

**Quick, Boil Some  
Water!**

**The Story of Childbirth  
In Our  
Grandmothers' Day**

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Acknowledgements:

To all the women who answered the call, it was a privilege to listen to your story. You taught me to take nothing for granted.

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## Introduction

Childbirth, as any granny will tell you, was once a journey into the unknown. Rather than ponder which pushchair to buy or fret over towelling or disposable nappies, previous generations of women worried about what lay ahead. Sex education at school was unknown, and some of those pregnant for the first time had no idea how the baby emerged from their swollen tummy. Medical staff rarely gave explanations and would push and prod with little offer of pain relief let alone sympathy.

Today, we hear stories of over-worked midwives and short-staffed hospitals, but the truth is that childbirth has never been easier.

In Ancient Greece, doctors often refused to take pregnant women as patients because the risk of death was high and too many fatalities could ruin a reputation. Medea, a Greek war maiden, was so turned off pregnancy that she said:

*I would rather stand three times in a battle line than give birth to one child.<sup>1</sup>*

More than two thousand years later and little had changed. In the 1920s a group of women working for social change used the slogan:

*It's four times more dangerous to bear a child as to work in a mine; and mining is man's most dangerous trade.<sup>2</sup>*

The main dangers in childbirth are heavy bleeding, infection and obstructed labour. Small women, especially girls who haven't stopped growing, are especially vulnerable to obstructed labour. If the pelvis is too small for an infant to pass through then the birth becomes blocked. Without a Caesarean Section, both the infant and mother can die as contractions overwork in an effort to push the baby out.

Older women who have had many children can suffer a similar fate. After numerous pregnancies, their stomach muscles may be loose and overstretched so that an infant is not tucked into the tight up-down position. As a result, the baby can lounge across the womb in any position and, when labour begins, the infant's shoulder or abdomen sits over the opening of the womb. A child cannot be born naturally in this position and, without a Caesarean Section, both mother and baby face death.

And even after the birth of a healthy infant, there are still dangers. If the afterbirth is not delivered quickly from the womb, its bulk can prevent the womb from deflating. This leaves blood vessels open and dripping like faulty taps. Under these conditions, it doesn't take long for a woman to bleed to death.

Infections can happen in the days following birth. As the womb sheds its bloody waste, the warm moist flow provides a hothouse for germs to grow. Bacteria can be quick to multiply, travel

upstream to the womb and pass into the blood stream. Many years ago, when bathing was infrequent and hygiene was lax, this was known as Childbirth Fever and caused untold deaths.

### **Early interventions**

In Medieval times, the Christian church had a biblical explanation for the perils of childbirth. They put the blame firmly on Eve and her misdemeanours in the Garden of Eden. The church decreed that women were the "Sisters of Eve", and the rigours of labour were God's punishment for her sins.

Any effort to relieve women's pain in childbirth was looked at suspiciously. *The better the witch; the better the midwife*, was a damning but popular Medieval saying.<sup>3</sup> To guard against witchcraft the church took charge of maternity care. Midwives had to be licensed by a bishop and swear an oath not to use magic when assisting women through labour.<sup>4</sup>

And pregnant women weren't only advised against witchcraft. In Sunday sermons, churchmen advised them to prepare their shroud in case of death, and special prayers were said so that pregnant women would be delivered through the path ahead. Women close to childbirth were encouraged to confess their sins, and water was kept close at hand for a quick baptism by midwives.<sup>5</sup>

Royal women were given the church's highest prayers as they carried heirs to the throne. But this barely compensated for the fact that these

regal women gave birth in rooms thronged with courtiers and churchmen who all felt duty-bound to witness that the newborn babe and heir came truly from the royal womb.

James II, an unpopular 17<sup>th</sup> century monarch, banished the royal observers from his wife's birth chamber after she became ill. James' wife was Catholic and ministers feared a male child, a future king, would be raised with Catholic sympathies. The ministers became suspicious when they saw a large brass warming pan being carried to and from the queen's chamber. When the birth of a healthy son was announced, the ministers accused the king of swapping infants in the warming pan. Their conviction was so strong that James, along with his wife and child, were forced to flee England.

When Marie Antoinette gave birth for the first time a century later, ministers and court officials crammed into the birth chamber and even jostled for space on top of furniture to get a view. The room became so stuffy that the poor woman fell into a coma due to the lack of air.

### **Science lends a hand**

After centuries of avoiding childbirth, scientific strides in the 17<sup>th</sup> century gave doctors the confidence to finally enter the childbirth chamber. To help in difficult births, surgeons developed pincers, or forceps, that could be used to grasp the infant and pull it out from the mother's birth canal. However, some of the instruments were crude and grasped more than

the baby. As a result, it was not unusual for women to be left with torn bladders or ripped wombs.

Surgeons, and their inventions, did help many women with difficult births, but letting men into the bed-chamber was not a popular trend among husbands. Many feared that the male doctors might become too intimate with their wives. As a result, doctors were forced to adopt a strict code of behaviour to protect the modesty of their patients. Questions relating to periods, bladder or bowel problems could be asked only through an older female attendant. Vaginal examinations were done during a contraction when the woman would be distracted by pain. Childbirth rooms were kept dimly lit and women's bodies covered by bedcovers at all times. Even the delivery was done under the bedcovers and the doctor was forced to feel his way blindly.

One doctor wrote of his first examination of a labouring woman:

*Whether it was head or breech, hand or foot, man or monkey, that was defended from my uninstructed finger by distended membranes, I was as uncomfortably ignorant, with all my learning, as the foetus itself that was making all this fuss.<sup>6</sup>*

Working blind made forceps deliveries especially difficult. Inexperienced doctors were never sure which part of a woman's anatomy they had caught in their instruments. Even the cutting of the umbilical cord was done under the bedcovers, and some doctors reported male infants losing their penis.

There are few statistics to show whether doctors actually helped reduce the number of women dying in childbirth. A few physicians suggest they made it worse. Oliver Wendell Holmes, a 19<sup>th</sup> century obstetrician, accused doctors of spreading infection by carrying instruments from patient to patient and not washing their tools between births.<sup>7</sup> Dr. Holmes pointed out that midwives had fewer cases of infection than doctors because they used materials from the patients' own homes. He charted the story of a doctor who lost three patients after he attended their births with samples of a dead woman's afterbirth in his pocket. The doctor continued to deny he was at fault and was well supported by others in the profession.

But Dr. Holmes was ahead of his time. This was an era when even washing hands between patients would have been considered a bizarre ritual. It wasn't until the 1870s, that Joseph Lister's ideas of germs gained credibility and doctors began cleaning up their act.

## **The Pain**

Alcohol was the traditional anaesthetic but it took a lot of beer or gin to have any effect on long and painful labours. In the 18<sup>th</sup> century the rich began using opium, but addiction and death were both problems.

Chloroform was the first great stride forward. A small amount was dropped onto a handkerchief and the labouring woman held it against her

mouth and nose. As she fell into a sleep, her arm would fall away and she would no longer inhale the fumes. As the drug wore off, she was able to reapply the handkerchief and drift back into unconsciousness. Women seeking a pain-free birth clamoured to try it.

But some doctors weren't keen and refused to offer it saying it loosened women's morals. Dr. George Gream, a royal physician in the 1860s, claimed that women were inclined to use obscene language under chloroform. Another physician, Dr. Tyler Smith said that anaesthesia produced "excitement of sexual passion."<sup>8</sup>

Poor women couldn't afford the medicines, or the doctors who came with them. Instead, they had to make do with alcohol or gripping a knotted sheet that hung from the bedpost.

## **The 20<sup>th</sup> Century**

In the early part of the 20<sup>th</sup> century, it is estimated that 17 percent of mothers died in childbirth. A study by the Ministry of Health in the 1920s blamed many of the deaths on poor sanitation, heavy work and Rickets, a bone softening disease caused by poor diet.<sup>9</sup>

Concern over the number of deaths was so high that the government set out regulations on the training of midwives. Many young women took the opportunity to train, and the profession gained credibility.

But to earn a living the newly-trained midwives had to charge for their services. As a result, pregnant women would save up a few

shillings so they could pay the midwife to stay with them through labour. A few lucky women also had relatives move in to take care of the house and the other children.

As theories about sanitation and hygiene became more accepted, hospitals became cleaner and the number of deaths from infection began to fall. Wealthier women began to choose to give birth in hospital as they could have 24-hour professional care. However, that professional care came with institutional rules on bed rest, infant feeding and even who could visit and when.

On arrival at hospital, women were told to leave their husbands at the front door. Initial care was often a pubic shave, bath and an enema. Painkillers were strong and swift. Women often remembered little of the spotlessly clean delivery room, sterile gowns and glinting forceps. They also didn't hear their baby's first cry.

Sometimes the sedation proved too strong, and some mothers died due to excessive medication. There were also complaints about the system. In a letter to the *Ladies Home Journal*, one mother wrote:

*"They give you drugs, whether you want them or not, and strap you down like an animal."*

Dr. Grantly Dick-Read was horrified by the fear and pain he saw among London women in his care. He believed that fear caused muscular tension, which in turn exacerbated the pain of childbirth. He said that if women were told what was happening to their bodies then this would reduce their tension and ease their pain. He published groundbreaking books, *Natural*

*Childbirth* in 1939 and *Childbirth Without Fear* in 1942, and these were read eagerly by the middle classes.

But for many young women, knowledge of birth was limited. Many had no knowledge of what lay ahead, and elderly midwives tell tales of naïve pregnant women who believed the baby would erupt from their belly button.

World War II made life even more difficult, but it also brought medical advancements that made childbirth safer. Penicillin to treat infections, and improvements in blood transfusions were developed for the battlefield. In 1948, the National Health Service was born bringing free health care to all who needed it.

But women still had little control over what happened to them in pregnancy and labour. Physicians and nurses dictated all care, and patients had little option but to accept it. In addition, the church maintained a strong role in childbirth. For many new mothers their first trip outdoors was to church to give thanks for delivering them safely. Churching, as it was known, was popular until the 1960s.

The women's movement in the 1960s and '70s gave many pregnant women the confidence to demand a voice in childbirth. As women took on careers, they were no longer willing to lie unquestioning as mostly male obstetricians made decisions about this momentous event. Armed with information, they said no to enemas, shaving, medication and instrumental deliveries.

The natural childbirth movement was helped along by the growth of female obstetricians who brought a more empathetic attitude to their practice. In addition, the Patients' Charter,

launched by the National Health Service in the 1980s, gave women greater choices in their care. Today, providing medical conditions and staffing rates allow, women can select birth at home, hospital and even in a tub of water.

More importantly, the fear and superstition that once made childbirth a torturous experience has been replaced by joyful anticipation.

The women whose stories are documented in this book went through pregnancy when it was known as 'confinement'. Rather than show pride in their pregnancy, many had to hide all evidence of a bump. Few even discussed their experiences. And no one complained.

*"We just had to get on with it. There was no choice,"* said a woman who raised three children when most working class homes still had outdoor toilets and no hot-water plumbing.

I didn't think about these women when I had my own children. Like many modern women, I expected childbirth to be a pain-free emotional experience. And I was lucky. My labours both went well, and I have two beautiful boys. But I also had the cheek to complain. After my first birth I was hungry and there was not even tea and toast on offer. It was a Sunday evening and all the nurses could offer was ice cream and jelly left over from another patient's meal. I'd worked hard that day and felt terribly let down.

Today we groan about poor maternity leave from work and forget that previous generations of women struggled with outdoor toilets, coal fire heating and, for some, there was a war on.

## **The War Years**

### **1940-1945**

**I**n the early 1940s, men left for war and women battled against shortages. Valuable time was spent queuing at shops for rationed supplies. Meals needed determination to turn a daily allowance of two ounces of meat per person into a nourishing meal, and there was no rest in the evening. Clothing was in short supply, therefore socks needed darned, trousers patched and there were pullovers to knit for the children. And women couldn't forget the cleaning. Coal fires meant that dust and grime had to be scrubbed daily, and there were few appliances to help with the grind. Instead it was heavy hernia-popping work that required muscle power for laundry, sweeping, polishing and for carrying coal from outdoor bunkers to the fireplace and stove.

And it wasn't just the house that needed work. Gardens needed daily care as families depended on home-grown vegetables to supplement the paltry rations. Rabbits became popular and hutches were erected in many yards. But the creatures weren't pets. Instead they had great value as an additional source of meat.

Laundry took advance planning and it could take days as few homes had hot water boilers, and soap was rationed. Many women caught

rheumatism in the cold damp outhouses where they did their laundry. Outhouses sometimes had a fireplace where water could be boiled for laundry; otherwise women had to boil water on the kitchen stove. Stubborn stains were soaked in soda overnight to loosen the dirt. A wooden stick was used to stir and pummel the clothes before they were scrubbed on a corrugated washboard. The laundry was rinsed and then steered through a mangle to wring out the excess water.

Drying was dependent on good weather, and a spate of rain could bring misery to many homes as damp clothing and linen were draped over anything that stood still.

Disposable nappies were a distant dream, so mothers washed terry towelling nappies on a daily basis. To make matters worse, plastic to make nappy over-pants was in short supply. Sister Mary, the childcare guru who answered mothers' problems in *The Home Companion* magazine during the 1940s, advised mothers to save babies "macintosh" knickers for visiting or travel.<sup>x</sup> Sister Mary was typical of nurses and midwives of this era as she was probably a spinster. While she had the authority to issue advice, she was unlikely to have ever had a child of her own.

Magazines were popular among new mothers seeking tips on coping in this time of crisis. Everything from furniture to cheese was in short supply. Need a dustpan? Make one from an old biscuit tray advised *The Home Companion*. Use an old pair of scissors to cut one end of the metal tray, drill three holes into the back and screw in a handle cut from an old wooden pole. The magazine promised this bit of joinery would take only 30 minutes.<sup>xi</sup>

New pinnies, or aprons, could be made by cutting the collars from men's old shirts, adding a

waistband and wearing them back to front, according to one magazine. Need a handbag? Then crochet one, advised *Home Chat* magazine. *Women and Home* told housewives to sew one from old coat material.<sup>xii</sup>

In addition to handy quick fixes, this was an era when cleanliness was the measure of a woman. Even the front door step had to be scrubbed, and *The Home Companion* advised women to save on soap rations by scrubbing the steps with sand.<sup>xiii</sup>

Paraffin was another popular cleaner, especially for baths and toilets. But, according to the *Ladies' Mirror*, one woman burned to death after lighting a cigarette in a bathtub that had not been fully rinsed.<sup>xiv</sup>

Women were bombarded with handy tips on saving soap. These included using cold tea as a cleanser for grubby finger-marked furniture and for polishing windows and mirrors.<sup>xv</sup> Women were also told not to waste metal by buying new curtain rings. A 1940s *Women's Own*, advised women to clean the ones they had in vinegar. Holes in linoleum could be filled with melted wax crayon and then coated with varnish. Similarly, holes in enamel basins could be plugged with rags and painted in enamel.<sup>xvi</sup>

Coal was a vital component for heating and cooking, and *The Home Companion* had a backbreaking suggestion to make it go further. Save the dust from the coal until you have a bucketful. Add a half-bucket of clay, mix it to a mud pie consistency with water and mould it in flowerpots. When dry it could be burned on the fire.<sup>xvii</sup>

Countrywomen tell of wrapping dried vegetable peelings in newspaper and coating the

package in coal dust then burning it as fuel. Nothing was ever wasted.

While women worked hard, they were also advised to look good when their husbands were home on leave. Stockings were in short supply, but women were told to unhook their front suspenders before kneeling down. This would preserve the stockings from holes and ladders, said *Women's Own*.<sup>xviii</sup> Trouser wearing was rare at this time, but the *Home Companion* magazine advised unpicking a husband's old trousers to make a 'neat little skirt'. And don't throw out old socks, said *Home Chat* magazine. Instead, slit them down the back and feet, sew a few together and make floor cloths.<sup>xix</sup>

Other advice included how to create a new lipstick by scooping out old containers, melting the contents and reforming the mass into an old container.<sup>xx</sup>

In addition, old bra straps could be replaced by crocheting a ribbon 12 stitches wide, and the gusset of underwear could be replaced by a crochet patch.<sup>xxi</sup> And if your underwear couldn't be patched, then all was still not lost. According to *Woman and Home* magazine, you could knit some by following their handy pattern.<sup>xxii</sup> *The Home Companion* gave advice on using net curtains to make "the daintiest little brassiere".<sup>xxiii</sup>

Ready-made sanitary towels were available in the shops, but they were expensive. As a result, many women made their own and washed them after use.

The war brought social problems and many women turned to the agony aunts for advice:

*"Nearly a year ago my husband wired that he was going overseas and that he couldn't see me as he wasn't getting any embarkation leave. He said*

*to write to him c/o the Middle Eastern Command till I heard more and he could give me a permanent address. Although I wrote every week, I never got a reply. A friend advised me to write to the War Office. A few weeks later I got a letter from my husband saying he was back in this country but he couldn't give me his address for some time. He promised he would as soon as they stopped moving him around. He asked me not to write to him in the meantime. I got anxious when a fortnight passed and I still hadn't heard. So I went to the town where the postmark was on his last letter to see if I could find out anything.*

*I found out plenty.*

*I found out that he had never been out of the country at all and that he had 'married' another woman.*

*What should I do? The shock has just about made me mental. But we have two kiddies, and I have to think of them. If I start getting a divorce, it will have to come out about the bigamy and the kiddies' father will be sent to prison."*

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A heart-wrenching story, but *Home Companion* Agony Aunt Ruby Ayres told the poor woman to force her husband to tell the truth to the new "wife" so that he could return home. Otherwise, she should be prepared to take action against her husband.

Other problems were caused when children were separated from their parents and evacuated to new families in the country. One woman desperately missed her daughter and wrote to *Home Chat*:

*"My daughter is an evacuee down in Devon and is very happy with her foster mother who is*

*the nicest woman in every respect, but for the fact that she seems to have grown jealous of my little girl's love for me. She told me her one great sorrow in life was that she was childless and that my Peggy had brought her tremendous comfort. I am rather afraid she may be trying to influence Peggy against me."*

Agony Aunt, Mrs Jim, told her to find another home for her daughter.

*"This woman may be exercising too strong an influence over the child so that when she comes home she may be unhappy and restless."*

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Children in wartime brought other worries.

*"I've met a chap – he's in the army – and I think he is the finest man who ever walked. He's so straight and decent that I'm afraid of him, though. He has such hard and fast ideas on what is right and wrong.*

*He wants me to marry him, and I want to say yes. But though I am only a Miss, I have a baby. I am working in a war factory and have the baby boarded out near here so I can see her at weekends. The people who have her are so in love with her that they want to adopt her.*

*What would you do? I love my baby, and it would break my heart to part with her. But I dare not tell my fiancé about her."*

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The agony aunt says that if her fiancé is so straight and decent he will forgive her.

Although the war effort required all childless women to work, pregnant women stopped work

immediately, even if their position was firmly behind a desk. Expectant mothers received extra food rations, such as one pint of milk a day rather than half a pint every two days. But there were no extra clothing rations, so few women sacrificed coupons to buy maternity clothes. Instead generously-sized clothes were borrowed from larger friends and family. However, some pregnant women invested in a “maternity belt” that sat loose across the tummy but acted like a sling to support the growing bulge.

Babies’ clothes were mostly hand knitted, and infants were dressed in layers for warmth. Homes were cold and draughty, and *The Home Companion’s* Sister Mary advised wrapping a child in three layers of clothing when indoors. This involved a long-sleeved vest that was pinned to the nappy to keep the body warm. Over that, the baby would wear a flannel petticoat or bodice and then a dress or romper suit.<sup>xxvii</sup> With waterproof pants in short supply, wet baby clothes dripped into the laundry basket every few hours.

Cots, prams and other baby paraphernalia were in short supply during the war, and women were forced to share. Equipment was passed on as each infant grew. When cribs weren’t available babies often slept in drawers or laundry baskets

Feeding, whether it was from the breast or bottle, was strictly orchestrated by nurses. A baby born in the morning was entitled to two feeds on his first day in the world. The unfortunate bairn who came into the world in the afternoon should be fed only once, according to Sister Mary of *The Home Companion*. Thereafter the child was limited to five feeds spaced four hourly with nothing overnight. Pity the poor infant who woke up during the night or who cried hungrily between feeds. They should have water, said Sister Mary.

She also said the last feed should be at 9 pm so the mother could be in bed by 10 pm. This way she could be up early to take care of her husband in the morning.<sup>xxviii</sup>

Like feeding, potty training was a rigorous affair with mothers trained to catch defecations after each feed. Nurse Hale at the *Woman's Own* advised:

*“At first he was such a clean baby and because you held him out from birth he had obliged you whenever you did so. But suddenly he may turn from his good way and refuse to do what you ask him. He may go stiff and utterly refuse to sit upon his chamber. Or he may sit upon his chamber and play and make no attempt either to pass water or a motion.”<sup>xxix</sup>*

Sympathetically, she advised patience.

Other magazine agony aunts weren't so understanding. A mother writing to *Home Chat* magazine in 1942 asked about weaning her baby who was six months old son and weighed 17 pounds.

Dr. Elizabeth Mudie told her:

*“Baby is nearly three pounds overweight... He should have only four feeds now, with the last at 7 pm - after which he should sleep around the clock until 7am. Introduce broth and sieved vegetables at the dinnertime feed... gradually introduce him to brains, roes and raw bone marrow.”<sup>xxx</sup>*

Very few women consulted a doctor about their child's ailments. Doctors were expensive, and the National Health Service was still a dream. Instead, women mixed together their own

compounds, either on the advice of their mother or from a magazine.

According to Nurse Hale of *Women's Own*, sweat rashes stemming from too much clothing could be treated by dusting a baby's face with a mixture of zinc, starch and boracic powder. Similarly, an allergic rash could be bathed with vinegar and water.<sup>xxxii</sup>

Most births took place at home as it was cheaper and because half the nation's doctors and nurses were in military service leaving hospitals severely understaffed. A hospital birth cost £10 to £20 depending on the facility, while the average man's weekly income in 1943 was £318 shillings. Working women sometimes paid into an employers' health care insurance plan to cover maternity care. But most women paid a few shillings to a midwife who delivered them at home.

In preparation for a home birth, mothers were expected to stockpile a hefty collection of linens. Margaret Staples, a midwife in Norfolk in the 1940s, advised mothers to gather the following:

- 3 baby nightgowns*
- 3 baby back flannels to swaddle the infant and keep it warm*
- 2 strips of cotton to bind the umbilical cord*
- 3 dozen nappies (often made out of old sheets)*
- 1 bottle of Lysol (skin disinfectant similar to Dettol)*
- 3 dozen maternity pads (bought or homemade)*
- Glycerine (for sore nipples)*
- Vaseline (for baby's buttocks)*
- Maternal nightgowns*
- Safety pins*

*4 Lemonade bottles filled with boiled water that has cooled (this was considered sterile)  
Sanitary belt or tape to hold the pad in place  
An old sheet folded and padded with a thick layer of newsprint and baked in a warm oven to kill any bugs. (This protected the bed from blood and other fluids. It had to be large enough to cover the mattress from the women's shoulders to her ankles.)*

Spare candles and matches were also needed as there were frequent blackouts during the war. In addition, homes without electricity used paraffin lighting and this often ran out when unattended.

Pregnant women were given telephone numbers for the doctor and midwife, but few homes had telephones and husbands had to take to their bikes when a wife went into labour.

Pain relief was almost non-existent. Most midwives travelled by bike or on foot and couldn't carry the weighty canisters of gas and air. Midwives could offer a mild sedative of chloral hydrate, but this was like treating appendicitis with an aspirin. Grin and bear it, was the order of the day.

Doctors were called out to difficult deliveries, and they often knocked women out with chloroform and then took care of the birth with a pair of forceps they carried in their bag. The mother would wake up when the birth was over to find out whether she had a boy or a girl.

Traditionally, a female relative moved in after the birth. She would care for the other children and maintain the home while the mother recovered. Some wealthier women paid for this help. But during the war, many women took up work in factories or joined the services. As a

result, there was a critical shortage of home help. Many mothers were forced out of bed early and returned quickly to their roles as cook, handyman, washerwoman, physician, seamstress and housekeeper.

## **Dorothy 1940**

I had a pretty good first pregnancy. I was just over 5 foot 1 inch and so carried the baby forward and quite high. I was uncomfortable but, being a farmer's wife, I had plenty to do and kept going well until the first niggling pains came along.

My husband drove me the 20 miles to the Radcliffe Maternity Hospital in Oxford.

A staff nurse received me and dismissed my husband. They asked me my religion and I remember saying I was agnostic. The staff nurse left me in no doubt that she disapproved of this. She was not a friendly soul, and I began to feel very apprehensive and lonely.

My pains eased and I was left with backache. The next day there was talk of sending me home but the backache increased. I couldn't sleep that night. The backache was worse and I walked around the ward. A nurse saw me and told me to get back to bed.

The next day, I overheard two nurses talking about the bluebells they'd seen on a climb in the hills. This made me feel homesick for the countryside, and I began to cry and shake. They gave me extra blankets and a hot water bottle, but a staff nurse told me I was feeling sorry for myself - I was!

The pain in my back grew worse and I had another sleepless night. My husband came to see me, but I didn't want to see him as I was in so much pain. When he'd gone, I turned onto my knees with my bottom in the air. This eased the backache and amused the other patients - although I was passed caring. I just wanted it to end.

On the fourth day, desperate for some progress, I deliberately wet the bed and told the nurse my waters had broken. They rushed me to the labour ward, and I was examined by a Dr. Balliol.

"Like the college?" I asked him, and he smiled.

In examining me, he broke my waters. The staff nurse was very annoyed with me, but now at least my pains began in earnest. I was left a short while and examined again. Someone said they could see the baby's head. After a lot of pushing and struggling on my part, they put me to sleep.

This was in the late evening and, when I came to in the early hours of the morning, the night sister told me I had a boy. I was thrilled to bits. I was also very sore and could hardly sit up. They gave me a rubber ring to sit on, and my baby was brought in to feed not long after that.

He had a very pointed head because of the forceps that were used to pull him out, but it became more normal after a few weeks.

The doctor later explained that the baby had been facing the wrong way and pressing on my spine all this time. He also said I had a great many stitches. I felt as though someone had twisted all my tenderest parts. It took at least three months before I could go to the lavatory in comfort.

Babies were taken away from their mothers and kept in a baby ward. They were only brought out for feeding. Patrick was a bonnie boy. Later he suffered from migraine and I often wonder if it had anything to do with the forceps delivery.

During my second birth, I heard the doctor tell the nurse he was shocked at the state of my undercarriage. This baby was also facing the wrong way, but my doctor spotted this early on

and my labour was at home with my good local doctor and district nurse in attendance. This birth was over in six hours.

## **Dora 1941**

I was 25 and my husband was in the forces. I paid around £20 for a two-week stay at a quality nursing home and lived with my in-laws as my time grew near. I was three weeks overdue when I was rushed down the road in a wheelchair. All through the night enemy planes roared overhead, but I was too occupied to care.

At 7 a.m. the midwife proprietor helped me deliver a boy. My doctor arrived after the excitement was over. He was dressed in his emergency kit as he had been on standby duty all night. I was given a most welcome huge breakfast of bacon, egg and fried bread. It was a time of food rationing, but the home probably received extra rations for the new mothers.

My husband rushed in on 12 hours compassionate leave to see his son. All seemed perfect. But what I did not know was that my young brother of 20 had been lost at sea six weeks earlier. The whole family had kept the news from me until after the baby was born.

Two years later, I was pregnant again and decided to have a home birth. My husband had been injured in the war and was discharged from the army. We were able to buy a sealed sterile package containing everything necessary for the birth. But we were advised to save clean newspapers to protect the bed and floor and mop up blood and the afterbirth.

Our midwife lived in the next hamlet but her able assistant, who did the laundry and took care of new mothers, lived only a few minutes away. She was a strong country woman who always

wore the sister's cast-off white coats, beautifully mended and laundered.

The nurse assured me I would have a speedy labour and as time drew near I shouldn't venture on a bus or go far from home. She said her helpmate could cope in an emergency. The poor woman was terrified at the thought of it.

My mother, who came to take care of our little boy, was concerned that my modern bed had no brass knobs. In her day, women pulled on a towel tied around the brass headboard while they were pushing the baby out. She said her midwife told her rude stories because a good belly laugh helped the muscles relax.

I was three weeks late again and during my prolonged labour swore at my poor mother. I finally delivered another boy - even larger.

I thoroughly enjoyed my lying-in. We lived in a bungalow and my neighbours continually popped over to talk to me through the open window. This was the first birth to take place in our circle, so they all chatted to me through the bedroom window. In a few days, I was up and weeded the flowerbeds in my neglected garden. I ended up with a severe cold that probably affected my recovery.

We all shared the available Moses baskets, high chairs, playpens and potties. Maternity dresses were particularly prized as clothing was rationed. Women were reluctant to use their precious coupons if a maternity dress could be borrowed. Most manufacturing was directed to the war effort so "non-essentials" were scarce. This included potties, and several babies I know used a pudding basin for toilet training. New prams were like wooden boxes on wheels. Mine certainly had no springs.

## **Winifred 1941**

My only daughter was born in 1941, and I had been evacuated from Manchester's air raid dangers to relatives in Macclesfield.

All births were expected to be natural. No alleviation of pain was offered. After about twelve hours of labour the baby was born and afterward there was the unpleasant business of having stitches to repair the tears of the baby's entry into the world.

The post-natal care was good during our fortnight's stay in hospital, with the nurses encouraging and helping mothers to breastfeed. Babies were placed in swinging cots attached to the foot of the bed, and mothers could rock the cradles by swinging their feet. During the night, the babies were moved to the nursery, and much attention was given to allowing mothers to rest. Several days went by before mothers were allowed out of bed, and it would have been dangerous and cruel to be going home after 48 hours as seems to be the practice today. Before discharge, there were lessons on how to bathe and dress the babies.

My identical twin sister Alice had her first baby in 1944. Both our husbands were away on war duty, and Alice came to stay with me before the baby was due. I became concerned when Alice said she hadn't felt the baby move. She was booked into a maternity home in Harpurhey, some two slow bus journeys away from my home in Moston. We had no phones or access to transport and all able-bodied neighbours were away in the forces or employed in wartime factories. So we made our way to the home, and I

left Alice there and returned to await news of the birth.

A neighbour whose son worked on important war business had a telephone and agreed to take phone messages. In the mid-afternoon, I answered a call from the maternity home. The news was bleak and harshly conveyed. A baby boy was stillborn and, as next of kin, I was required to visit as soon as possible. Another neighbour took care of my three-year-old daughter while I made the journey by two slow buses. I was greeted in the hall by the nurse. She said I'd been a long time coming and I was to return with a box for the dead baby and then take it to the vergger of the nearest church who would find somewhere to bury it.

I gasped. I couldn't do this and asked why the home couldn't attend to it. "We have to look after births not deaths," was the reply, "and disposal of stillborn babies was the responsibility of the family".

So I went to see my twin sister and tried to offer comfort. She reached for the baby basket she had prepared with loving care, and we both wept as we held a little white baby hairbrush and lace-trimmed delicate gowns. I wondered why the staff hadn't tactfully removed them from the locker.

Walking back to the bus stop, I called in at a shop where I had ordered little matinee jackets. The lady serving sensed my distress and put her arms around me. After a long wait, the bus arrived and I took it to my parents' home. They were having a short break in St. Anne's away from father's responsibilities as a Manchester alderman. I telephoned them and incoherently told them the sad news and how I was expected to find a suitable container and arrange to bury my dead nephew. Father said he would take a train

home, war trains were very slow, and to wait until he arrived.

I sent a telegram to Alice's husband, Bill. He received it as he was heading out on D-Day landings with the Royal Engineers. He was not to return for 18-months so there was no possibility of leave.

My father telephoned the Co-operative Funeral Service and asked the manager to deal directly with the maternity home and bury the baby with reverence and dignity. He then spoke to Manchester's Medical Officer expressing his horror and amazement that anguished fathers and relatives could be travelling on city trains and buses holding parcels containing stillborn babies. I believe his interventions led to instructions that these sad incidents should be dealt with in a more humane fashion.

We never discussed the traumatic circumstances again, and it was many months before Alice asked me what had happened. I merely told her that her baby had been buried in a quiet corner of the churchyard.

Just a few weeks after this unhappy confinement, Alice was caught up in the wartime regulations that directed all childless women to help with the war effort. Alice spent her days working in the offices of local engineering firms.

After the war, Alice and Bill had a healthy daughter followed by a cherished son. Now we both have grandchildren, and I have great grandchildren. All have been born in hospitals. The one exception is my exceedingly healthy 21-year-old grandson who was delivered by his father in the hills of Japan. His parents were natural birth enthusiasts, and so the wheel turns in the story of having babies.



## **Doris 1941**

When we arrived at the hospital I was examined by a nurse who said the birth would take place within a couple of hours. She told my husband he could ring for information and he left. I was taken through to the delivery room. The labour pains were severe. There was no doctor on duty but a middle-aged retired nurse, whose general behaviour and conversation put fear into me. I had no idea to what extent the body could sustain such pain, and as things progressed I felt quite sure I was going out of my mind.

The following day an angel appeared in the form of a Sister Midwife. She had been on leave but took over and with such competence, care and understanding. My son was born without drugs on the afternoon after admission.

The baby's head was quite elongated and his skin jaundiced, but he recovered before we left the hospital 12 days later. My husband, on seeing me and hearing of my experience, declared never again. But time is a great healer and in 1944 our second son arrived, again with no drugs.

I have always thought that my oldest son's somewhat nervous and withdrawn nature may well be the result of his protracted birth. But he is lovely in all respects and is now an active and loving son, husband and father.

## **Doreen 1941**

Hal and I were married in April 1938. War was looming but it wasn't an established fact until September 1939. Hal joined the R.A.F in October 1939 and went gaily off to be a 'flyer'. However, he was categorized as having low blood pressure, which was fortunate, as within a year most of the young men who joined with him were dead.

His two older brothers married in 1939, and both their wives became pregnant during 1940. By this time I was disturbed that I wasn't pregnant and underwent all sorts of tests and was told everything was normal. I read about taking Raspberry Leaf tablets to ensure pregnancy. One day I was talking to my neighbours when I felt this swimming sensation. I went to the doctor and he asked if my eating habits had changed.

"Tea makes me sick," I replied.

Needless to say, I was pregnant. At the time we were living in a large house that had been converted into two flats. We lived downstairs with the neighbours upstairs. This was in North London as a lot of Hal's early training was at Stanmore. One night the bombs were rather horrific and a very loud explosion sent me rushing upstairs to check on our neighbours. For a long moment I couldn't see Mr. and Mrs. Davis. I thought they had disappeared. But when the dust cleared they were there. A land mine had dropped in a school playing field in the next street. We had some damage but not as much as you would think. However, this close call prompted us to talk about my returning to my parents in Cardiff.

When I arrived in Wales, I was able to book my confinement at a local nursing home. Pre-

natal clinics were being established and I travelled some distance every month to the Truby King clinic. There we learned about handling the baby, breast feeding etc. Breast-feeding was then being encouraged whereas, when I was born in 1915, no mother of the middle-class strata would consider feeding her child. Only the very poor and the gypsies would breast feed in those days.

Of course at Truby King we had been told what to expect and how to time our pains etc. Early one morning I called my parents to take me to the nursing home. Instead of rushing off they stopped to make a cup of tea, which horrified me, as I suppose I expected my child to pop out at any moment.

This didn't happen of course and, once I arrived at the nursing home, there was quite a lot of preparation including drinking a full glass of castor oil. Everything proceeded as it should and eventually I was taken to the labour ward. I'm afraid I wasn't as stoic as I intended to be and kept calling for Hal. My son Robin was eventually born and had a pointed head, much to the horror of my dear mother. This was because they used forceps for the actual delivery. Of course the pointed head settled down in a few days, but it certainly gave her a shock.

I spent the next fourteen days in bed. When I did try and get out of bed, I felt dizzy and weak after spending so much time lying down. We were taught at Truby King to feed every four hours so this is what I did. I remember Rob was crying at 1.30 p.m. and there was no way I would feed him until 2 p.m.

Of course, in those war years, we had to be prepared to get our babies and ourselves out of bed when the sirens went. There were quite a few raids on Cardiff but, we were lucky. My father was

a warden, and my mum, baby and I would get up and spend a lot of the night under the solid oak table in the dining room.

Because of irregularity after the first birth I had been confirmed as pregnant before I actually was, so we were expecting my daughter to be born in September. So when September came and went I was very disturbed that nothing had happened. Eventually they induced that birth.

The war continued. When Rob was 2½ I went with the children to stay with my aunt in Liverpool. While we were there he was diagnosed at the hospital as having a mastoid – a swelling behind his ear that had to be drained. He was taken from my arms and I was not allowed to see him, except through a screen, until his release from hospital. This was so cruel and I will never forget his screams when they took him away, and his look of unbelief when I picked him up two weeks later. It affected him all his life, as he became a nervous asthmatic.

When the war ended we returned to London. Once more it was not usual to go into hospital in labour unless problems arose. They had begun making tests on the mother's blood and I was told I was RH negative and may have a 'blue baby'. I was confused as I already had two children. They told me it never happens with the first child, but can with subsequent births. Later we discovered Hal was also RH negative so all was well on that score. I attended regular meetings with the midwife and it was unnecessary to call in the doctor. Hal's sister came up from Cornwall to help after the birth. This baby was a very quiet and docile baby and spent a lot of time sleeping, which was good.

In March of 1949 our son Lynden was born. I remember looking out of the window and seeing

Hal's footprints in the snow as he went to telephone the doctor and the midwife. There were not many home telephones in those days. This birth took longer as Lynden was a much larger baby. The midwife wanted to bring about the birth without the aid of the doctor. She felt doctors were just an encumbrance. Finally she was forced to call him. I remember as he administered the gas, I heard her say to him, "Don't you find that the use of (whatever the name of the gas) asphyxiates the child?" The doctor was annoyed, especially as he knew I would probably hear, which I confirmed to him later.

By now our council had a system whereby you could register for a home help, and they sent the most kindly lovely lady who did all the housework and the cooking for two weeks after the birth.

## **Kathleen 1942**

My husband took me to the hospital and, after examination, I was taken to a small cubicle and left alone feeling very frightened. I was just 21, and husbands were not allowed to stay in those days.

After three hours the pains got worse. I was taken to the labour ward and my legs were hoisted into supports on either side of me. I was told to push every time I had a pain. "Keep pushing!" they told me over and over again.

Suddenly, a nurse noticed things were not going so well. "Stop pushing" I was told, and she sent for a doctor. I remember the doctor had curlers in her hair and must have been called from bed. She told me she would have to cut me, and I felt the sting of the scalpel.

After a while, a very bloodied baby was shown to me, and they said he was fine. They began stitching me up. I've forgotten how many stitches I had inside and out, but I begged for no more and at last they had finished.

My little son was brought out to me, and they left us alone together for a long time. I was eventually sent to a ward and my son returned to the nursery. The nurse reassured me that I could see him the next morning.

I recovered from the birth but my insides never really healed. I bled almost continually and was cauterised several times in the next 18 months. The doctor told me I should come to hospital for my next delivery.

But three years later, during my next pregnancy, hospital staff looked at me in disbelief

when I said I should have a hospital delivery. I was told hospitals were only for first births.

So I fixed up with the local midwife, and she was called at midnight. My husband had to fetch her as she didn't like going out in the dark.

I was torn again but not so badly. My husband fetched the doctor to stitch me up. He was an old man - he'd brought me into the world - and his eyesight wasn't too good.

He had to put on a second pair of spectacles over his regular ones and still had to peer very closely. His nose was almost touching me, but he still couldn't see very well and the midwife had to hold a torch over his shoulder. She kept pulling faces and saying there was no need for all those stitches and that she would have some of them out the next day - she did.

I had no internal examination afterward and just hoped everything was okay. When I had a hysterectomy many years later, the surgeon told me the neck of my womb was badly scarred.

One of the most difficult things about having young babies during the war was the shortage of nappies. You could only buy blankets, sheets and nappies with clothing rations. When I was first pregnant I only had enough coupons for 12 nappies. Thankfully friends gave me muslin liners and second-hand nappies they no longer used.

The laundry was never ending. Babies slept in long flannelette gowns that were tucked in at the bottom. They were always soaked through in the morning.

One of the scariest times of all was when everyone in the village was called to the hall and issued gas masks. I was given a shoebox-sized mask that I was supposed to put the baby in and then pump air in and out so that he could

breathe. We never had to use it, but the very thought of it was very frightening.

## **Olive**

### **1944**

My first child Christopher was born in a two-bedroom cottage with a cold-water tap outside and the toilet and washhouse at the bottom of the garden. I had two near miscarriages, which my mother, a part-time Red Cross nurse, helped prevent. She sent for the doctor and put the bottom of my bed up on bricks. I had a couple of weeks in bed both times with the district nurse visiting once a month.

When it came time to deliver my first baby, my mother prepared the bed with newspapers to mop up blood and other dribbles. The nurse came then sent for the doctor who gave me injections to slow the pains down and let me sleep as the baby was very weak.

When my son was born, he didn't breathe. The doctor asked my mother if she had any whisky as he'd seen this work. He poured a few drops into my baby's mouth and he breathed.

He weighed 6 lbs and had epileptic fits from six months to six years. The midwife called in every day, and I was bed-bathed for a week. I was finally allowed to sit out of bed after seven days while my bed was made. The baby was difficult to feed. He just would not suck, and the doctor and nurse said he was a naughty boy. When his weight dropped to 5 lbs, my mother wanted a second opinion. I was 20 years old and too shy to ask any questions.

We took him to the hospital where they kept him in for two months and taught him to feed. I visited the hospital but was not allowed to cuddle him. It was the hospital's way of doing things.

This was very upsetting, and my husband kept watch while I picked him up and hugged him.

My second child, Jennifer, was 2½ weeks overdue. The pains started at around 10 p.m. The district nurse was on holiday and my husband had to go to the local hotel to get the relief nurse. She was a missionary nurse and made my parents and husband say prayers around my bed. There was nothing for the pain, and I had to deliver on my back, which was very painful. I was lying on my side for the first birth, and it was much easier. Jennifer was born at around 2 a.m. and again prayers were said around my bed.

The next child was born with little problem. We moved to a council flat converted from an old workhouse. It had all mod cons including electricity and a gas geezer for hot water.

With the fourth I had a lovely district nurse who called every month and, as the pregnancy progressed, she told me to stay in bed for a week. Mum walked a mile each day to take care of us. The birth went well, and Mollie was born at home. No visitors were allowed for the first two or three days after any of my births.

My fifth child, Andrew, was three weeks overdue. We were now living in the country, one mile from a village, as my husband was working on the railway as a fog man. There was just a stationmaster's cottage and our three-bedroom cottage. When it was foggy, my husband had to put detonators on the line to signal the train drivers. I had a small kitchen range and an outside bucket toilet that was emptied once a fortnight by my husband - we had smashing garden vegetables.

Two huge galvanized tanks held rainwater and our drinking water came on a train from the next station five miles away. We used rainwater

for laundry and for baths, which we had in front of the fire. We had no electricity, only Tilly lamps which gave good light and warmth.

Our next baby was born with little problem. By this time I had a cold tap in the house and an electric cooker. Annabelle was three weeks overdue but when I finally went into labour, I fed the other kids, sent them to school and tidied the house. I called the nurse from the station and she came with her knitting and a sandwich as it was her day off. I was given the usual enema. My husband arrived in time to help with the birth. The cord was wrapped around Annabelle's neck twice and it had to be cut before she could be born. She also had a caul (a clear piece of membrane) over her face. It had to be removed quickly so she could breathe. Cauls were once much sought after by sailors. They believed if they carried a caul they would never drown.

My last baby is my darling. We are very compatible and I am told that she spoils me.

## **Margot 1944**

My fiancé was called up into the army and, when he came home on embarkation leave in 1940, we got married. In 1942 he was put in charge of a training unit in Huddersfield, so I got a job in Yorkshire and went into lodgings so he could come home at weekends. I thought I was pregnant and the local doctor confirmed this, but then said very casually, "If you had come to me before you conceived I would have said don't bother as you are too small across the pelvis and will have a very difficult labour."

It was not a pleasant thought but, by now, nothing could be done about it. My husband was in military service in Huddersfield and I was working nearby so we could see each other at weekends. For the delivery, my mother booked me into a nursing home near her house in Kent. Unfortunately, before I could get there, a rocket fell on the nursing home and destroyed it.

A kindly aunt in the Lake District took me in. By this time, I had a month to go until my delivery date and had not seen a doctor or had any medical attention. But I had kept well.

When the labour pains started I was taken to the nursing home and put in the general ward. I stayed there for two days and two nights without any attention - they were apparently waiting for my waters to break. By the third day, when I thought I was going to die, the doctor was sent for and I knew no more after that because he pushed a chloroform mask over my face as soon as he saw me.

When I awoke, the doctor said I had a fine baby boy, but I had lost a lot of blood. I took

weeks and weeks to recover, and my poor aunt had to look after the baby and me.

Two years later, I decided I would like another baby. But after four months, not seeing a doctor or anyone of course, I miscarried and was very ill in hospital for three weeks. Enough is enough, I decided. I never tried again.

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<sup>1</sup> Euripides: *Medea*

<sup>2</sup> The Workers Birth Control Group, Westminster, 1928

<sup>3</sup> Fleming, Stuart. "Musings on Midwifery", *Archeology*, Jan/Feb 1988: 69

<sup>4</sup> Aveling, J.H., *English Midwives*, 1872, London, AMS Press, 1977

<sup>5</sup> Hughes, Muriel Joy, *Women Healers in Medieval Life and Literature*, New York, Books for Libraries Press, 1968

<sup>6</sup> Leavitt, Judith Walzer, Science Enters The Birthing Room, *Journal of American History*, September 1983, pp 285

<sup>7</sup> Holmes, Oliver Wendall. "The Contagiousness of Puerperal Fever". *Classics of Medicine and Surgery*. 1843.

<sup>8</sup> Smith, F.B., *The People's Health: 1830-1910*, Holmes and Meier Publishers Inc. 1979

<sup>9</sup> *Maternal Mortality: Report of Meeting Held at Central Hall, Westminster*, The Maternal Mortality Committee, 1928

<sup>x</sup> *Home Companion*, 10 July 1943

<sup>xi</sup> *Home Companion*, 3 July 1943

<sup>xii</sup> *Woman and Home*, September 1943

<sup>xiii</sup> *Home Companion*, 20 November, 1943

<sup>xiv</sup> *Ladies Mirror*, 5 February 1941

<sup>xv</sup> *Home Companion*, 3 July, 1943

<sup>xvi</sup> *Home Companion*, 20 November 1943

<sup>xvii</sup> *Home Companion*, 20 November 1943

<sup>xviii</sup> *Women's Own*, 19 October 1940

<sup>xix</sup> *Home Chat*, 26 April 1941

<sup>xx</sup> *The Home Companion*, 25 December 1943

<sup>xxi</sup> *Home Companion*, 17 July 1943

<sup>xxii</sup> *Women and Home*, October 1943

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- xxiii *The Home Companion*, 20 November 1943  
xxiv *The Home Companion*, 10 January 1942  
xxv *Home Chat*, 4 January 1941  
xxvi *The Home Companion*, 11 July 1942  
xxvii *The Home Companion*, 20 November 1943  
xxviii *The Home Companion*, 25 December 1943  
xxix *Women's Own*, 22 June 1940  
xxx *Home Chat*, 25 January 1941  
xxxi *Women's Own*, 6 January 1940