# MIDWIVES, SOCIETY AND CHILDBIRTH

Debates and controversies in the modern period

Edited by Hilary Marland and Anne Marie Rafferty



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# HOW TO BE A MIDWIFE IN LATE NINETEENTH-CENTURY SPAIN

Teresa Ortiz and Clara Martínez Padilla

Since the mid-eighteenth century Spanish midwifery has been shaped along gender lines, differentiating between male theory, obstetric surgical science, and mostly female practice, in one of the few professions carried out by women. After the mideighteenth century surgeons controlled access to midwifery, directing midwife training through the *Colegios de Cirugía* (Colleges of Surgery), and the surgeons, the physicians, and the local authorities governed the profession between them. In this chapter we shall analyse the changes that took place with respect to access to the profession throughout the nineteenth century, and the practice of midwifery in the city of Granada at the beginning of the twentieth century.

In the first half of the nineteenth century, surgery and medicine were combined into one occupational category, and teaching was imparted in the faculties of medicine and their clinics. This process was accompanied by one of the worst periods of regulatory chaos in the history of the Spanish health professions, and a multitude of degrees and diplomas came and went.<sup>2</sup> In the midst of this confusion of rules, terminology and prerogatives, the situation of the *matronas* or *parteras* (midwives) remained unchanged, with scarcely any challenge or modification taking place until 1861, when new regulations were imposed. These were based on the 1857 *Ley Moyano*, a law regulating public education, which laid down rules for the training of midwives without, however, modifying their sphere of responsibility, which had been formally limited to attendance at normal deliveries since the mid-eighteenth century.

#### ACCESS TO THE PROFESSION OF MIDWIFERY

The new 1861 regulations increased the number of places in Spain where would-be midwives could acquire a qualification. To the ancient Colegios de Cirugía in Barcelona, Madrid and Cadiz, already converted into faculties of medicine and surgery, were added the faculties of Granada, Santiago, Valencia and Valladolid.<sup>3</sup> Students of midwifery were now obliged to gain practical experience in maternity homes or in hospitals with delivery wards, as well as to study theory over four semesters, each lasting for six months, in daily 1½ hour classes, for a total of 850 hours. These theory classes were given in hospitals by one of the physicians who, though not a member of the university, was authorized to teach by the university rector. The curriculum included basic obstetric theory, practical midwifery, post-delivery nursing of the mother and baby, and the care and 'spiritual' support of the new-born, including instructions on how to conduct the baptism ceremony. At the end of the course, it was obligatory to undergo a final qualifying examination (Reválida) in the university itself, before a tribunal of three professors.<sup>5</sup>

The 1861 regulations, whose principles were preserved until the beginning of the twentieth century, broke with a hundred-year-old tradition of training midwives within academic precincts.<sup>6</sup> They also set out the training of practicantes (medical assistants), an occupational group created by the Ley Moyano. This group inherited the long and diverse tradition of the practitioners of minor surgery which had existed since the reform of surgical studies during the Spanish Enlightenment in the second half of the eighteenth century. Practicantes and midwives figured in the new law as doctors' assistants. The former were charged with 'the mechanical and auxiliary part of surgery', which included dressing the patients' wounds, administering remedies, giving vaccinations, blood-letting, and 'the arts of the dentist and the chiropodist'. Midwives were to perform normal deliveries, to attend women in their confinements, and to function as 'mere assistants' to the doctor in complicated cases.<sup>7</sup> Each occupational category involved a clear gender assignment. Midwifery was an explicitly female activity, and, although women were not expressly prohibited from access to the career of practicante, it remained a male preserve. The age requirements for admission to the course differed too, with a younger minimum age limit (16 years) for practicante entrants than for the midwives (20 years). It was also obligatory for the midwife

pupils to be married or widowed, and to be of 'proven morality'.8 Aspirant *practicantes* and midwives had to pass an elementary education examination, the contents differing according to the gender of the applicant. Geometry, physics and natural history were tested in the young men, while artistic drawing and domestic hygiene were exclusive to the young women.<sup>9</sup>

The application of the 1861 regulations seems to have had a negative effect on the total number of midwives qualifying; the figure fell by some 30 per cent over the next eight years and did not recover until the 1870s (Table 3.1). The increase in the number of universities where qualifications could be gained, and the increase, in theory, of centres of training, do not appear to have been sufficient to compensate, however, for the formidable demands of the Moyano law. The prerequisite level of education could still only be obtained by very few, and the requirement stipulating the necessity for hospital training was utopian. In fact, in 1865, the office of the Secretariat of the University of Madrid issued a warning in the medical press that there was still no maternity home in the area authorized to give the necessary practical training to midwives. 10 Two of the universities that had recently become involved in the training of midwives, Santiago and Valladolid, had scarcely begun to award diplomas.

Table 3.1 Number of midwives qualifying in Spanish universities, 1853–1912

	Number by university									
Years	Total	B	M	$\boldsymbol{S}$	V	G	Sa	Va	Z	Other
1853-60	170	81	15	14	53	6	0	0	0	1
1861-68*	121	61	16	12	25	5	1	1	0	Ô
1877-82	202	82	39	21	41	11	0	4	4	Ö
1883-88	264	157	19	27	19	17	2	1	20	2
1889-94	454	198	41	73	64	19	6	5	48	ō
1895-90	505	189	55	80	62	17	6	11	82	3
1901-06	585	208	67	100	81	22	8	17	74	8
1907-12	454	153	69	91	59	21	0	17	37	7
Total	2,755	1,129	321	418	404	118	23	56	265	21

Source: AGA, Sección Educación, Libros de registro de títulos, numbers 91, 104–6. Note: B: Barcelona; M: Madrid; S: Sevilla; V: Valencia; G: Granada; Sa: Salamanca; Va: Valladolid; Z: Zaragoza.

<sup>\*</sup> There are no data for the years 1869 to 1876, when the *Libertad de Enseñanza* law was in force.

The new training provisions for midwives and the creation of the title of *practicante* were highly contested amongst physicians, who perceived these developments as constituting a threat to their profession. Although the qualification did not give midwives one iota of autonomy, the simple fact that they had moved back into the public arena awoke abiding jealousies, sparking an age-old conflict of interests, from which the physicians would, nevertheless, continue to emerge the victors.

The criticisms made of the contents of the new law and the calls for its repeal led invariably to the denigration of midwives, <sup>11</sup> who were charged with lacking the interest or qualities necessary to benefit from any training plan whatsoever:

however much the new plan for midwives wants to instruct them and to teach them morality, they will know no more . . . nor will they have any less envy and resentment towards the physicians who have occasion to judge their conduct.  $^{12}$ 

The liberal revolution of 1868 to 1874 applied its principles of extending individual rights and of political decentralization to education, and freedom of learning and teaching at all levels was decreed. The *Libertad de Enseñanza* law established the right of all Spaniards, whatever their academic qualifications, to open educational centres and to run them according to their own criteria. In the heat of this reform, *enseñanzas libres* (liberalized education courses) of all kinds sprang up both within and beyond the universities. Schools of *practicantes* and midwives run by university lecturers opened in Cadiz and Cordoba. The private Cadiz school was directed by three young lecturers who would, years later, become professors in different faculties of medicine, and offered as its principal novelty the possibility of acquiring a training without having to attend classes:

the students may do their studies in the towns and villages where they reside, presenting themselves at set times for practical exercises and individual examinations on the materials that they have studied, which will serve as a test for the final examination (*Reválida*).<sup>16</sup>

At least twenty-eight students must have passed through the school, most of them from towns in the province or other cities.<sup>17</sup> In 1871, a new university founded in Cordoba by the provincial government (*Universidad Libre de Córdoba*) started a midwifery course offering

theory classes and hospital-based practice, but with a worse response than in Cadiz. In three years only five students had completed their studies. $^{18}$ 

The Libertad de enseñanza policy also opened up an opportunity unheard of in the history of the Spanish midwife profession: it allowed the midwives themselves to be teachers within regulated and recognized educational institutions. At least two schools making use of this provision were created in Madrid between 1868 and 1876. The first, founded between 1868 and 1870, was promoted as a 'special school of obstetrics for ladies or the teaching of midwives' and Francisca Iracheta, a midwife trained at Madrid University, was 'the teacher charged with the theoretical and practical training for deliveries', a task which she performed under the direction of her husband, a doctor of medicine and surgery, José López de Morelle.<sup>19</sup> The school admitted women over 18 years of age, although it warned that the under-twenties and unmarried women would be unable to take their examinations at the university. All entrants were required to have completed or to be engaged in a course of elementary studies, and were offered a training course that could be followed in four to six months. 20 Complementary to the teaching, students were to study a manual written for the purpose by Francisca Iracheta herself. Published in 1870, it was the first of its kind authored by a woman in Spain.<sup>21</sup> Its contents conformed to the national syllabus requirements, and were presented in the form of questions and answers, with the author signalling the points she considered essential for midwives to know. The book contained illustrations as learning aids, as well as 'a pattern for fashioning an artificial pelvis, with which to practise in the absence of a dummy'.<sup>22</sup>

Iracheta's book was one of the first childbirth manuals aimed at midwives to be written in the nineteenth century. It revived, in its format and objectives, a tradition begun in Spain in 1750 by Dr Antonio Medina, whom Iracheta cites in the first few pages. In 1866, the Professor of Obstetrics at the University of Madrid had written what was probably the first nineteenth-century obstetrical manual for midwives. It was 270 pages long, and focused on the female anatomy and the physiology of childbirth. It was written in a language replete with technical terms, which were printed in italics accompanied by a brief explanation. The book was commissioned by the government, probably in an attempt to solve the problem of the shortage and antiquity of Spanish textbooks, and

also to contribute to the teaching of midwives in accordance with the 1861 law.<sup>25</sup> Four years later Iracheta's book was published, with a very different perspective, opting for a more pedagogical and direct style, and including a glossary of obstetrical terminology which gave the correct pronunciation 'to avoid [the midwives] feeling foolish among persons of perfect learning'.<sup>26</sup> In 1871, another short manual written by the Professor of Obstetrics at the recently founded *Universidad Libre de Córdoba*<sup>27</sup> added to the range of textbooks on offer, several of which were written by teachers connected to the various midwife training establishments.

Iracheta says in the prologue of her book that she wrote it to contribute to the 'good of all of my kind, and particularly for those of my sex, unjustly disregarded by men'. She demonstrates a strong and decided character in her ideas about her profession, and does not shy away from polemic. She begins by analysing the distinct meanings of the words *matrona* and *partera*, which appear as synonyms in the legal texts and in the medical press, despite the second term's pejorative connotation. It is clear, she wrote, that a *matrona* is 'the practitioner of obstetrics, that is to say of deliveries', while 'any woman who, without training, performs deliveries as an "intruder" or healer, is known only by the name of *partera*'. <sup>28</sup> For Iracheta the profession of midwifery was 'decent, helpful and fitting for women', <sup>29</sup> and 'one of the few resources available to women for making a living for themselves, [and] if necessary for their families'. <sup>30</sup>

Iracheta entered the public arena and appeared in the press under her husband's auspices, something which was obligatory at the time. The new marriage legislation denied wives the possibility of signing contracts or publishing scientific or literary writings as author or translator without the express permission of their husbands. The fact that her husband was a doctor added a useful note of professional authority, reinforced by his proclamation printed at the beginning of the book, which declared him to be 'in complete accord with her doctrines'. 32

Several years later, in 1875, another midwife, Pilar Jáuregui de Lasbennes, followed Iracheta's path as a teacher in a similar school, and also wrote on professional matters, in the Madrid medical and general press. Jáuregui advertised in the medical press as:

a practitioner of deliveries, qualified at the Madrid Faculty of Medicine, [who] offers herself to serve as an assistant in those cases when, due to the duration of the delivery or some other reason, the physicians cannot remain for the necessary time at the side of the women in labour. She has been exercising her profession for a long time, and she has carried out hundreds of deliveries. For this purpose she offers her residence, Calle del Pez, 32.<sup>33</sup>

Months later, the same publication announced the foundation, on her initiative, of a school for midwives which she would herself direct in collaboration with Angel Pulido,<sup>34</sup> a young newly-qualified doctor who would become a 'prominent figure' in the medical profession.<sup>35</sup> The teaching was divided between them, with Jáuregui taking the practice and he the theory. The school was connected to the *Museo Antropológico* (anthropological museum), a scientific institution recently set up by the celebrated surgeon Pedro González de Velasco, proponent of science education reform and largely responsible for the introduction of various experimental disciplines into Spain.<sup>36</sup> Midwifery was taught in the museum school until at least 1878;<sup>37</sup> we have found no further details of its activities thereafter.

Pilar Jáuregui was also connected to the museum circle through her activities in promoting and defending her profession; she published several articles in the journal founded by Dr González de Velasco, El Anfiteatro Médico Español (1873-83). As in most of her writings, she argued time and again for a good and continuous theoretical and practical training for midwives, and for the admission to the profession of single women over 20 years old. She also called for the creation of posts funded by the local authorities, and for the prosecution of unauthorized practitioners, who were intruding into midwifery, as a way of promoting the dignity of the profession.<sup>38</sup> When writing on training, she defended the study both of normal and difficult obstetrics and of 'the afflictions of the womb', not to challenge the doctors' authority, but in order to be of assistance to them. This form of collaboration was based strictly on a patriarchal relationship between the sexes, and reflected a vision of the profession in which gender outweighed skill. In tune with the opinions of craniologists and physicians of the period,<sup>39</sup> she believed that her physiological system in general, her greater sensibility, the abnormal circumstances in which the needs of our sex are periodically placed, are further inescapable obstacles . . . to achieving the performance of operations like the physiciansurgeon.<sup>40</sup> This idea of the woman as a prisoner of her body was not shared by Francisca Iracheta, whose ideological positions were less deterministic and gender-based. Iracheta agreed with Jáuregui in the general objectives of improving and defending the profession, but, although she also agreed with the limitation of midwifery practice to normal deliveries, she declared that:

nobody believes . . . as far I as know that there may be women as apt and worthy as men to be adorned, like them, with scientific titles, and if any entertain the opposite opinion, all could be resolved if they tested the fitness of both men and women . . ., with repeated and rigorous examinations. <sup>41</sup>

If any doubt should linger that she believed gender to be outweighed by skill, she asked that 'in the case that male midwives were permitted to exist, neither should they be conceded more authority than midwives', claiming that only 'a superior class of doctor' should act in complicated births. <sup>42</sup> In 1870, when Iracheta wrote the above, there were no female doctors in Spain and no woman had ever followed a degree course at university (or studied abroad). The first female students of medicine began their studies three years later, in the midst of a polemic that lasted for more than a decade, with one of the fiercest opponents of this development being Jáuregui's partner, Dr Angel Pulido, who found midwifery, together with nursing, the only fields of medical practice suitable for women. <sup>43</sup>

It is difficult to assess the impact that these Madrid schools had on the training of midwives, because of the scarce information available. At any rate their effect was not reflected at all in the University of Madrid's degree register, where the number qualifying remained obstinately small when compared, not only with a city of similar size like Barcelona, but also with smaller cities at lower levels of economic development, like Seville, Valencia and even Zaragoza (Table 3.1).

In 1876 the *Libertad de Enseñanza* was revoked, and, although private forms of education continued at several educational levels, we hear no more of any midwifery school until the end of the century, and then in a completely different educational and social context. In 1888 a new law was passed, which remained in force until 1904. Faithful to its predecessor in terms of curriculum content, the stipulation of practical sessions in hospital clinics and professional obligations, the law's main innovation was the total

removal of any kind of official teaching, including the hospital-based theory classes. The midwives and *practicantes* were now simply expected to 'have previously learned' the knowledge required. <sup>44</sup> It also eliminated the age, marital and elementary education requirements for entrants, and seems to have had a positive effect on the number of graduates. Between 1877 and 1882 the number qualifying increased rapidly – representing the greatest increase of the sixty-year period examined – not only at the universities of Madrid, Seville, Valencia and Zaragoza, but also in the country as a whole (Table 3.1).

To acquire the precise training necessary to gain a qualification, schools like the Barcelona 'Academia de Matronas – run by reputable teachers of the faculty of medicine' must have been essential. It operated between 1893 and 1900 and advertised in *El eco de las matronas*, the first professional journal for midwives. <sup>45</sup> Unlike its Madrid predecessors, there were no outstanding midwife teachers; on the contrary, the instruction appears to have been dominated by anonymous male university teachers, whose names remain unidentified during eight years of advertisement. The academy's director, also editor of the journal, was the gynaecologist Juan Doménech. It is unknown whether he shared the teaching with his wife Concepción Pérez Tomás, a midwife and the editorial assistant of *El eco* between 1893 and 1895. <sup>46</sup> The academy seems to have been successful, and took students from all four Catalan provinces. <sup>47</sup>

The academy also provided training for *practicantes*, who, at the beginning of the century became a threat to midwives, as a result of their authorization to attend childbirths. In 1901 practicantes began to receive an elementary education in obstetrics, 48 and in 1902 the title of 'practicante authorized for the performance of normal deliveries' was created. 49 This qualification was only valid for practice in towns with fewer than 10,000 inhabitants, and opened up a new market that was probably not fully served by trained midwives. Nevertheless it posed an undeniable threat to the monopoly that midwives had enjoyed for centuries, and added significantly to the credentials of a profession that was increasing in strength and organization.<sup>50</sup> The *practicantes* took full advantage of new opportunity, with 177 of them obtaining the qualification between 1901 and 1906, and 301 over the following six years.<sup>51</sup> This increase coincided with a reduction in the number of midwives qualifying over the same period (Table 3.1). Although nothing prevented women from studying to be *practicantes*, they did not choose this professional path and remained faithful to a career in which, paradoxically, they achieved neither autonomy nor even a leading role.<sup>52</sup>

# PRACTISING MIDWIFERY IN GRANADA AT THE TURN OF THE CENTURY

Once midwives had completed their studies, they were able to exercise their profession either privately, or within a public institution, or both, for the two activities were not deemed incompatible. The cities offered the greatest opportunities for employment, but competition was also much stronger there. In 1900 the city of Granada had a population of almost 76,000 with an economy based on recently introduced sugar-refining industries and the service sector. It boasted some ten midwives and 105 physicians.<sup>53</sup> Only three or four of these midwives would have occupied paid public posts.

The most important public welfare institution was the Beneficencia Provincial, funded by the provincial government, which ran the city hospitals.<sup>54</sup> (From the mid-nineteenth century, the Beneficencia Municipal and Beneficencia Provincial had set up welfare provisions, including medical services, for the poor, though levels of services varied greatly.) In Granada, provisions for maternity cases were made at the maternity home, where all cases of full-term pregnancy that applied were attended, and the wards of the provincial hospital, San Juan de Dios, which dedicated itself to premature deliveries.<sup>55</sup> Care in the wards of the provincial hospital came under the jurisdiction of the Professor of Obstetrics of the faculty of medicine, and they were staffed by doctors and student interns. There are no reports of midwives being appointed there between 1873 and 1923, although it was probably in the wards that pupil midwives gained their practical experience in the first years of the century. In the maternity home, however, the staff consisted of a surgeon, a nurse, a porter, and a midwife, who had to be resident there.<sup>56</sup> This unique position for a midwife within the *Beneficencia* Provincial was in great demand, and several midwives held the post in succession. The first of these, Eloisa Vilchez, resided in the home between 1885 and 1894,<sup>57</sup> and received a salary which rose from 912 pesetas in 1886 to 1,250 in 1888. $^{58}$  This considerable increase over two years seems to have been in response to a demand

presented by Eloisa Vílchez herself, in which she protested about her increased workload and the abolition of her ración, ('allowance' or payment in kind) which she had hitherto enjoyed.<sup>59</sup> The salary and accommodation seem to have formed an attractive combination, to the point where the provincial government was requested to open her post to public competition, a petition that was eventually turned down.<sup>60</sup>

For its part, Granada City Council set up, as one aspect of its welfare provision, the *Beneficencia Municipal*, an organization to care for poor inhabitants requiring medical attention but not hospital admission. In 1893 it created a casualty service based in the city's *Casa de Socorro* (assistance house), where municipal doctors provided all kinds of health care, including attendance at deliveries. For births, however, they counted on the 'assistance' of one of the two municipal midwives or their substitutes. These midwives, unlike the doctors, were not on permanent duty in the *Casa de Socorro* but were called when required, so they could continue to carry out their other private or public work, attending home deliveries in different parts of the city. Within the *Casa de Socorro*, the function of the municipal matron was limited to that of assistant to the doctor, while outside in the mothers' homes or in her own house, she could perform her work with greater autonomy. 63

Both normal and complicated deliveries took place in the *Casa de Socorro*, although, for the latter, the city also had special clinics at the San Juan de Dios hospital and at the maternity home. In any case, the 'complicated' deliveries assisted at the *Casa* could not have been too serious, as there were no beds for the hospitalization of patients. However, the number of complicated cases grew, from 28 in 1899<sup>64</sup> to 54 in 1904,<sup>65</sup> the only period for which we have data. This seems to indicate a growing interest and participation in deliveries on the part of the municipal doctors, although it is not known whether this was in collaboration with the municipal midwives or at their expense.

By 1895 the Granada *Beneficencia Municipal* had its first *matronas titulares* (official midwives), Pilar Ortiz Grimaud and Cristina Martín, <sup>66</sup> and at the beginning of 1896 another three were nominated as assistant midwives at the *Casa de Socorro*, <sup>67</sup> honorary posts for which there was no remuneration except when they had to substitute for one of the office holders for a period longer than fifteen days. <sup>68</sup> Pay does not appear in any case to have been the key reason for midwives' participation in the municipal health services. The

annual salary budgeted for the official midwives was 500 pesetas in 1893,<sup>69</sup> which fell to half that figure in 1896,<sup>70</sup> and disappeared altogether in 1899, because of 'the recent economies agreed'.<sup>71</sup> These economies do not seem to have affected the rest of the municipal health functionaries who continued to collect their salaries, all of which were higher, from the 1,250 pesetas paid to the veterinary surgeon to 2,000 for the chief physician. Apart from the midwives, the person in the *Casa de Socorro* with the smallest income was the porter, who earned 1,000 pesetas.<sup>72</sup> Outside the world of public functionaries, the city's unskilled labourers earned 540 pesetas in the mid-1880s, somewhat more than the midwives.<sup>73</sup> The inequality of salaries was not peculiar to Granada City Council, but was standard in industry too, which consigned women's work to the cheapest and most ancillary categories, thus helping to perpetuate the patriarchal social order.<sup>74</sup>

In 1904 a new system of payments was approved by the city council, giving five pesetas for every delivery attended.<sup>75</sup> This new form of remuneration, probably combined with the demand for midwives' services, must have encouraged a slow increase in the number of places, for by 1917 there were seven municipal midwives, assigned to different districts of the city.<sup>76</sup>

In any case, the low and at times non-existent pay of the midwives suggests the possibility that these posts were sought after as part of a professional strategy, to achieve qualifications and recognition for the purposes of obtaining work in the private sector. Angustias Sánchez Martín, who had been established in private practice in the city centre since 1889,77 claimed as much when in 1896 she secured the post of assistant matron at the Casa de Socorro, with the sole aim of 'achieving the corresponding qualification'.78 Most of her colleagues referred to their public positions in local press advertisements and on the doors of their houses, using their municipal work to guarantee their professional status.<sup>79</sup> Midwives normally engaged in private practice alone and associations between them were rare. Working with a physician was somewhat more common, and had already been tried out in the field of teaching. This collaboration must have provided a reciprocal warranty, with the doctor conferring his scientific authority and the midwife her moral authority, thus neutralizing the force of custom in questions of reproduction and sexuality without altering the gender structure of the organization of the professions. We do not know the terms of this collaboration, but we can suppose that it was

largely subject to the principles of professional subordination that governed all the legislative norms. It is not surprising that broad sectors of the Spanish medical profession expressed great animosity and hostility at the arrival of the first medical women, <sup>80</sup> and to their interest in participating equally in the speciality of gynaecology, which was jealously guarded by the male gynaecologists, proponents of the most extreme gender-based medical ideas. <sup>81</sup>

The first midwife at the Granada *Casa de Socorro* shared a consulting room with one of its physicians, at least between 1895 and 1899, a period when the institution admitted a large number of difficult deliveries, as seen above. Advertisements appearing in the local press show the evolution of their professional relationship, as one in which there was a gradual loss of the midwife's importance. Her position shifted from being an autonomous professional, backed by her own curriculum and knowledge, as in:

Doña Pilar Ortiz Grimaud, a practitioner honoured with a first-class mark in deliveries. Midwife to the *Casa de Socorro* and to *La Sociedad Humanitaria*. Specialist in diseases of the womb. Méndez Núñez, 17<sup>82</sup>

to being endorsed by the physician, although retaining her authority:

Diseases of the womb. Gynaecological consulting room for the healing of diseases of the womb by the practitioner Doña Pilar Ortiz Grimaud, with a first-class qualification in deliveries, under the direction of Don Manuel Arenas Pérez, physician-surgeon. Méndez Núñez, 17<sup>83</sup>

She ended up, four years later, as the physician's assistant:

Diseases of the womb. Don Manuel Arenas Pérez, graduated in Medicine and Surgery, is honoured to offer the public his new gynaecological consulting room, specialized in the examination and healing of diseases of the womb. Counting on the assistance of the qualified and intelligent practitioner of deliveries Doña Pilar Ortiz Grimaud, who will examine those patients who so desire. Jesús and María (Street), 384

The inversion of roles was complete. While in the second advertisement appearing in 1895 the physician appeared as an inducement to attend Ortiz's clinic, by 1899 the reverse was the case.

On the other hand, it is clear from the earlier publicity that Ortiz

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promoted herself as a specialist not only in deliveries, but also in 'diseases of the womb', which raises a question as to the real prerogatives of the midwives, which often exceeded the legal limits of attending normal childbirths. In the same period, María Morales, qualified at the University of Madrid, announced her 'speciality in the healing of sterility'. <sup>85</sup> In 1878 Pilar Jáuregui argued for the instruction of midwives in 'the afflictions of the womb, as it is less distressing for a female to be examined by another woman than by the physician', with midwives having to refer to the physicians in severe cases. <sup>86</sup> Barcelona midwives at the end of the century and the beginning of the twentieth century were often advertised as '(female) surgeons' and even as '(female) physicians', something which caused irritation amongst some physicians, who took advantage of this situation to attack these and all midwives, accusing them of being intruders. <sup>87</sup>

Professional encounters between patient and midwife, for whatever purpose, could take place either in the woman's or the midwife's house. In cities like Granada some midwives established consulting hours for receiving patients, <sup>88</sup> and in the largest cities this was the norm, as in Barcelona, where 72 per cent of those practising in 1929 had consulting hours. <sup>89</sup> It was also common for them to offer bedrooms to those women needing them, as did several midwives in Granada and Barcelona between 1895 and 1929. <sup>90</sup> Rosalía de Queral, for example, maintained a flat near Barcelona's railway station where she offered

board and lodging for pregnant women with attendance at delivery. Ladies in suffering are invited to come to this clinic, where they will find the solace they seek before and after childbirth.<sup>91</sup>

This custom was also practised outside of Spain. According to a report in the medical press, Parisian midwives working in the city's welfare service had to provide: 'two large rooms, well-aired, with bed, cradle, chairs, night table and dressing table; they must also offer . . . food, medicines, white clothing, swaddling clothes, and all the white bedclothing that the mother would need for 11 days'.92

In rural areas the presence of midwives, and doctors, must have been irregular. There were many calls for the creation of official midwife posts to be funded by local councils, as in the cities, to correspond with the positions which had existed for physicians since 1854.<sup>93</sup> The creation of such posts was seen as a way of

protecting and reinforcing the midwifery profession and of preventing the intrusion of 'mercenaries' and 'healers' with their inadequate knowledge. <sup>94</sup> It was also claimed to be a way of improving health care, and ensuring adequate coverage of an area in which physicians did not normally become involved, due to the custom of delivering with a midwife or, in her absence, with another woman, and also to the physicians' scant training and interest in midwifery. <sup>95</sup>

Yet no order obliging local authorities to provide official midwives came into force until 1924. 96 In the meantime the *practicantes* saw their opportunity, extended their activities, and encroached on the work of midwives. The 1904 *Instrucción General de Sanidad Pública* (General public health order) compelled councils to employ one physician and one *practicante* for every 300 families. 97 In these posts the *practicantes* were authorized to perform deliveries, for which they had been receiving specific training since 1901. However, the general repercussions on the way deliveries were attended were negligible. The greatest impact was on the professional status of the two groups, and for midwives was much less favourable.

#### CONCLUSION

Throughout the nineteenth century, access to the profession was controlled by doctors within the universities, although to judge by their teaching practices, their interest was more centred on the exercise of power than on the real improvement of midwives' training. Some midwives took advantage of the few opportunities that opened up for them and became recognized teachers and public figures themselves. Many midwives probably exceeded the legal limits in their practice of obstetrics, and performed other activities related to women's health, although what happened behind the doors of their clinics remains a secret about which there is very little information. At the beginning of the twentieth century, Spanish midwives still had no power over their own training, and lacked the minimum professional organization necessary to reflect a collective identity or to declare the existence of any group interests. There were only minimal attempts to apply the models of collective organization that functioned for most health professionals, including the *practicantes*. 98

Little changed until midwives' formal organization became obligatory in the late 1920s, when midwives had to become members of

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their professional body, the *Colegio de Matronas*, as was already the case for all other medical practitioners. From that moment onwards, national maternity insurance and then national health insurance schemes, the appearance of nursing as a new female health profession, the consolidation of medical specialities, and the growing presence of women in Spanish public life became elements which shaped the history of Spanish midwives that is still to be written.

#### **ACKNOWLEDGEMENTS**

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- 1 T. Ortiz, 'From hegemony to subordination: midwives in early modern Spain', in H. Marland (ed.) *The Art of Midwifery: Early Modern Midwives in Europe*, London, Routledge, 1993, pp. 99–106.
- 2 A. Albarracín Teulón, 'La titulación médica en España durante el siglo XIX', Cuadernos de Historia de la Medicina Española, 1973, vol. 12, pp. 15–80.
- 3 'Reglamento para la enseñanza de practicantes y matronas', Gaceta de Madrid. 28 noviembre 1861.
- 4 Ibid., tít. I, cap. III.
- 5 Ibid., cap. IV, art. 38.
- 6 See Ortiz, 'From hegemony', pp. 100-2.
- 7 'Reglamento para la enseñanza', tít. III, cap. V.
- 8 Ibid., tít. III, cap. I.
- 9 'Ley General de Instrucción', *Gaceta de Madrid*, 9 septiembre 1857, tít. I, art. 5.
- 10 C. Alvarez Ricart, La mujer como profesional de la medicina en la España del siglo XIX, Madrid, Anthropos, 1988, pp. 179–80.
- 11 See the accounts collected ibid., pp. 179–81.
- 12 R. Torres, 'Sobre parteras', España Médica, 1862, no. 7, p. 214. Cited in Alvarez Ricart, La mujer, p. 178.
- 13 'Decreto ley de libertad de enseñanza', Gaceta de Madrid, 21 octubre 1868, art. 6. The defence of individual rights suffered, however, from a strong gender bias.
- 14 Ibid., art. 3 and 6.
- 15 F. Herrera Rodríguez, 'La enseñanza libre de practicantes y matronas en el Cádiz de 1868', *Actas del VIII Congreso nacional de Historia de la Medicina. Murcia-Cartagena*, Murcia, 1988, vol. 1, pp. 222–8.
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- 17 In addition to the school trained, another eight midwives were also examined at the university at this time, having studied with different town physicians in the province: Herrara Rodríguez, 'La titulación', pp. 235–6.
- 18 A. Fernández Dueñas, La Facultad de Medicina de la Universidad Libre de Córdoba y su época (1870–74), Córdoba, Diputación Provincial, 1983, pp. 203–9.
- 19 F. Iracheta y Arguiñarena, Examen de matronas conforme hoy son y conforme deben ser, Madrid, Imprenta Médica de la viuda e hijos de Alvarez, 1870, pp. i–ii.
- 20 Îbid., p. i.
- 21 See reference in note 19. As far as we know, only the first 48 pages of this book are preserved (in duplicate) in the Archivo General de la Administración (hereafter AGA), legajo 6505. We are indebted to Consuelo Flecha for information about the existence of this book.
- 22 Iracheta y Arguiñarena, Examen, p. xv.
- 23 A. Medina, Cartilla nueva, útil y necesaria para instruirse las matronas, Madrid, Antonio Sanz, 1750. The style was common to other classical obstetrical manuals written by midwives, such as Siegemund, des Coudray or Coutanceau. For books written by midwives in early modern Europe, see G. Calvi, 'Manuali delle levatrici (XVII–XVIII sec.)', Memoria. Rivista di Storia delle Donne, no. 3, 1982, pp. 114–16; T. Ortiz and D. Sánchez, 'La experiencia escrita de las matronas, siglos XVII–XVIII', in P. Ballarín and C. Martínez (eds) Del patio a la casa, las mujeres en las sociedades mediterráneas, Granada, Universidad de Granada, 1996, pp. 239–47.
- 24 Iracheta y Arguiñarena, Examen, footnote on p. xv.
- 25 F. Alonso Rubio, Manual del Arte de Obstetricia para uso de las matronas, Madrid, Imprenta Nacional, 1866.
- 26 Iracheta y Arguiñarena, Examen, p. xv.
- 27 M. Vázquez y Muñoz, Compendio de obstetricia para la enseñanza de comadrones y parteras, Córdoba, Diario de Córdoba, 1871.
- 28 Iracheta y Arguiñarena, *Examen*, p. 19. Data on the *parteras* are scarce, but work is currently being undertaken on their competition with trained midwives in the early twentieth century.
- 29 Ibid., p. 1.
- 30 Ibid., p. 22.
- 31 'Ley provisional de matrimonio civil', *Gaceta de Madrid*, 21 junio 1870, cap. V, art. 49 and 52.
- 32 Iracheta y Arguiñarena, Examen, p. vii.
- 33 The advertisement appeared in the journal *El Anfiteatro Anatómico Español*, 1875, p. 342, and is reproduced by Alvarez Ricart, *La mujer*, p. 182.
- 34 Ibid.
- 35 Angel Pulido Fernández (1853–1932) completed his studies at the Madrid faculty of medicine in 1874. He was a military physician and became General Director of Health at the beginning of the twentieth

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century; he edited several medical journals and local newspapers, was a member of the Spanish parliament and a senator. He was a founder member and secretary of the Spanish Society of Gynaecology set up in 1874: J. Alvarez Sierra, *Diccionario de autoridades médicas*, Madrid, Editora Nacional, 1963, p. 427.

36 A private school of medicine and surgery also operated in the museum. On this centre and its founder, see J.M. López Piñero, 'González de Velasco', in J.M. López Piñero et al., Diccionario histórico de la ciencia moderna en España, Barcelona, Península, 1983, vol. 1, pp. 417–20.

37 In an article published in the same year she was referred to as a teacher at the school: P. Jáuregui, 'Una opinión', El Anfiteatro Anatómico Español y el Pabellón Médico, 1878, vol. 6, p. 96.

38 Ibid.

- 39 See E. Fee, 'Nineteenth-century craniology: the study of the female skull', *Bulletin of the History of Medicine*, 1979, vol. 53, pp. 415–33; G. Scanlon, *La polémica feminista en la España contemporánea*, Madrid, Akal, 1986, pp. 161–8.
- 40 Jáuregui, 'Una opinión', p. 96.
- 41 Iracheta y Arguiñarena, Examen, p. xiii.
- 42 Ibid.
- 43 Some of his opinions written in 1878 are reproduced by Alvarez Ricart, *La mujer*, pp. 82–5, 88–92 and 102–7.
- 44 'Reglamento para las carreras de practicantes y matronas', *Gaceta de Madrid*, 18 noviembre 1888. The quotation is from art. 5.
- 45 Brief mention of this journal was found in I. Segura and M. Selva, *Revistes de dones (1846–1935)*, Barcelona, Edhasa, 1984. The collection is partially preserved in the Madrid Municipal Publications Library, the Barcelona City Archives and the Catalonian Library in Barcelona.
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- 47 A news item in 1899 reported that nine students had passed the university examinations, one from the capital, and the rest from towns and villages in Catalonia province: *El eco de las matronas*, 1899, vol. 6, no. 14, p. 190.
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- 51 Data extracted from AGA, Sección Educación, Libro de Registro de Títulos de Practicantes, no. 105.
- 52 Between 1901 and 1912 only five women obtained the title of *practicante* authorized to carry out deliveries: ibid.
- 53 The figure for midwives comes from census data used by Clara Martínez Padilla in her forthcoming PhD thesis 'The health professions in Granada from 1874 to 1923'. The figure for physicians is taken from T.

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- 54 The San Juan de Dios provincial hospital, the San Lázaro hospital and the *Hospital Real* (Royal Hospital), which housed a mental asylum, a home for waifs and strays, and a home for foundlings.
- 55 L. Seco de Lucena, Anuario de Granada para 1893, Granada, Imprenta El Defensor de Granada, 1893, p. 317; L. Seco de Lucena, Anuario de Granada, Granada, Imprenta El Defensor de Granada, 1901, p. 298; L. Seco de Lucena, Anuario de Granada, Granada, Imprenta El Defensor de Granada, 1917, p. 177.
- 56 In the eighteenth century it had also been obligatory for midwives working in medical institutions to live on the premises, as in the case of Luisa Rosado of Madrid: Ortiz, 'From hegemony', p. 103.
- 57 'Matrona', El Defensor de Granada (hereafter DG), 1885, vol. 6, no. 1820; L. Seco de Lucena, Anuario de Granada para 1894, Granada, El Defensor de Granada, 1894 p. 564.
- 58 'Asamblea provincial', DG, 1888, vol. 9, no. 2823.
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- 60 DG, 1888, vol. 9, no. 3034. Vílchez was substituted by Rosario Favores Sevilla in 1894: 'Nombramiento', DG, 1895, vol. 16, no. 7186. In 1917 Eloísa Bueno García held the post: Seco de Lucena, Anuario, 1917, p. 177.
- 61 Reglamento de los servicios municipales de Beneficencia y Sanidad aprobado por la Excma. Corporación en sesión de 7 de julio de 1893, Granada, Imprenta de Francisco Reyes. Section 4 is dedicated to the Casa de Socorro.
- 62 Ibid., art. 140; L. Seco de Lucena, *Anuario de Granada*, Granada, El Defensor de Granada, 1906, pp. 485–6.
- 63 Guía de Granada (Granada, Almería, Málaga y Jaén), Granada, El Defensor de Granada, 1911, p. 46.
- 64 'Asistencias de la Casa de Socorro en 1899', La publicidad, 1900, no. 4900.
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- 66 L. Seco de Lucena, *Anuario de Granada para 1895*, Granada, El Defensor de Granada, 1895, p. 654.
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- 76 Seco de Lucena, Anuario, 1917, p. 179.
- 77 'Matrona', DG, 1889, vol. 10, no. 3183.
- 78 AMG, Sección Beneficencia, legajo 1210, Sobre nombramiento de matronas de la Casa de Socorro.
- 79 Advertisements for the surgeries of Pilar Ortiz Grimaud y Cristina Martín Rodríguez appear, for example, in *DG*, 1895, vol. 16, no. 7912; *DG*, 1896, vol. 17, no. 8072; *DG*, 1897, vol. 18, no. 9413.
- 80 See Alvarez Ricart, La mujer, pp. 59-170.
- 81 Ibid., pp. 150–1 and J. de Miguel, El mito de la inmaculada concepción, Barcelona, Anagrama, 1979.
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- 85 DG, 1895, vol. 16, no. 7922.
- 86 Jáuregui, 'Una opinión', p. 96.
- 87 El eco de las matronas, 1898, vol. 4, no. 3, p. 34. Intrusion, or unauthorized practice, was the great obsession of the Spanish professions in the nineteenth century, particularly amongst the medical profession: A. Albarracín Teulón, 'Intrusos, charlatanes, secretistas y curanderos', Asclepio, 1972, vol. 24, pp. 323, 366.
- 88 As did Pilar Ortiz in 1895 (*DG*, 1895, vol. 16, no. 7922) and Juana Iglesias in 1903 (*DG*, 1903, vol. 24, no. 12953).
- 89 Figures calculated from a total of sixty midwives who appear in the Album selecto de Barcelona Médica ante la Exposición Internacional, Barcelona, Imprenta Romana, 1929, n.p.
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- 93 J. Valenzuela Candelario, 'El espejismo del ejercicio libre. La ordenación de la asistencia médica en la España decimonónica', *Dynamis*, 1994, vol. 14, pp. 269–304.
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