is required for a soul in need, but also that the product or ‘child’ is not good. The child is made parallel to the crooked serpent, both of which are to be expelled from the body; this is not a representation of childbirth as anything but purgation.

This passage was repeated in reference to confession in the high and later Middle Ages. Confessional manuals from the twelfth through the fourteenth centuries indicated that the confessor pulling forth a confession was parallel to the midwife, drawing on the metaphor found in Job. These manuals briefly describe the process of assisting the confession out of the mouths of the person speaking, like a midwife assists. They use the same phrase as is used in Job: “obstetricante manu educendus est coluber tortuosus,” the

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363 Job 26:13. “Spiritus eius ornavit caelos, / Et obstetricante manu eius, eductus est coluber tortuosus.”

364 The Wycliffite Bible was a major intervention into English religious culture of the later Middle Ages. There were two versions made within a decade. The “early version” is closer to the Latin and was translated c. 1380, possibly under the direction of John Wycliffe (c. 1320-1384), and probably by Nicholas de Hereford. The “later version” was translated around 1388 by John Purvey, after John Wycliffe’s death. Hudson, ed., Selections from English Wycliffite Writings, ix. One version of the Wycliffite Bible ignores “obstetricante” in the passage in Job, translating it: “His spirit ounede heuenes, and his hond liȝti ledende out, the eche side krokende eddere is led out.” The later version, however, reads “His spiȝt ounede heuenes, and the crokid serpent was led out bi his hond, ledyuge out as a mydwijf ledith out a child.” This translation re-integrates the midwife as a helper in the scene. Josiah Forshall and Frederic Madden, eds., The Holy Bible ... by John Wycliffe and His Followers, 4 vols. (Oxford: Oxford University Press, 1850), II.709.
obstetric hand brought forth the winding serpent.\textsuperscript{365} This same language is also found in one of the earliest Dominican confessors’ manuals, the thirteenth-century \textit{Summa penitentie fratrum praedicatorum}.\textsuperscript{366} These metaphors place the priest in the position of the midwife, aiding in the painful production of a confession or the redemption of a soul. The willingness of religious men to portray themselves and other priests as midwives casts a certain positive and authoritative light on midwifery. At the same time, however, it restricts the role of aiding spiritual birth to those who are able to administer the sacrament of confession – namely, priests.

The idea of confessor as midwife was framed as part of a larger comparison between medicine and spiritual aid. Alan of Lille, in the late twelfth century, wrote a work on penance called \textit{Liber poenitentialis}, in which he “imagined the confessor as a spiritual doctor, the sinner as someone spiritually ill. He encouraged the confessor ‘to entice the sinner with words, soften with compliments, so that the invalid will most readily reveal his illness, most readily reveal his sin.”\textsuperscript{367} This kind of medical analogy


continued without much variance from the twelfth to the fourteenth century.\(^{368}\) The confessor was the doctor, who sometimes used similar questioning and diagnostic techniques to those that the medical profession espoused. After obtaining a full list of sins, “the confessor makes a diagnosis, imposes a specific cure (penance) and makes suggestions to prevent a relapse. … He [the priest] plays an active role in bringing about that cure.”\(^{369}\) The confessor’s active role, moreover, was compared with both physicians and midwives in various places. Although probably unintentional, this comparison placed confessors, physicians, and midwives on the same side of the confessional equation, lending midwifery an air of legitimacy as an act of caretaking.

Just as medical practitioners saved lives, so did confessors. Robert Mannyng of Brunne’s *Handlyn Synne* contains a passage connecting confession to renewed life and release from death: “Þe fyrst grace þat þy shryfte shal þyue: / He makþ þy soule for o lyue. / Whan þy mouþe wyþ shryfte ys opoun, / Deþ & synne are boþe out lopoun.”\(^{370}\) These lines indicate that when a mouth opens to confess, death and sin leave it and the soul can then live. This confession metaphor views birth as a positive, but only in the sense that it is eliminating evil from the soul. The focus is not on the product but the process. As the passage at the beginning of this chapter indicates, a priest needs to carefully and gently extract the sins from the mouth of the penitent, which Margery Kempe’s confessor fails to do. Margery cannot confess, and the priest is a ‘bad midwife’ whose incompetence leads Margery into temptation; his error is only remedied when

\(^{368}\) Denery, *Seeing and Being Seen in the Later Medieval World*, 70.

\(^{369}\) Denery, *Seeing and Being Seen in the Later Medieval World*, 46-47.

Christ himself comes to lead Margery out of her despair. The quality of a confessor is therefore something that can be evaluated, just as the skill of a birth attendant can be judged by her successful and unsuccessful deliveries.

One of the ways a confessor could conduct a confession successfully was through the formation of a collective narrative, writing the experiences of a penitent into a tale of sin and, after the confession, reunification with the Church. Dallas G. Denery II writes:

The goal of confession was forgiveness through the recognition of and sorrow for one’s sins. In order to accomplish this, the confessor and the penitent worked together to construct a narrative or representation of the individual penitent’s life as a sinner. … In the end, the penitent, just like the priest, came to know his life as a sinner through the confessional representation itself. Knowing oneself was more like knowing another. … If preachers worried about the relation between their hidden selves and their self-presentation, confessional practice taught that even that hidden self was known only through its appearances, its real presence forever deferred (although never denied).\(^{371}\)

This passage relates to the actualization of sin through its narrative representation in the confessional structure. It implies that sin was only “real” when it is birthed – that birth was inherently a social and, ultimately, a public activity. The speech between penitent and confessor might still have been private in one way, just as the birthing chamber was private, but it took what was inside the individual and placed it into its communal context, which was itself part of the larger, public arena. Confession, like baptism and purification, was a form of reintegration into the larger Christian community.

\(^{371}\) Denery, *Seeing and Being Seen in the Later Medieval World*, 17.
Private confession was not as private and exclusive as we might imagine. The confessional booth was not invented until the mid-sixteenth century, meaning that confession took place in a more visible space. It occurred in a public place and could usually be seen, if not heard; this prevented rumors of indecorum. Although they could not reveal the sins that had been confessed to them, “confessors could discuss difficult cases with their superiors and write interesting confessional tales in collections of exempla. … Other parishioners could see the confession take place (even if out of earshot). Depending upon the sorts of penance imposed, neighbours and acquaintances could probably guess the sorts of sins confessed.” That said, the secrecy of the confession was certainly emphasized. Consistency and completeness in confession was a vital part of Canon 21, also known as *omnis utriusque sextus*, of the Fourth Lateran in 1215. The priest was urged to keep confessions secret, and Canon 21 ends with enumeration of the penalties for revealing them. The issue of privacy reinforces the midwife-priest analogies. Midwives and other birth attendants were sometimes responsible for providing assistance in cases where they might be the only people to learn of past indiscretions, as women were considered prone to revealing secrets during the pain of labor. The metaphor of confession as birth evokes the importance of revealing

376 See above, Chapter 3, 94-96.
and making visible one’s inner sins, to the confessor if not to others. Confession was a moment in which the sinner’s innermost thoughts and private actions became visible to another person, and although the confessor was only one person, he was also a representative of the Church.

3. Spiritual Rebirth: Suffering and Redemption Through a Mother’s Laboring Body

The most widespread use of birth imagery in the later Middle Ages, and the one probably most familiar to modern audiences, is that of spiritual rebirth. This included conversion to Christianity, conversion to a more pious life, or the transition during death from this world to the next. Maternal and birth metaphors are common in the Bible, especially in the Gospels and Pauline writings, and these were widely available in Latin, and often in English, in late medieval England. These Biblical moments focus on childbirth as an act that is painful but ultimately productive, both for mother and for child.

Biblical birth metaphors were well known and frequently referred to in sermons and other texts, though interpretations of the metaphors varied. Some of the Biblical metaphors use the pain of labor as a point of comparison between birth and other transitions. A passage in Isaiah reads: “As a woman with child, when she draweth near the time of her delivery, is in pain, and crieth out in her pangs: so are we become in thy presence, O Lord. We have conceived, and been as it were in labour, and have brought forth wind: we have not wrought salvation on the earth, therefore the inhabitants of the

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Denery, Seeing and Being Seen in the Later Medieval World, 7.
The metaphor relies on the aspects of childbirth that might be more frequently encountered by men or others who were not in the actual birthing chamber: the sound of the cries of the laboring woman, instead of the sight of the blood. The intended point is about the pain of transition, but this is a metaphor that is intelligible to a wide audience. Although the people of the verse labored and suffered, they were not able to produce the same results as God did. This is an odd metaphoric use of birth, however, as it ultimately emphasizes the lack of successful procreation of the people. Unlike ordinary laboring women, the people described in the passage do not produce anything of value even though they are inspired to pain and labor in the face of the divine. God’s productivity is heightened in contrast, though; the passage solidifies God as the primary Creator, leaving humanity as a distant and inferior second. The metaphor therefore functions to show differences between human and divine, just as the “light through glass” metaphor of the conception and birth of Christ set the Virgin apart from other women.

Yet the same metaphor may have multiple interpretations, especially given the religious culture of the interpreter. One passage in Jacob’s Well comments on the Isaiah verses and comes to a different conclusion than the original passage might suggest. The author writes:

whan a womman chyldeth, sche peyneth, sche cryeth, sche trauayleth. Isai. xxij.

Ryʒt so, ḷou soule, ʒif ḷou wylt chylden a chyld to god, ḷat is, clene lyif, peyne

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Þe & greve in herte, wyth contricyoun for þi skeet of penaunce, crye in
confessioun for þi scauel, trauayle þou in satysfaccyoun for þi schouele, & þanne
schalt þou caste out clene þe wose & þe fylthe of þi synne, & schalt þou chyldyn a
chyld, þat is, clennes of lyif.  

This interpretation extends the Isaiah metaphor to include the bearing of “clennes of lyif”
in souls that participate in the painful but cleansing process of childbirth. This metaphoric
childbirth becomes a purifying action, one that washes a soul free from sin. This makes
the entire audience potentially similar to, instead of different from, the laboring woman.
The audience’s labor has the potential to produce a child, or a clean life, through penance,
contrition, confession, and satisfaction. These actions cannot be accomplished without
divine grace, but the cleanliness of life is a product that is satisfying to God, unlike the
original failure of humanity. This interpretation mitigates the original negative
comparison and shifts childbirth to a potentially redemptive process.

The gospel of John, too, contains a passage that makes clearer the parallels
between the emotional effects of conversion and the pain and joy of a woman during and
after her labor. The passage says, “A woman, when she is in labour, hath sorrow, because
her hour is come; but when she hath brought forth the child, she remembereth no more
the anguish, for joy that a man is born into the world. So also you now indeed have
sorrow; but I will see you again, and your heart shall rejoice; and your joy no man shall
take from you.”  

The pain of the process of conversion is imagined here to be part of a

379 Brandeis, ed., Jacob’s Well, 195.

380 John 16:21-22. “Mulier cum parit, tristitiam habet, quia venit hora eius; cum autem
pepererit puerum, iam non meminit pressurae propter gaudium, quia natus est homo in
birthing process, where the painful and difficult steps are forgotten in the joy of a new life. The passage makes sense of the emotional variations of spiritual experiences through an emotional event most people would be able to relate to: having a child. Interpretations could expand and adapt the metaphor as needed; for example, the Wycliffite tract called *The Lanterne of Liȝt* (c. 1409-1411) refers to this metaphor in an argument about the Church’s current state.³⁸¹

These metaphors place the individual in the role of the laboring woman, whose suffering allows her to be redeemed. Pain as redemptive was a powerful image in the high and late medieval period; medieval *vitae* of visionary women often use comparisons with laboring women to describe their withstanding physical or emotional pain. One such comparison is found in the early fifteenth century English translation of a *vita* of a continental holy woman, Christina Mirabilis (or the Miraculous) (c. 1150-1224).³⁸² The *vita* reports that Christina “poured scalde hoot watir on thos membrys that were harmles withouten and cryed as a womman that trauelles with childe; yit, netheles, whan sche come oute sche hadde no harme.”³⁸³ This passage highlights this holy woman’s

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connections to the Virgin Mary, the woman who did not cry out during childbirth and indeed suffered no harm.

Another woman whose *vita* was known in England was Marie d’Oignies (c. 1170-1213), a holy woman who lived, by the end of her life, in a beguinage in Oignies. Thomas of Cantimpré writes of Marie that “welnye fro hir moder wombe she was casten into oure Lorde.” This expression connects her birth with her conversion to serve God; unlike Margery Kempe, it is not the birth of a child but her own birth that coincides with her turning to a life of holiness. Similar to the post-partum conversion experience of Margery, literal and spiritual birth are connected, though in this case Marie’s early holiness is the emphasis. She, too, is compared with a laboring woman; her *vita* says that she cried out when she was concerned about the fate of others’ souls: “She, sorowful, weyled. She, desolate, made dule. She ete no mete. She drofe awey slepe for hir ayen, and othererwhile cryed as a trauelynge womman.” In this passage, Marie is concerned with the souls of others and with their passage into the next life, and that is what makes her cry out. She suffers like one giving birth, but does not compare the dying to mothers or herself to a midwife. Jennifer Brown points out that although the other *vitae* in the same manuscript use this expression, the life of Marie is the only one where it is used to describe emotional or spiritual pain instead of physical. In fact, the *vita* even defends

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384 Her *vita* was written by Jacques de Vitry (c. 1160-1244) a year after Marie’s death and translated into English in the early fifteenth century. Brown, *Three Women of Liège*, 1-2.


this usage: “For why men of the worlde, men of sorowe, merueile not if anybody crye for angwyssh and ache as it fallith in a travaelynge womman, but they haue wondir and meruel if any man criynge for ioye of plenty of herte maye not holde his pees.”\textsuperscript{388} People are not surprised when others cry out with physical pain, Thomas of Cantimpré says, but are inexplicably surprised when others cry out with the spiritual joy of divine union. He expects his audience to see that pain and joy cause similar reactions in those who experience them. Furthermore, the passage indicates that the pain of childbirth and the joy of divine union are obviously comparable, reinforcing the links between physical and spiritual birth.

Metaphors comparing individuals to the mother have additional implications in some religious texts. The pains of childbirth and the emotional vulnerability of the mother resemble the sufferings of Christ, who was increasingly envisioned as maternal in the thirteenth, fourteenth, and fifteenth centuries. Conversion continued to be compared to birth, and the Virgin Mary therefore became a vital figure of inspiration. Her emotional sufferings were identified as mirroring Christ’s physical ones on the cross. Margery Kempe, too, utilizes this imagery of pain as redemptive, as mentioned above. Her suffering maternal body, especially when she writhes in pain, forms a kind of \textit{imitatio Christi}: “Margery’s employment … of the discourse of maternal suffering, is also evocative Christ’s own maternalistic suffering on the cross, and provides a multivalent and specifically female hermeneutic to express her personal vision of the redemptive

\textsuperscript{388} Brown, \textit{Three Women of Liège}, 178.
As this passage illustrates, birth and maternal suffering were also sometimes compared with Christ’s Passion, and this use of birth integrates the specific pain that the female body undergoes during childbirth.

Conversely, Christ’s physical sufferings were sometimes compared with the sufferings of a woman in childbirth. Margaret of Oignt (d. 1310), a Carthusian visionary whose works were popular in England, wrote about the whole of Christ’s life as a labor:

But when the time approached where you had to give birth, the labour was such that your holy sweat was like drops of blood which poured out of your body on the ground. … Oh Sweet Lord Jesus Christ, who ever saw any mother suffer such a birth! But when the hour of the birth came you were placed on the hard bed of the Cross, where you could not move or turn around or stretch your limbs as someone who suffers such great pain should be able to do … who ever saw at any other time that a mother wanted to die such a vile death for the love of her child.”

This elevates the suffering of women to a kind of imitatio Christi, at the same time that it makes it clear that Christ’s pains and patience exceed any human experience or capacity.

As I discussed in Chapter 4, descriptions of the nativity often made the birth of Christ an event that ordinary women could understand and relate to at the same time that the Virgin


was clearly set above all other women. Similarly, the labor and suffering undergone by Christ was at once understandable through the metaphor of birth and also unattainably perfect, since he was able to redeem humanity while humans are only able to draw near through the grace of God.

4. Spiritual Rebirth: The *Tabula Rasa* of the Baptized Infant

The childbirth metaphors focusing on suffering and redemption revolve around the figure of the mother. Other birth metaphors, however, place the individual in the role of the infant who is reborn, which allows for a different rhetorical focus. Spiritual rebirth is redemptive, but not because of the suffering of the mother; it is instead the clean slate of a newborn that is valued. This idea is found in the gospels and Pauline writings, which contain birth imagery describing conversion or turning to God as a positive and transformative event. The Gospel of John contains several notable examples of birth or rebirth imagery. Jesus speaks to Nicodemus about rebirth:

Jesus answered, and said to him: Amen, amen I say to thee, unless a man be born again, he cannot see the kingdom of God. Nicodemus saith to him: How can a man be born when he is old? can he enter a second time into his mother’s womb, and be born again? Jesus answered: Amen, amen I say to thee, unless a man be born again of water and the Holy Ghost, he cannot enter into the kingdom of God. That which is born of the flesh, is flesh; and that which is born of the Spirit, is spirit.  

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These words explicitly call passage into the next life a kind of birth and compare it to a person’s birth at the beginning of earthly life as well. At the same time, they both compare and distance physical and spiritual birth; the texts makes a dividing line between the flesh and the spirit even as it uses the same terminology to describe both passages.

The birth metaphor focusing on the infant may also express the lengthy period it might take for ‘gestation’ – the development of the soul on its journey toward the divine. The whole process of conception, gestation, and birth in metaphors can be used to describe a linear progression, or the steps of a process. The author of *Jacob’s Well* extends the metaphor of rebirth to include conception and the entering of the soul into the fetus, which theoretically took place forty days after conception: “In xl. dayes þe chyld in þe moders wombe hath ful schap of alle his bodyly membrys, & in þe xl. day god puttyth þe soule & lyif in-to þe body of þe chyld.”392 This is the same number of days as both the temptation of Christ and Lent. The author then compares the soul that has not yet reformed through penance to the fetus before it receives a soul in the womb. The rebirth of the soul in a reformed person after forty days of penance during Lent then happens at Easter through the sacrament of the Eucharist, where God puts himself into humanity’s bodies through bread and wine:

Þus in holy cherch, be þe sacrament of penaunce, ʒif þou kepe þe wel þe xl. dayes of lentyne, þanne in þe xl. day, þat is, estern day, god schal puttyn in-to þi body

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nasci, cum sit senex? numquid potest in ventrem matris suae iterato introire et renasci? Respondit Iesus: Amen, amen dico tibi, nisi quis renatus fuerit ex aqua, et Spiritu sancto, non potest introire in regnum Dei. Quod natum est ex carne, caro est: et quod natum est ex spiritu, spiritus est.”

lyif & soule, þat is, hym-self in þe sacrament, þat is, god & man, flesch & blood, body & soule. As þi soule is lyif of þi body, so is god lyif of þi soule; whiche lyif entryth in-to þi body þe xl. day, þat is, estern day. þus þanne fle to schryfte, to be reformyd & noryshed in penaunce, & quyked in grace fro deth of synne þe xl. dayes of lenty.

In this formulation, conception corresponds to the moment of repentance and commitment to holy life, the forty days are the continued dedication and persistence in this life, and the moment when a soul is “quyked in grace fro deth of synne” is what the soul experiences when taking the Eucharist after Lent. Birth is not the moment of conversion, then, but the moment when what is pregnant in the soul is confirmed through divine grace, and the moment when the divine allows that pregnancy to shift from formless to full of form and soul through the presence of the Eucharist.

These birth metaphors focus on one person’s experience, either in the position of the suffering and rejoicing mother, or in the position of the infant who is newborn into Christian life. They are expressions of individual experience, whether of suffering, transformation, or the passage of time; birth imagery provides a vehicle for communicating the depth and strength of the emotions associated with spiritual experience.

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393 Brandeis, ed., *Jacob’s Well*, 257-258.

5. “Utero Suae Mentis”: Christ is Born in the Human

In addition to serving as a form of expression, metaphorical birth was often used to describe Christ being born within the individual soul. In these metaphors, the comparison is extended to one in which the human and divine are involved together in the process of procreation: Christ helps the soul give birth, the soul gives birth to Christ, or some variation thereof. The idea of “spiritual quickening,” or the birth of Christ in an individual soul or in the Church, is found first in Origen (c. 184-254) but was used frequently in the thirteenth century and after. Katharine Park writes:

The birth of Christ in the soul had been a common trope in Christian writing since late Antiquity, often expressed in arrestingly concrete form. Writing in the fourth century, for example, Ambrose of Milan referred to Jesus as ‘the boy who is birthed by the one who accepts the spirit of salvation in the uterus of his mind [utero suae mentis]’ and described the failure of this process in terms of miscarriage and inability to bring a fetus to term: ‘Not all give birth, not all are perfect. … For there are some who miscarry the Word [abortivum / excludant Verbum] before they give birth, and there are some who have Christ in their uterus but never give him form.’

The corporeality of the metaphor of the soul being born in the “uterus” makes the grossness of the action of failing to give birth more evident. It also makes the spiritual experience of conversion or turning towards the divine an act with parallels to

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experiences of the body. This was probably meant to be taken in abstract ways, but we can imagine how later visionaries might have desired to feel with their senses the process of Christ being born in the soul. At the same time, this language relies on the presence of both individual soul and Christ, instead of describing the individual’s spiritual experience alone. Bernard McGinn adds, “One could not only be reborn, but the believer might even come to participate in the birthing process whereby God is born in us and in others – that is, a person could in some sense bring God to birth.”397 This potential is especially present in a passage in Galatians, where God is depicted as laboring with his children, while they in turn are pregnant with Christ: “My little children, of whom I am in labour again, until Christ be formed in you.”398 In this passage, God is described as laboring to bring forth sons like a woman in labor, yet the birth only ends when “Christ [is] formed” in the human audience. God’s labor leads to the birth of Christ inside another, so this labor is yet another affliction that God undergoes for the sake of bringing humanity closer to him, just like Christ suffered on the cross. Even if the divine did not suffer, the labor is described as belonging to the divine, not the human.

Walter Hilton (c. 1343-1396) comments on the passage in Galatians in his *The Scale of Perfection*, a lengthy guide to contemplative life. His comment allows Paul, at least, to be more active in the labor:

Of this schapynge to the ful liknesse of Crist speketh Seynt Poul thus: *Filioli, quos iterum parturio, donec Christus formetur in vobis* (Galatians 4:19). Mi dere

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children, whiche y bere as a woman berith a child, unto Crist be agen schapen in you. Thou hast conceived Crist bi truthe, and He hath liyf in thee in as moche as thou hast a good wille for to serve Hym and please Hym, but He is not yet ful schapen in thee, ne thou in Him bi fulheed of charité. And therfore Seynt Poul baar me and thee and othere also with traveile, as a woman bereth a child, unto the tyme that Crist hath His ful schap in us and we in Hym.\(^{399}\)

In this version, Hilton says that the ‘children’ whom Paul addresses, the Christian community, have done something active to merit God’s help: they have conceived Christ by truth. Yet Christ is not yet fully shaped and so not fully born. Hilton brings Paul into the metaphor as well, arguing that Paul continuously labors to give birth to the Christian people at the same time that Christ is growing in the soul and the soul is growing in Christ. These are interwoven threads that complicate the hierarchical role of parent to child. Earlier male religious had described Paul as a mother or nurse for the Christian community, including Anselm of Canterbury (1033-1109), who describes both Christ and Paul as mothers to reborn Christians: “You [Paul] are among Christians like a nurse who not only cares for her children but also gives birth to them a second time by the solicitude of her marvelous love. Both of you [Paul and Jesus] are therefore mothers. … For you accomplished, one through the other, and one through himself, that we, born to die, may be reborn to life.”\(^{400}\)

This maternal imagery is supplemented with the idea of motherhood


“through the other”; this means that Paul functions as assistant to Christ’s motherhood, a kind of midwife to the process of Christian rebirth. Anselm and Hilton both imply that a pious person is capable of aiding the Christian community in reaching toward the divine. The human helper is an important element of these childbirth and midwifery metaphors.

The expression of the cooperation of human and divine through family structures was not uncommon in religious writings. The twelfth and thirteenth centuries were notable for the rise of religious writing focusing on developing almost familial relationships with Christ and with God, especially those using maternal imagery. Many of these texts continued circulating throughout the later Middle Ages and were strongly influential on later writers. In these metaphors, the birth imagery encompasses a procreative relationship between human and divine, following the model of Ambrose and other patristic writers. Bernard of Clairvaux was one of the most influential of these writers, and a number of critics have analyzed the maternal and spousal imagery in his writings. He suggested that the souls of men could interact with the divine as the inferior and humble spouse relates to her husband. He also followed Augustine in identifying the metaphorical womb of early Christian writers with the heart, saying that Christ could be born inside the individual through his or her heart.401

Richard of St. Victor (d. 1173) wrote an influential discussion of the four degrees of violent charity, which were adapted by later writers – especially in mystical texts utilizing erotic rhetoric – as part of the description of union with God. These degrees have multiple interpretations, but they point to the idea that the soul and Christ form a

procreative couple. The four degrees, when used to describe a soul’s union with God, are as follows:

In the first degree the betrothal takes place, in the second the wedding, in the third sexual union, in the fourth childbirth. … In the third degree is said, ‘He who adheres to the Lord becomes one spirit with him’ (1 Cor 6:17). In the fourth is said, ‘We have conceived, and we have been as it were in labor, and we have brought forth the spirit’ (Is 26:18). Therefore, in the first degree the beloved soul is visited frequently; in the second she is led to marriage; in the third she is joined with her Lover; in the fourth she is made fruitful. The union between humanity and divinity is thus imagined as a productive and procreative one, resulting in “childbirth” and “fruitful[ness].” These texts represent the union of humanity and divinity as spousal and procreative.

Similarly, the German theologian Meister Eckhart (1260-1327), whose works were widely read in the late Middle Ages, valorizes birth when he imagines the way Logos, the Word, can be born in the human soul. In a sermon where Eckhart describes the birth of Logos in the soul, Eckhart concludes, “May the God who has been born again as man assist us to this birth, eternally helping us, weak men, to be born in him again as God. Amen.” Christ is here envisioned as the one who can assist at the birth, as well as being the one in whom we are born (and who is born in our souls). Christ is capable of multiple roles in the (re)birth process, functioning as mother and midwife, God and man,

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male and female. The birth of God in man’s soul, according to Eckhart, is the “most adequate expression of man’s union with him.” Birth is therefore conceptualized as the strongest and most accurate way to describe the event that begins the relationship between humanity and divinity.

Other texts focus more on the potential role of God as both father and mother to humanity. The *Chastising of God’s Children* is a late fourteenth century text written to religious women in order to provide guidance, and it contains sections modified from the *Ancrene Riwle*, Suso’s *Horologium Sapientiae*, and Jan van Ruusbroec’s *The Spiritual Espousals*. The first part of this text revolves around the metaphor of God as mother and humanity as child, this idea is lifted from the *Ancrene Riwle*. The mother with child metaphor is used particularly to describe the newly converted, as in this passage:

> I likned before þe pley of oure lord wiþ men and wymmen whiche bien newe conuerted to a louynge modir þat listë to pley wiþ hir sowkynge child, whiche modir in hir pley sumtyme hideþ hir, and comeþ aþen to knowe bi þe countenaunce of þe child hou wele it loueþ þe modir; but nowe we must see furþermore hou þe modir preueþ þe childe aftir þat tendir age.

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This passage continues to describe how a mother weans a child and teaches him, and sometimes beats him. The text compares God with a figure that performs ordinary, recognizable tasks, such as playing with a child, and later testing the child when he or she is ready. The appeal of familial and everyday comparisons was that of the divine made intelligible, understandable, and even able to be imitated by the individual.

6. Birth as Enclosure, Womb as Tomb

The Pauline books of the Bible, too, use birth imagery to describe spiritual rebirth; they underscore, however, that death precedes rebirth. In Romans, Paul writes, “For we are buried together with him by baptism into death; that as Christ is risen from the dead by the glory of the Father, so we also may walk in newness of life.” This passage connects birth imagery to burial, a connection that may later have inspired the womb-and-tomb imagery of texts like Ancrene Wisse. Ancrene Wisse, a monastic rule for anchoresses written at the turn of the thirteenth century, compares the anchoress’s hold to a womb and also to Christ’s tomb. It argues for similarities between anchoresses and Christ because:

wombe is nearow wununge, þer ure Lauerd wes reclus, ant tis word ‘Marie’, as Ich ofte habbe iseid, spealeð ‘bitternesse’. Þef þe þenne i nearow stude þolieð


409 Romans 6:4. “Consepti enim sumus cum illo per baptismum in mortem: ut quomodo Christus surrexit a mortuis per gloriam Patris, ita et nos in novitate vitae ambulemus.”

bitternesse, þe beod his feolahes, reclus as he wes i Marie wombe. Beo þe ibunden inwið four large wahes? Ant he in a nearow cader, ineilet o rode, i stæne þruh biclustet hetefeste. Marie wombe ant þis þruh werin his ancre-huses.411

This imagery focuses on birth as escape from enclosure, and release from imprisonment; birth is escape and release from the prison of this corporeal world into a new, Christian life.

Some metaphors referring to both death and birth depict the individual soul with ability to function as both mother and infant. Julian of Norwich (c. 1342-c. 1416), now one of medieval England’s most famous visionaries and anchoresses, also uses these more complex ideologies surrounding birth and enclosure in her A Revelation of Love. She writes, “We are beclosed in the fader, and we are beclosed in the son, and we are beclosed in the holy gost. And the fader is beclosed in us, the son is beclosed in us, and the holy gost is beclosed in us.”412 This is a reciprocal enclosure, making the abstract nature of the metaphor very clear and making the relationships between all of the elements complex and entangled. Shortly after this, she adds the Virgin Mary to this

411 “The wombe is a narrow dwelling, where our Lord was a recluse, and this word ‘Mary’ as I have often said, means ‘bitterness.’ If you then suffer bitterness in a narrow place, you are his fellows, recluse as he was in Mary’s womb. Are you imprisoned within four wide walls? – and he was in a narrow cradle, nailed to the cross, enclosed tight in a stone tomb. Mary’s womb and this tomb were his anchorhouses.” Bella Millett, ed., Ancrene Wisse: A Corrected Edition of the Text in Cambridge, Corpus Christi College, MS 402, With Variants from Other Manuscripts, 2 vols. (London: Oxford University Press, 2005), 142. Translated in Anne Savage and Nicholas Watson, trans., Anchorite Spirituality: ‘Ancrene Wisse’ and Associated Works (New York: Paulist Press, 1991), 76-77. See also Patricia Ranft, Women and Spiritual Equality in Christian Tradition (New York: St Martin’s Press, 1998), 142.

cluster of enclosures: “Thus oure lady is oure moder, in whome we be all beclosed and of her borne in Crist. For she that is moder ofoure savioure is mother of all that ben saved in our saviour. And oure savioure is oure very moder, in whome we be endlessly borne and never shall come out of hem.” Julian’s metaphoric birth involves being endlessly born and never coming out of the divine. Spiritual rebirth is not an event that is locked in time or into a chronological relationship. This birth is not a singular event but a way of perceiving a relationship with God; it is not an emergence or a process but a state of being in this passage. Jennifer Hellwarth writes, “Julian’s desire to die is really a desire to be born into eternal life, a rebirth in which Christ acts as a kind of midwife to ‘deliver’ Julian to eternity.” God, Christ, and human soul are capable of multiple roles in the formulation of spiritual birth, including mother, spouse, and birth attendant.

Some authors even focus on the feeling of being inside a womb in comparison with enclosure of the soul, or contemplation. Nicholas Love’s *The Mirror of the Blessed Life of Christ* (c. 1400) is a translation and expansion of pseudo-Bonaventura’s *Meditationes Vitae Christi* (c. 1300). Love’s text contains a particularly provocative metaphor about spiritual rebirth:

Bot for als mich as bodily enclosyng is litel wor̺e or nost, without gostly enclosyng in soule, þerfore þou þat art enclosed bodily in Celle or in Cloystre, if þou wilt be with Jesu vertuesly enclosed in soule, First þou moste with him anentish þi self in þin owne reputacion, & bycome a child þorh perfite mekenes.

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413 Watson and Jenkins, eds., *The Writings of Julian of Norwich*, 305.

Also þou most kepe & loue silence not spekyng bot in tyme of nede or edificacion. And forþermore or þou be born, þat is to sey, or þou shew þi self outward by word or by opinion of perfeccion, þou most abide þe tyme of ix moneþes, þat is while þou art not perfitely grondet in vertues, & knowyng of goddus lawe, for þe nombre of x commandmentes tokenþ perfeccion of þe lawe, & þerfore þat þat is lasse, tokenþ imperfeccion.415

The author uses particulars of childbirth, including the nine months of gestation, to make specific points about how the faithful ought to act. The author encourages his readers to be “enclosed in soule,” including an injunction for silence like that experienced before birth or during enclosure. The gestation is an important part of the metaphor; the author links this time of waiting, silence, and contemplation to knowing God’s law and preparing for birth.

Love’s metaphor is particularly interesting because it does not describe rebirth as an internal, private process. Instead, it explicitly defines rebirth as when “þou shew þi self outward by word or by opinion of perfeccion.” This may only occur after an internal process, but it means that the actual birth of a soul into a newly holy life must be public, or at least must be accompanied by words and deeds that are made available to the community. The emphasis on a wider community as part of a birth process in these metaphors paralleled the increasing directness about birth in pastoral texts and its greater visibility in the moral tradition and on the stage. The birth of the soul became a communal event, just as the nativity was more publicly represented on stage and

415 Sargent, ed., Nicholas Love’s Mirror of the Blessed Life of Jesus Christ, 35.
“women’s secrets” became more widely available through the transmission of medical and natural philosophy texts.

7. Mystical Midwifery

It is through the use of birth as the revealing, or the making public of, something that was once internal, that we can turn from rebirth metaphors to midwife imagery. Metaphoric midwifery appeared far earlier than the high Middle Ages. Socrates is famously described by Plato in his *Theaetetus* (c. 369 BC) as acting as a midwife to guide others, and Socrates is reported to have compared himself with his own mother Phaenarete, who was a midwife. The *Theaetetus* attributes to Socrates this statement:

My art of midwifery is in general like theirs; the only difference is that my patients are men, not women, and my concern is not with the body but with the soul that is in travail of birth. And the highest point of my art is the power to prove by every test whether the offspring of a young man’s thought is a false phantom, or instinct with life and truth. I am so far like the midwife that I cannot myself give birth to wisdom, and the common reproach is true, that, though I question others, I can myself bring nothing to light because there is no wisdom in me.

The reason is this. Heaven constrains me to serve as a midwife, but has debarred me from giving birth. So of myself I have no sort of wisdom, nor has any discovery ever been born to me as the child unintelligent, but, as we go further with our discussions, all who are favored by heaven make progress at a

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rate that seems surprising to others as well as to themselves, although it is clear that they have never learned anything from me. The many admirable truths they bring to birth have been discovered by themselves from within. But the delivery is heaven’s work and mine.  

Socrates elaborates on the idea of midwifery as drawing out wisdom by explaining what midwives’ limits are as well as their strengths. They themselves do not bear fruit, he says; the midwives merely help others to do so. This creates a humility *topos* at the same time that it allows Socrates to be a unique and vital component of the search for knowledge. He also identifies part of his role as metaphorical midwife to be the distinguishing of wisdom from bad progeny – the thoughts that are merely “false phantom[s].”

In the Middle Ages, the soul was sometimes represented as appearing like a small child at or after the moment of death. Julian of Norwich writes of a vision where she saw “a body lyeng on the erth, which body shewde heuy and feerfulle and with oute shape and forme, as it were a swylge stynkyng myrre; and sodeynly oute of this body sprong a fulle feyer creature, a littylle chylld, full shapyn and formyd, swyft and lyfly and whytter than the lylye, which sharpely glydyd vppe in to hevyn.”

The child is the soul, which escapes from the grotesque corporeal body at the moment of death. The process of death becomes transformation from filth to beauty and from fear to joy.

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Although Julian’s child-soul springs unassisted from the corporeal body, the idea of souls needing intercessors to help them into the afterlife was particularly popular in the fifteenth century. The *ars moriendi* treatises, popularized in the mid fifteenth century, were designed to help people overcome fear of death. Beginning around 1450, they were illustrated with engravings and woodcuts, which showed “the soul escaping from a dying person’s mouth in the form of a small child.”

The booklets depict in their woodcuts the image of five intercessory saints in a battle for the soul; the soul finally escapes the body, appearing like a child, and is received by angels. There is sprinkling of water, like baptism, as the soul is received. Similarly, Richard Rolle (1290-1349), in *The Fire of Love and the Mending of Life*, states that seraphim will carry the dead souls forth. He writes, “ffor[h]ermore, when þai go fro þis hardnes, and fro diseyses þat here happyns, þen þe tyme comys þat þai sal be takyn, & with-outen doute to god be borne with-outen sorrow, & emong seraphyn haue þer setys.”

These angels aid souls towards a better future and a better union with the divine.

We may also return to Margery Kempe to understand how birth, midwifery, religion, and community collide. Margery’s visions include tangential participation in the births of both Mary and Jesus, implying that familial relationships are at the core of her religious understanding. She writes that “sche saw Seynt Anne gret wyth chylde, and than

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421 The angels are like the saints discussed in Chapter 3, who serve as intercessors and guides to help the individual soul toward the divine. See above, Chapter 3, 109-113.
sche preyd Seynt Anne to be hir mayden and hir servawnt. And anon ower Lady was born, and than sche besyde hir to take the chyld to hir and kepe it tyl it were twelve yer of age.\footnote{Windeatt, ed., \textit{The Book of Margery Kempe}, 75.} She also had a vision in which she helped procure lodging and swaddling cloths for Mary at the nativity. The way Margery most easily imagines herself participating with the holy family is through the birth, when female members of the community and family are usually desired and needed. Margery’s process of living a holy life thus includes visions of helping at the births of holy figures; to Margery, being holy means assisting others as well as being pious oneself.

Margery followed through on her ideology and tried to help her contemporaries spiritually. A particularly notable incident was when she assists another woman who has recently given birth and was suffering, much as Margery herself had done, a period of being “owt hir mende” after the birth.\footnote{Windeatt, ed., \textit{The Book of Margery Kempe}, 328.} When Margery suffered the same condition, she had a vision of Christ, which brought her back to her senses. Margery herself, however, becomes the visitor to the suffering woman later in the book. The woman “spak to hir [Margery] sadly and goodly and seyd sche as ryth wolcome to hir” because, the woman said, Margery is surrounded by angels. The woman is able to speak and regain her mind because of the presence of Margery, with the angels that accompany her. Although it takes time, the woman is cured and able to undergo the ritual of purification, reuniting her with the Christian community.\footnote{Windeatt, ed., \textit{The Book of Margery Kempe}, 329. Williams argues that this incident demonstrates Margery’s commitment to working within traditional Church structures; Margery does not (or cannot) fully heal the woman herself, but instead encourages her} Margery thus established a parallel between herself
and Christ, though she may only effect a cure more slowly and with the assistance of 
angels. This similarity emphasizes that part of Margery’s idea of piety is the bringing 
forth of virtues not only in her own soul but also in others’ souls. Barbara Newman 
writes, “Mystical theology, the hardest to characterize, is by turns speculative, unitive, 
ascetic, and erotic, aiming to midwife the soul’s direct encounter with God and celebrate 
that event when it occurs.”

Margery is only one of the late medieval mystics who 
describe their efforts as laboring to produce good works that will in turn inspire the re-
birth of those around them into a holier life.

Earlier religious writers had used birth imagery to describe the making public of 
one’s internal state. Birth imagery appears in the work of Francis of Assisi (c. 1181-1226) 
to explain how individuals may become like the Virgin Mary in bearing Christ: “‘We are 
[Christ’s] mother, when we carry him in our heart and body through pure love and 
sincere conscience,’ reads one of Francis’s letters, ‘and we give birth to him through a 
holy process [operationem], which must shine as an example to others.’”

This idea 
makes spiritual birth necessarily public, as the outward demonstration to others of an 
inward conversion, which in turn inspires those others to live better. Birth imagery was 
therefore a method to show one’s internal state to others in order to convert them, or at 
least make them want to be more pious. This is an early example of a symbiotic 

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towards the Church-regulated purification ritual for complete healing. Williams, 
“Manipulating Mary,” 535.

425 Barbara Newman, *God and the Goddesses: Vision, Poetry, and Belief in the Middle 

426 Francis of Assisi, *Opuscula sancti patris Francisci Assisiensis* (Quaracchi: Collegii S. 
Bonaventurae, 1904), 93-94; and Park, *Secrets of Women*, 60.
relationship where public discourse dealt more readily with private functions, and private functions became more public.

Mystical midwifery had several potential interpretations when it came to gender and religion. McLaughlin notes that through metaphor, “men were able to see themselves as mothers, sisters, nurturers, person who give birth to God and who are as midwives to the birth of God in other souls.” The metaphors also validate employing the experiences and expertise of women, both mothers and midwives, as vehicles for explaining and understanding spiritual events. At the same time, the wider accessibility of midwifery and childbirth imagery to religious men, and through them to the laity of both sexes, meant that the private spaces of the birthing chamber were no longer secret, or restricted to female knowledge.

Birgitta of Sweden (c. 1303-1373) is another of the continental mystics Margery mentions in her book. Birgitta was very influential in late medieval England, especially after the establishment of the Birgittine Syon Abbey in 1415. Her Revelations were translated into English and called Liber Celestis. Birgitta’s work has remarkable detail in her examples, especially those relating to domestic activities; critics have suggested that the details reflect Birgitta’s own knowledge of childbirth and running a household.

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428 See the earlier discussion of the Virgin Mary serving as midwife to Birgitta in Chapter 3, 109-111.

There is an extraordinary passage in Birgitta’s Latin *Revelations* where the Virgin, in a vision, tells Birgitta that she was present at the death of Birgitta’s son. The Virgin says, “I acted like a woman standing by another woman who is giving birth, in order that she might help the infant, lest it die in the flow of blood or suffocate in that narrow place through which an infant exits. … [I] helped him in that narrow space, that is, at his soul’s exit from his body.” It is a striking image; the “narrow space” and her description of the real and present dangers of blood and suffocation during birth provide a visceral framework for imagining the passing of the soul at the time of death. The Virgin Mary compares herself to a midwife, saying that she “acted like a woman standing by another woman who is giving birth.” She saves not a living child from death, but rather a dying soul from damnation through her ministrations.

In some cases, the English translation in the *Liber Celestis* removes details that relate to Birgitta’s knowledge of birth and midwifery; these omissions illuminate the theoretical discussion of how Julia Kristeva and Birgitta both “negotiate their private maternality with their public narrative production,” see Laura Saetveit Miles, “Looking in the Past for a Discourse of Motherhood: Birgitta of Sweden and Julia Kristeva,” *Medieval Feminist Forum* 47.1 (2011): 55.


431 Joan Bechtold argues that “Birgitta only condemns those aspects of female sexuality which explicitly exclude male participation,” but that is not entirely true, since her midwife metaphors are very much about a female-only community and space. Joan Bechtold, “St. Birgitta: The Disjunction between Women and Ecclesiastical Male Power,” in *Equally in God’s Image: Women in the Middle Ages*, eds. Julia Bolton Holloway, Constance S. Wright, and Joan Bechtold, 8-102 (New York: P. Lang, 1990), 96.
potential for varying interpretation inherent in texts by visionary women.\textsuperscript{432} Although the above episode remains in the English translation, \textit{Liber Celestis}, the detail of the stunning midwifery metaphor is missing:

\begin{quote}
Christe spekes to þe spouse of Charlles hir son, what he did for him in his time of his dede. Þe modir saide to þe spouse, ‘When Charles þi son deed, I was nere him and helpid so þat þe lufe of Gode was noȝt lettid in him for ani fleshli or worldeli lufe. And I helpid him þat in þe departenge of [þe] saule and þe bodi þat he suffird noȝt so hard paine þat suld make him to fall in ani misbeleue or elles forgete God.\textsuperscript{433}
\end{quote}

The Virgin Mary certainly helps Charles during his death, but there is no “narrow place” in this version. Her role is to help alleviate the suffering of death that might make the soul forget God, and she also prevents the fiends from taking the soul to hell. Yet this passage omits the details that made the original so explicit and vivid in comparing death and the Virgin’s intercession to childbirth and midwifery. It is intriguing to speculate about the cause of the omission; perhaps the translator felt that the idea of an intercessor to help souls into the afterlife was clear enough without additional metaphors.

The translation contains a number of differences from the Latin text, but several passages relating to birth and mystical midwifery remain intact. The \textit{Liber Celestis}

\begin{footnotesize}
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\item[\textsuperscript{432}] The act of translation is culturally inflected and works were often “[adapted] in various guises for different audiences” at the same time as being translated. Ian Johnson, “\textit{Auctricitas?} Holy Women and their Middle English Texts,” in \textit{Prophets Abroad: The Reception of Continental Holy Women in Late-Medieval England}, ed. Rosalynn Voaden, 177-197 (Cambridge: D.S. Brewer, 1996), 183.
\item[\textsuperscript{433}] Ellis, ed., \textit{The Liber Celestis of St Bridget of Sweden}, 477.
\end{footnotes}
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retains a very similar metaphor about the Virgin Mary acting as a spiritual midwife. The translation reads:

Þe moder saide to þe spouse, ‘Se ʒon child of teres þat is now born gostely. For ryght as a childe þat comys oute of þe modir wombe, firste comes oute þe hede, sen þe handes, and eftirwarde þe remland of þe body, so haue I done to ʒone child of teris for þe teris and prayers of my frendis. And þerefor he moste be noryshed gostely to gude prayers and werkes and gude counsels, and kepit wele þar in. And þe same woman þat I said of to þe, and sent þe to, sall pray for hym and kepe hym gostely, and loke þat he haue all þat hym nedis vnto his bodi, for he was so fer fallen into deadly synnes þat þe fendas ordaynd þaim to resayue hym to helle. Bot he is now deliuerd oute of þer handes, and new born and gostely broght furthe.’

The Virgin uses very specific midwifery imagery to describe this spiritual assistance. The Virgin channels her intercessory powers through the actions of a midwife, and she uses the discourse of midwifery to describe them to Birgitta, which validates midwifery as a spiritual exercise. In this case, however, the soul emerges not into death and judgment but into a new opportunity in life, where his spiritual status is greatly improved due to Mary’s intercession. Her actions are similar to that of the midwife who baptizes in an emergency; whether the child lives or dies, the midwife has exercised her power to allow the possibility of salvation. That this vision was not edited out of the collections and translations compiled by Birgitta, her confessors, and her translators indicates that it was considered to fall sufficiently within the boundaries of Church teaching; the Virgin Mary as midwife was a valid way of conceptualizing her intercessory powers on behalf of the

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434 Ellis, ed., *The Liber Celestis of St Bridget of Sweden*, 300.
still-living. In this case, perhaps the metaphor was not omitted because the concept of spiritual assistance at the moment of conversion, instead of the moment of death, needed additional clarification. Indeed, while ordinary women did not generally follow in the Virgin’s footsteps to help souls with transitions through death, the women might have been able to help the still-living towards spiritual rebirth. The vivid metaphor about an event that women had probably experienced could thus have made the opportunity to be spiritual helpers seem more attainable and culturally acceptable.

Birgitta’s Revelations uses birth to validate Birgitta’s own efforts on behalf of those around her. In the Liber Celestis, Birgitta has a mystical pregnancy that is witnessed by her two confessors. She is specifically told to show her mystical ‘pregnancy’ to others, in order to make Christ born in others:

How þe spouse felt within hir hert as it had bene a whik childe. It fell on þe Christemes night þat þe spouse, with one passing gladsomnes of hir hert, felid as it had bene a whike childe sterringe in hir hert. And at þe hye mes, þe modir of merci apperid to hir and saide, ‘Doghtir, right as þou wote noȝt how þat gladness and stirynge com so sodanli to þe bi sonde of Gode, so þe comminge of mi son to me was wondirfull and sodaine. And also sone as I assentid to þe aungels message, I felid in me a wondirfull whike steringe child, with a gladnes þat mai noȝt be saide. And þerfore haue comforthe, for þis gladfull stiringe sall laste with

435 Yvonne Bruce argues that Birgitta’s elevation of the Virgin Mary “to triune status” and her own subsequent identification with Mary allow her to speak for, and as, the divine. Yvonne Bruce, “‘I Am the Creator’: Birgitta of Sweden’s Feminine Divine,” Comitatus 32.1 (2001): 20, 25.
In this passage, the Virgin Mary specifically directs Birgitta to show the “whike steringe child” within her to the Virgin’s “sonnes frenndes” – the Christian community. The metaphor is thus used to make Birgitta’s private experience of a mystical pregnancy part of a larger directive to engage those around her, and to show them her spiritual transformation in order to inspire their own. Again, pregnancy and birth become a method of making an internal process public, and of turning an individual’s experience into a motivation towards a holier life in the community. The mother turns midwife herself in order to guide those around her to become pregnant with Christ as well. As Merry E. Wiesner writes, “Women who did assert a public role by publishing their writings or speaking out on religious matters often justified their actions by commenting that their private responsibilities – to their children, their families, younger women friends or to God – required them to act.” Wiesner treats this as a shortcoming, if not in women, at least in the culture that so constrained their ability to enter into public worlds.

I see the incorporation of “private responsibilities,” however, as ways in which women such as Birgitta brought new methods of expression into a traditionally masculine discourse.

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436 Ellis, ed., *The Liber Celestis of St Bridget of Sweden*, 460.

437 Several critics have written on how Birgitta authorizes herself specifically as a woman to act as a public figure. See, for example, Claire L. Sahlin, *Birgitta of Sweden and the Voice of Prophecy* (Woodbridge, Suffolk: Boydell Press, 2001), 84.

Midwife and birth metaphors were clearly considered apt representations of the pleasure of spiritual conversion and spiritual care taking. At the same time, birth imagery often invoked larger communal contexts and authorized women to act as spiritual caretakers to communities. Birgitta’s translator seemed to have found this an acceptable message to retain, but other translators sometimes omitted passages that implied that women had this kind of spiritual authority. Yet another influential continental mystic whose works were circulated in England was Catherine of Siena (1347-1380), who lived around the same time as Birgitta. Her book Il Libro, usually called Dialogues (1378), was translated into English in the early fifteenth century in a work called The Orchard of Syon, the prologue of which is addressed to the women at Syon Abbey.439 Catherine of Siena’s Dialogues contain several birth metaphors that received inconsistent treatment by the early fifteenth century English translator. Two passages from her Dialogues exemplify this inconsistency and indicate that it may relate to the English translator’s apprehension over women serving as spiritual caretakers to communities instead of just to individuals. In the first passage, both Catherine’s original text and the translation argue that baptized people who have behaved virtuously “kepe þe liʒt of feiþ and brynge forþ vertues of liif and fruyt to her neiʒbore. For riʒt as a womman bringeþ forþ and bereþ a qwik sone and ʒeeldeþ þat qwik sone to her spouse, riʒt so þei þat kepe þe liʒt of feiþ

439 There are three manuscripts: British Museum Harleian MS 3432; St. John’s College Cambridge MS. C 24 (James 75); and Pierpont Morgan Library, NY MS. 162. There are also extracts in three other manuscripts and a printed book in 1519 by Wynkyn de Worde. Phyllis Hodgson and Gabriel Michael Liegey, eds., The Orchard of Syon (Oxford: Oxford University Press, 1966), v-vi.
ʒeuen to me vertues of liif, which am þe spouse of þe soul. The important element of this particular metaphor is the presentation of the virtues to God. The birth of virtue in the soul is therefore a private interaction and the childbirth analogy contains no particular impetus for the woman to share her experiences or attempt to care for those around her.

A second childbirth metaphor in Catherine’s work describes how virtue becomes perfected through being made public:

If a woman has conceived a child but never brings it to birth for people to see, her husband will consider himself childless. Just so, I am the spouse of the soul, and unless she gives birth to the virtue she has conceived [by showing it] in her charity to her neighbors … , then I insist that she has never in truth even conceived virtue within her.

In this passage, the child is presented not to the husband alone, but to all the neighbors. God says that the birth only really occurs when the soul shows charity to others, and that the spiritual birth actually depends on interactions with the neighbors to be successful.

The childbirth metaphor is thus one about the Christian community instead of the individual relationship of the soul with the divine, and again, the new mother becomes midwife to the spiritual rebirth of those around her. The English translation omits the

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440 Hodgson and Liegey, eds., The Orcherd of Syon, 105. “… have given birth to living virtues, producing fruit for their neighbors. Just as a woman bears a living child and presents it living to her husband, so they would have presented me [God], the soul’s spouse, with living virtues.” Catherine of Siena, The Dialogue, trans. Suzanne Noffke, O.P. (New York: Pauline Press, 1980), 94.

comparison with birth entirely, however. The same passage reads: “And þat schewiþ wel þat ʒee haue me in ʒoure soule by grace, bringynge fruyt in ʒoure neiʒbore þoru excercise in manye holy prayers, and in holy and amyable desier, oonly seekynge my worschip and healþe of soulis.” The remainder of the passage explains that people may help others to “inCREASE hem in vertues” through words or through example. The mention of the woman giving birth is missing, as is the presentation of the child to the neighbors. The translation still says that people may help others around them through their words or examples, but the communal sense invoked by presenting the ‘child’ to neighbors is gone. The translation removes the idea that women have particular and relevant expertise to serve as spiritual caretakers in communities, or that they should share their experiences with others.

Other mystic texts, especially those by women, include the presence of other women in ways similar to that of the birthing chamber. These texts indicate connections between mystical experiences and childbirth/midwifery. One example is the fifteenth-century English translation of the vita of Elizabeth of Spalbeek (c. 1246-1304), a woman who lived in a cell attached to the church at Spalbeek in the Low Countries and probably eventually lived at Herkenrode Abbey. The vita describes how Elizabeth has episodes

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442 The same passage merely says that virtue must be “brought to fruit” in one’s neighbors through prayer: “And þat schewiþ wel þat ʒee haue me in ʒoure soule by grace, bringynge fruyt in ʒoure neiʒbore þoru excercise in manye holy prayers, and in holy and amyable desier, oonly seekynge my worschip and healþe of soulis.” Hodgson and Liegey, eds., *The Orchard of Syon*, 33.

443 Hodgson and Liegey, eds., *The Orchard of Syon*, 33.

444 The Latin vita was written by Philip of Clairvaux (d. 1273) in 1266 after he visited her in 1266. Brown, *Three Women of Liège*, 1.
where she appears dead to everyone. After one of these, Philip explains, she recovers and then gazes on the image of the Lord in a “tabil”:

> Whan alle this is doon mykel moor solemnely and moor merueylously than I can or maye write, sche keuerith and closeth the same tabil and takith hit to sombody bisyde hir, and striketh forthe hire armes to her moder, and to her sostres yonger thanne sche that serue hir. And they take and lifte hir vp fro the erthe and berith and leyeth hir in her bedde. And she schewith to hem cleernesse of cheere, charite of herte, gladnesse of mynde, and swetnesse of goostly woordes.\(^\text{445}\)

In this passage, her mother and her younger sisters serve as assistants, who carry her to her bed and with whom she shares the joy she has received from the divine. This emphasis on her female community is reminiscent of the birthing chamber, where the women who are close to her are the ones who can help her and the ones with whom she first shares the fruit of her labor.

A second passage again indicates how her mother and sisters help her, sometimes by specifically positioning her with pillows or cloths as she waited for the presence of the divine:

> Forsooth if sche schal than receyue the sacrament, she turnith hir anoon ageyns the auter. And hir sistres and hir moder life vp and vndirsette hir with clothes or with two piloues. And so sche abidith, neither liggynge ne sittyngne but as bytwix booth, halting hire handys togedir with fulle deuoute sighynges and goostly

greydlynes, and otherwhile with teerys abidynge mekely the comynge of hire savyoure and spouse.”

In this passage she waits to take the Eucharist while in the company of these women, and does so with sighs and weeping. Christ is labeled her savior and spouse here instead of as a child that might grow in her heart, but there are still parallels to the birthing chamber, when a woman awaited the birth of a child with her female companions. The references to pillows and cloths strengthen this connection, as connections to domestic, private space.

Descriptions of mystics sometimes explain that they were assistants to souls after death, acting like the angels of the *ars moriendi* treatise woodcuts. Christina Mirabilis was known for helping souls after death to transition to Purgatory and, from there, to heaven: “Atte the last, after hir penauns, she lyued in so mykel pees and deserued so mykel grace of God that sche was rauished in spirite and ledde soulles of the deed vnto Purgatorye and thurgh Purgatory to heuene, withouten any sore of hirslef.” This sentiment is contained in the original Latin *vita* as well, and originated in Jacques de Vitry’s prologue to his life of Marie d’Oignies, where he describes various holy women. At the same time, the phrase indicates that these women are regarded as capable and even ideal for the helpers during passages, and it grants them spiritual authority in guiding others.

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446 Brown, *Three Women of Liège*, 44.

447 See above, Chapter 5, 206.

The authority that the lives and writings of female mystics granted them, in aiding others towards salvation after death and in acting as mystical midwives during their spiritual rebirths, had to be carefully negotiated in order not to infringe upon priestly authority. Christina vita tells us that she hears the sins of others, but her hagiographer hastily adds that she had no power to hear confession or grant absolution. An earl she was close to “rehercyd to hir with ful many terys alle his synnes that hee hadde doon fro the eleuenthe yeere of his age vnto that daye. And that not for indulgens – the whiche sche hadde no powere to gyf – but atte sche shulde be the more stired thereby to praye for hym.”

Although she cannot hear confession, her prayers do have a special power that the earl wants to invoke, the biographer implies. Jennifer Brown argues that Marie’s biographer was wary about the implications that she had the abilities of a priest to hear confession and was therefore particularly careful to stifle this notion, while he was less concerned about the implications of her other activities.

Just as with the vita of Christina, the vita of Marie d’Oignies sometimes touches on areas where the holy women perform functions similar to those of priests. Marie was presented with a child who should be baptized: “While she was presente a childe shulde be catecized (that is to seye, enformed in the feith atte chirche dore) – she sawe a wicked spirite with grete confusyone in senshype departe fro the childe. And whan she hirselfe heef the childe of the holy founte, her eyen were openyd and sawe the Holy Goste comynge doune into the childes soule, and a multitude of holy aungels aboute the cristenyd childe.”

Jennifer Brown remarks, “While it is acceptable for a woman to be

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holding the child at baptism, this speaks to a more religious than secular role for Marie. She is the one holding the child at the baptismal font (often a priestly role), and while this is not the focus of Jacques’ story – he is more interested in relaying Marie’s vision – it does speak to the official religious role Marie might have played in the town. The ways in which these women interact with souls of children and of the dying are evidence of their powers of prayer and, through prayer, divine intercession. The careful work of both biographers and translators speaks to the complications of presenting the authority of the women, especially in areas where they might trespass upon priestly duties and privileges.

8. Conclusion

Late medieval English authors and translators used metaphoric childbirth and midwifery to describe certain spiritual experiences, ranging from confession to spiritual rebirth to death. The depictions in confession manuals and texts on vice and virtue are often about the labor and pain of bringing forth a confession or producing sins, but those written by and about holy women often focus more on the potential pleasures of spiritual rebirth, like the joy in a new child. Birth and midwife metaphors are particularly useful to describe the process of pain and subsequent joy in spiritual transformation, and some authors used the metaphors to provide spaces wherein those who have had conversion or other spiritual experiences are able to share them with others in an attempt to help the larger Christian community. Although some translators omitted the passages, a number of texts relied on the fact that late medieval birth and midwifery were not private but

communal experiences. The birth metaphors therefore provided authorization for holy women to become community spiritual care takers, just as midwives were physical caretakers.
CHAPTER 6

CONCLUSION

Della Pollock writes in her theorization of twentieth-century childbirth, “birth stories articulate the intersection of other stories, other performances. Stories of the birthing body, the body as story, embodied stories …”452 Her words ring true for the rhetoric of birth in the late Middle Ages as well, which frequently can be mapped onto ideas of private versus public, or individual versus communal spiritual growth, in religious discourse. Each of the chapters in this dissertation demonstrates how birth imagery functioned across genres to tie together the material and the spiritual worlds, and that it was a fundamental part of late medieval English religious expression. Midwives themselves were figured in disputes over superstitious medical practices and lay baptism, but narratives using birth and birth metaphors also had an important place in the religious language and ideologies of fourteenth and fifteenth-century England.

Even as Mirk and other pastoral writers became increasingly concerned with the practice of midwifery, especially baptism, Nero’s exemplum delineates the accepted boundaries of male experiential knowledge of birth. Theoretical knowledge proliferated among university-trained scholars, while experiential knowledge remained generally in the realm of female practitioners. This thought permeated religious as well as medical arenas; incarnational theology, which infused late medieval religious rhetoric, had at its heart the interactions of divinity and humanity, and the importance of the material world to theological matters. The popular story of Salome provided a dramatic representation of...

questioning, testing, and repentance, giving parishioners the model for penance that the Nero story omits.

Labor and delivery were used in cautionary tales to demonstrate the consequences of sin, and women’s pregnant and laboring bodies could become public performances of their moral state. Although no woman could attain a body or birth as pure as that depicted in the “light through glass” metaphor describing the Virgin’s experience, the nativity scenes of the cycle plays allowed late medieval laity to find connections to the divine in their own experiences. Other depictions of the laboring body complicate and sometimes transcend the virgin/mother dichotomy, especially those in visionary texts. Nativity scenes, meditations, prayers, visions, and stories of saints’ miracles often use birth as motivation towards virtue or conversion, through emulation of the figures in the narratives. These depictions sometimes utilize the pain and visceral language of birth, but with the intent of using pain and rebirth imagery as redemptive instead of as a warning.

Private or exclusive religious space and rhetoric could be represented by the processes of the birthing chamber, and the discourse of birth may be one way to understand the complicated intersections of private and public, individual and communal, material and immaterial, in late medieval English religious spheres. Just as the birthing chamber was generally coded as a space in which women acted and about which women had knowledge, the experiences of late medieval visionaries often took place in the context of private or exclusively female communities. Midwifery metaphors encapsulated the channeling of revelatory material from its reception by visionaries in these more private spaces out to the wider world.
After the period covered by this dissertation, the strength of the midwife as a figure of community and spiritual authority diminished over time.\footnote{Diane Watt, “The Prophet at Home: Elizabeth Barton and the Influence of Bridget of Sweden and Catherine of Siena,” in Prophets Abroad: The Reception of Continental Holy Women in Late-Medieval England, ed. Rosalynn Voaden, 161-176 (Cambridge: D.S. Brewer, 1996).} In the first city ordinances regarding midwifery in the late fifteenth century, the potential failure to correctly baptize was the most prevalent concern, and lay baptism remained an area of contention for centuries.\footnote{Wiesner, “The Midwives of South Germany and the Public/Private Dichotomy,” 85.} Midwives’ social and spiritual functions also shifted as a result of the religious turmoil leading up to and following the Reformation.\footnote{Adrian Wilson, “The ceremony of childbirth and its interpretation,” in Women as Mothers in Pre-Industrial England, ed. Valerie Fildes, 68-107 (London and New York: Routledge, 1990), 69-70.} There were some instances of explicit denigration of midwives’ practices towards the end of the fifteenth century, as in the infamous \textit{Malleus maleficarum}, a witch-hunter’s manual published in 1496.\footnote{Henricus Instioris and Jacobus Sprenger, \textit{Malleus Maleficarum}, ed. and trans. Christopher S. Mackay, 2 vols. (Cambridge: Cambridge University Press, 2006).} Yet, as Monica H. Green and David Harley argue, these texts remained limited in scope and influence, and were not “a widespread phenomenon that played itself out in regular accusations against midwives.”\footnote{Green, “Gendering the History of Women’s Healthcare,” 490.} Midwives became an intended audience for obstetrical texts. The late fifteenth century saw the publication of the first handbook intended specifically for midwife use: Eucharius Rösslin’s \textit{Der Swangern frawen und hebammen roszeigen, or Rosegarden for Pregnant Women and...
Midwives, published in German in 1513. Richard Jonas’s translation of Rosegarden, called The Byrth of Mankynde, was immensely popular in sixteenth-century England with midwives and their female patients.

The creation of texts explicitly intended for women follows from the increasingly prescriptive rhetoric about birth found in late medieval medical texts. Indeed, by the later sixteenth century, medical texts assume the presence of physicians or surgeons in the birthing chamber. In 1573, Ambroise Paré (1510-1590) wrote De la génération de l’homme, translated later into the English “Of the Generation of Man.” Thomas G. Benedek writes of the work, “It differs radically from the preceding works in that it was clearly addressed by a surgeon to surgeons. Midwives were barely mentioned. … In a later passage Paré stated that ‘Also women or Mid-wives may help the endeavour of the Chirurgion by pressing the patient’s belly with their hands downwards as the infant goeth out …’” Paré imagines the midwife as an assistant, whose hands can be useful, but who no longer retains control over practical knowledge about birth and its practices.

Men, often surgeons, began practicing obstetrical medicine, and the seventeenth and eighteenth centuries saw the origins of man-midwifery. Merry Wiesner adds, “Once male practitioners entered the picture, midwifery techniques could no longer be considered a


459 Richard Jonas, The byrth of mankynde, newly translated out of Laten into Englysshe (London: Thomas Raynalde, 1540); and Chalk, Managing Midwives in Early Modern English Literature, 33-34.

private matter between women, and the city authorities began to regulate procedures of
delivery for midwifery practitioners of both sexes more closely."

Throughout this period, midwives were also embroiled in continuing religious
debates about female administration of baptism and the integration of materiality into
spiritual practices. After the Reformation, the practices of midwives were conflated with
other ritualized acts, especially those associated with Catholicism. The spiritual and
religious practices of midwives – charms, prayers, and the use of birthing girdles and
other objects – were read as forms of Catholic idolatry. In John Bale’s “Comedye
cconcernynge thre Lawes” of 1538, a character named Idolatry says:

Yes, but now ych am a sche,
And a good mydwyfe per De,
Yonge chyldren can I charme,
With whysperynges and whysshynges,
With crossynges and with kyssynges,
With blasynges and with blessynges,
That sprites do them no harme.\footnote{462}

Midwives became stand-ins for all that was seen as flawed in pre-Reformation religious
practices, with their crossings and blessings. In the same year, Nicholas Shaxton, Bishop


of Salisbury, instructed midwives to only allow prayers to God, and not any other charms, prayers, or relics to aid laboring women; he intended midwives to become agents of religious reform and orthodoxy.463

The appearance of texts written specifically to direct midwives paradoxically points to the lessening influence of the midwife and her specialized knowledge in the public sphere. The texts were almost always written by medical and religious men, who prescribed certain roles and limitations for the practice of midwives; far from being secret and mysterious, the practices of the birthing chamber were widely discussed, denigrated, or praised. The entrance of male surgeons into the birthing chamber signaled the gradual acceptance of birth as a medical event and obstetrics as a male field. The presence of male practitioners gave childbirth an aura of respectability, but it also pushed female practitioners into the margins, able only to help with uncomplicated births or as assistants to those who were deemed better qualified. The knowledge that birth attendants had was no longer exclusive, and this led, eventually, to a perceived and practiced divide between the obstetrical medicine practiced by midwives and that practiced by physicians.464

The dichotomy between the roles of midwives and physicians inflects our culture to a certain extent. The gendered roles associated with birth are no longer so clearly delineated; obstetricians are frequently women, and emotional support is often provided

463 Fissell, Vernacular Bodies, 28, 42-43.

by expectant fathers as well as female family members. At the same time, birth practices, priorities, and choices continue to be the subject of debate in public discourse. Although obstetrical medicine is generally practiced in the sterile environments of hospital rooms and regulated by medical boards and politicians in twenty-first-century America, there has been a resurgence of interest in midwifery, home births, and holistic birth care. Melissa J. Cheyney argues that women’s decisions about home births often consider medical risks, but also come from “valuing alternative ways of knowing, combined with embodied experiences of personal power and a deep desire for intimacy in the birthplace.” The questions of intimacy, power, and knowledge that arose so frequently in the late Middle Ages are still very much at play. The intersections of birth, gender, and spirituality in the late Middle Ages continue to provide fruitful comparisons with our own culture.

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