

## **Angela Saward: Women's Labour and the Wellcome Collection**

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### **Introduction**

Angela Saward and the Wellcome Collection were leading partners in the AHRC funded 'Hidden Screen Industries' network led by Professor Emily Caston at UWL. In this report, based on an interview that Caston conducted with her earlier this year, Saward identifies the significance of Wellcome's collection of materials for a comprehensive understanding of the history of women and labour.

### **Report**

Wellcome Collections holds a dizzying amount of materials related to women's labour in childbirth. The quantity of items is vast across the various material types, geographies, and chronologies.

One of the stand-out items is a manuscript the provenance of which seems to indicate that it was presented to Queen Elizabeth I about Monstrous Births (Figure 1). It's beautiful and is illustrated with fantastical depictions of, for instance, people born with skin like tree bark. The politics of why something like this would have been presented to the Virgin Queen is interesting. It's digitised and available online.



Figure 1: Manuscript, c. 1559. Boaistuau, Pierre (1517-1566). Wellcome Collection.

I have colleagues who are experts on the early modern period who can talk more about the items from our 16<sup>th</sup> and 17<sup>th</sup> century collections. There's a lot of scholarship around individual items. Anatomists were trying to visualise what the baby looked like in the womb (see, for example, Figure 2). Before it was possible to see into the womb, doctors visualised that the uterus was quite spacious, babies could almost stand upright!

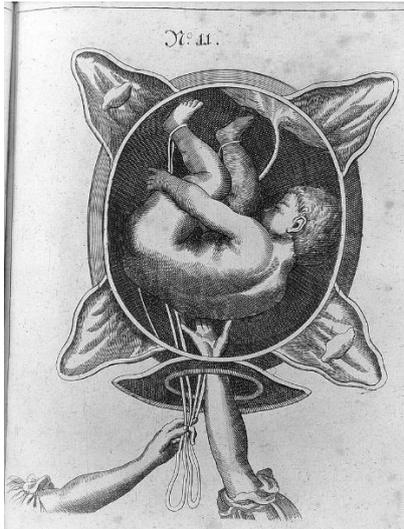


Figure 2: Siegmund, Justine Dittrich, 1648-1705. Wellcome Collection.

The early materials are problematic because some are based on post-mortems, leading to questions about whose body is represented and would not be permissible today (Figure 3).



Figure 3: Dissection of the pregnant uterus, showing the foetus at nine months. Copperplate engraving by R. Strange after I.V. Rymsdyk, 1774, reprinted 1851. Wellcome Collection.

Midwifery has historically been a women-centred practice across all the geographies and materials. An image from the late eighteenth century of a man-midwife shows a person split in two. One side of it is male, the other side of it is female (Figure 4). It is indicative of how men were entering this space, albeit with some ridicule.



Figure 4: A “man-midwife” (male obstetrician) represented by a figure divided in half, one half representing a man and the other a woman. Coloured etching by I. Cruikshank, 1793. Wellcome Collection.

However, from the mid nineteenth century, midwifery becomes appropriated by the more scientific male orientated medical profession. It’s the early Victorian period when scientific research and medical instruments become a male domain. Charles Dickens dialled into the idea of a midwife being a Mrs Gamp [a nurse in the novel *Martin Chuzzlewit* by Charles Dickens, first published as a serial in 1843-44], an old woman a crone: dirty and an alcoholic. So, there is a sort of projection of the idea that women aren’t serving women properly until men come along with their medical bag of tricks. There is a bit of pushback about this questioning why men want to be obstetricians, but then the women are very disempowered at this time, so it doesn’t go anywhere.

Women's ownership and their ability to own the narrative around the labour of pregnancy and childbirth doesn't really surface until the 1960s when the natural birth of movement arises. In the Victorian period, women's status as midwives isn't professionalised, it's paid, but it's paid in cash, like an informal economy, a backstreet underground economy. If you went to a male doctor, however, you'd get sent an invoice or a bill because his care was professionalised.

Thinking about the film collection specially, the earliest film of female anatomy we have is from 1916 (*Abdominal Hysterectomy for Pyosalpinx*). It shows a hysterectomy in close-up. The procedure, pyosalpinx relates to the fallopian tube being blocked by pus; the female patient is present yet disembodied. This is just a fragment of a longer film.

*The Mechanism of the Brain* (1925) is the earliest film depicting childbirth we hold (Figure 5). It's a Russian film, directed by famous director Vsevolod Pudovkin on the Nobel Laureate, Ivan Pavlov's, research in Russia. This is a black and white, silent feature length film (93 minutes), that explores the role the brain and nervous system play in behaviour. In doing so it also attempts to show the difference between conditioned and unconditioned responses in animals and humans. One sequence shows in a very beautiful way a woman in pain and agony surrounded by an aura. That is reputed to be the first time a woman has been shown giving birth on film. You don't actually see her giving birth, but you do see the baby being presented to her afterwards.



Figure 5: The Mechanism of the Brain, Vsevolod Pudovkin, 1925. Wellcome Collection

The earliest film showing actual childbirth we have is from 1926 (Figure 6). It's a medical film and it was in circulation for quite a long time as part of the Kodak Medical Film Catalogue. It presents a 'normal' birth in a continental clinic. It was shot in Berlin. It shows the different stages of labour. There are five reels and we're missing just one of the reels (on the delivery of the after birth). It's a very detailed film. You see the baby born and crying when it's presented and it's probably the first time a newborn baby was filmed in that kind of detail. But the mother is not part of the story. All we see of her is her legs open. It's all about the baby. There are female staff in attendance, but we do not see the mother.



Figure 6: Management of a Normal Birth in a Continental Clinic. Part 3, Stage of Expulsion. Wellcome Collection.

In the 1940s, the films on reproductive health centre more around the risk to women of sexual diseases. There's a film called *The People at Number 19* (1949), a drama about how a woman has contracted a venereal disease - syphilis - and has to confess to her fiancé. It turns out it was as a result of her indiscretion not his, she has to have the treatment before they get married and start a family.

There are also films about parental decision-making, with an emphasis on immunisation. There's a number of diseases that were deadly at that time and public health immunisation programmes for diphtheria, polio and measles were rolled out. The science of parenting started to build after the second World War (we have the archives of John Bowlby, Donald Winnicott, Margaret Lowenfeld and Melanie Klein to name a few). People were concerned about the consequences of children being apart from their parents and then parents had their support networks disrupted as a result of war. A group of films made by Margaret Thompson who was an Australian who was working in the UK most of her career illustrate this. She made films in the late 1940s, such as *Your Children's Ears* (1945) and *Your Children's Sleep* (1947) and the importance of play.

Thompson also made a series of films about anaesthesia which was a new treatment that would completely transform women's experience of childbirth. Thompson made a series of films for ICI under the tutelage of Ivan Magill, a British expert on anaesthesia. They weren't allowed to use real patients or staff, so they used the production crew instead, filming the production crew under anaesthetic. To establish deep anaesthesia, you had to monitor eye movement, understand breathing and other physiological signs to understand whether the anaesthetic was working. The films are quite eye opening, as the so-called patients appear to be dealt with roughly!

Anaesthesia had a big impact on women's labour because it became part of the medicalisation of birth and labour. It intersects also with the emergence of the NHS which meant that women could have hospital births. There's a period of around 20 years when things really change exponentially for women's experience of childbirth with the NHS.

The films we hold about childbirth made before the NHS show that hospital birth was only what happened if you were very rich or if it was an emergency. Films from the 1930s show what happened before it became normal to have childbirth in hospital.

One film from 1932 (Figure 7) shows a midwife getting on her bicycle and going to a tenement block where all the children are sitting outside on the front steps, going inside the block to help the mother and call for help. Only in an emergency would the mother have been transferred from her home to the hospital. Apart from labour itself, post-partum one of the factors for mother and infant mortality came from puerperal fever.



Figure 7: Maternity: a film of Queen Charlotte's Hospital, 1932. Wellcome Collection.

In the early years of the NHS, the films we hold aren't aimed at women. They are made for clinicians and obstetricians. Alongside anaesthetics, there was another product developed for obstetricians to use on women in childbirth. The pharmaceutical business, Wellcome

Foundation, from which Wellcome Collection began from Sir Henry Wellcome's bequest, was involved in the production of ergometrine (originally as a treatment for migraine).

Ergometrine was a derivative of a fungus called ergot which when it appeared naturally on wheat was known, historically, to cause madness. There's a film about it in the collection (*Ergot : the Story of a Parasitic Fungus*, 1958). Ergot once synthesised was used to precipitate the last stage of labour in women, the afterbirth. This became part of the medicalisation of birth.

From this period, we also have related material which speaks to gynaecological health by individual doctors. Sir Archibald McIndoe, a specialist in plastic surgery in the Second World War and cousin of a very famous surgeon, Sir Harold Gillies renowned for reconstructive plastic surgery during the First World War were both initially involved with the reconstruction of facial features after servicemen experienced burns to the face in particular. McIndoe had a ward informally dubbed 'The Guinea Pig Club' during the Second World War in which he treated their war wounds as well as rehabilitation to cope with their injuries. In collections held at the Imperial War Museum you can see how they developed the skin graft in order to for these men who had been injured in the War some kind of normality.

Post-war, this research led to further surgical developments. Wellcome Collection has a film showing McIndoe performing one of the earliest successful operations for vaginal replacement (*The treatment of Congenital Absence of the Vagina*, 1938 or 1941). These were operations on women, in which he is doing vaginal reconstruction surgery, but later form the basis of surgical practice for people who want to transition. The films were made to support clinical research and possibly for peer-to-peer training purposes. They were not widely distributed because they reflected the research specialism of a particular clinician so their use would have been controlled narrowly by that clinician.

From the 1960s, patient autonomy evolved. Wellcome has the archives of the Natural Childbirth Trust (NCT). Now it's become a parenting charity, but in the 1960s it was a pro-natural childbirth organisation. We have one film from the 1970s called *Birthday: The Triumph of Labour* (1979) (Figure 8). It shows case studies of the different ways women can give birth at the hospital or at home. Other films support breastfeeding over bottle feeding.

Sheila Kitzinger was involved in the production and appears in the film. We also hold her archives. You see all the mothers-to-be lying down, practising the different kinds of breathing in preparation for labour. The film starts with (presumably) licensed footage from Margaret Mead's anthropological studies, possibly in the Pacific, which suggests that Indigenous women find birthing easier. It is a dangerous assertion to make because there is now a long, documented, history about the health service not taking Black women's pain seriously, but at the time that view was not held. The film has screening notes accompanying it and because the NCT had its own library of films, I think the film would have been used by the NCT practitioners to teach each other these techniques, although screenings could have been hosted if a film projector was readily available, which might not have been the case if antenatal gatherings took place in people's homes.



Figure 8: The Triumph of Childbirth, National Childbirth Trust, no date. Wellcome Trust.

When I first started working with the Collection, there was very little film about women's health. This is possibly because my predecessor was a man, and the collection was not organised holistically on health but around medical research. There is something very 'ordinary' about childbirth, which is slightly problematic, and as a result there isn't the kind of volume of material you'd expect. That's possibly also because more of the visual material is held in other media such as slides (or books). Slides were most likely used for instructional teaching in nursing rather than film.

Subsequent acquisitions since I joined mean that we have many important films such as one about Kathleen Vaughan's work, a women doctor who qualified in 1900. There were very few female doctors then, and it was very, very difficult to get accepted to train as a doctor if you were a woman. She ended up in India working as Superintendent at a hospital in Kashmir in the 1920s. Vaughan discovered that the Caste system in India meant that some women had lots of health problems arising from the way that society had framed them. For example, wealthier women weren't given access to fresh air, exercise and possibly high protein or limited food. They ended up with underdeveloped bone structure. There was a particular malformation of the pelvis called osteomalacia from which they suffered. The outcomes in childbirth for the mother and child are really quite poor if the mother had osteomalacia and required a lot of intervention. Vaughan's observations of poorer women who were working outside and throughout their pregnancy was that they had better developed bone structures, access to a wider variety of foods, and, as a result, better outcomes in childbirth.

Vaughan brought that research back to Britain, and, in the 1930s, she made one of the first antenatal exercise films that we have in the collection (*Childbirth as an Athletic Feat*, 1939). She believed that a pregnant woman 'must regard herself as an athlete in need of training for her special job'. Top obstetricians considered her advice 'constructive hygiene at its best'. It's extraordinary because she extrapolated from what she had seen in India to create a programme of exercises for women in Britain. Her star pupil in the film is a ballet dancer. It

was shot in 1939, on the top floor of a hospital, the windows are taped up (in preparation for War). It was available to be shown in health centres. The film also looks at the way that women being together can bring them mental strength and how socialising with their babies could help post-birth. Her work predated the NCT work, and she published books right up to the 1950s with Faber and Faber.

The medicalisation of women's labour was questioned by Grantly Dick Read, whose archives we hold and one of the founding members of the NCT. He first published on the subject in 1933 entitled, *Natural Labour*. He had seen how medicalised birth had become, although he was not a qualified obstetrician and lobbied for women to be a conscious participant rather than a drugged patient. In his visits to America, he heard accounts from women who were being put under a general anaesthetic, neither in control of their labour or aware of it, and then only presented with the baby afterwards. We have a film about how distant fathers-to-be were in the labour ward at this time, showing the father in the corridor in a gown and mask, being presented with the child, whilst the mothers were either sleeping in the ward or sitting around smoking (*Hospital Maternity Care: Family Centered*, 1964). Dick Read was in America and in interviewing women, he concluded that the less autonomy and control women had over their own labour, the greater the post-birth trauma they suffered. He championed the idea of natural childbirth in the UK, but it was an idea which sat uncomfortably with the way most hospitals were approaching labour at the time which was still as a medicalised practice within which women had no control.

Another voice which spoke for mothers-to-be is Scope. We have a rich collection from the charity, formed in the 1950s and previously called the Spastics Society for people born with cerebral palsy. Initially the organisation was a parent-activist's society. The word 'spastic' is the opposite of 'elastic', it means 'tight', and is a term no longer used to describe people with cerebral palsy. The films show how to diagnose abilities in children from birth. Understanding what's "normal" goes back to Pavlov and those early films demonstrating reflexes. For

example, Wellcome has a film of a baby born without a forebrain, *The Mid-Brain Infant* (1925/1960). That kind of material is not in the mainstream but become part of a number of textbook case studies. Scope commissioned films of “normal” and “abnormal” children on the basis that early diagnosis was key, although later their films addressed fundraising, access to education and then work. As well as the films and archives, Wellcome has digitised a run of their magazine called *Disability Now*.

Scope convened a conference in 1978 which they recorded announcing that this would be the year of ‘prevention.’ Their membership comprised of people who had children born after difficult births who had not received sufficient oxygen, leading to a range of neurological and physical disabilities. Even in the 1970s, access to good quality healthcare for pregnant women was not a given. James Loring, the Chair, mentions that there would be action for improvement in ante-natal and maternity services at the time of government cuts. Other speakers talk about the welfare of pregnant women and the outcomes of pregnancy after considering a number of risk factors particularly in early pregnancy. The topics covered include the beneficial impact of pregnant women taking folic acid and then the use of the drug thalidomide during pregnancy (which had caused a scandal and nearly a miscarriage of justice if it wasn’t for parent activism – we also hold the archives of the Thalidomide Society and Thalidomide Trust, followed by the risk from rubella (German measles). In the ‘60s and ‘70s, women were not routinely called up for antenatal screening once they had a confirmed pregnancy. The discovery of risk factors such as pre-eclampsia often came late. Treatment for pre-eclampsia as outlined in the film *Toxaemia in Pregnancy* (1958) boils down to outmoded advice such as drinking two pints of milk a day, and perhaps more sensibly ‘fathercraft’!

Antenatal screening involved, right up to the 1970s, women being X-rayed when they were pregnant. An epidemiologist Alice Stewart discovered the risks via a long-term study, although her research was not widely accepted as she had clashed with Richard Doll about

the risks of low dosage radiation which he did not agree with. Doll was instrumental in identifying the link between smoking and health and therefore had considerable professional clout, by becoming part of the medical orthodoxy. After his death, it was discovered that he'd been supported by British Industries involved in the nuclear industry. Not only did she prove a link between childhood leukaemia and maternal x-rays in pregnancy, but she also ended up at Hanford in America as an expert witness giving evidence about the types of cancers caused in the vicinity of the plutonium plant established as part of the Manhattan Project, built to provide plutonium for the atomic bomb which destroyed Nagasaki in 1945. Wellcome holds both Stewart's archives as well as Doll's – surprisingly (and not without criticism) Wellcome was involved in funding an authorised biography of Doll in 2009.

Eugenics is now considered a discredited field in science: Wellcome holds (and has digitised) the Eugenics Society archives (now known as the Galton Trust) as part of a bigger narrative of how researchers have cracked 'the code of life' (leading to the discovery of the human genome for instance). Within the collection there is a film from 1937, which after sensitivity checks, we decided not to put online as we have identifying paper archives about the family deemed to have 'unfavourable' heredity. The film, *Heredity and Man* (1937) can however be viewed on the BFI's Player. More recently, the scientific thinking behind eugenics was critiqued in a powerful new film *God Mode* (2023) by the filmmaking artist partnership, Genetic Automata (Larry Achiampong and David Blandy). This was screened at Wellcome together with collections' materials.

To find out more about Kathleen Vaughan;

[The birth of ante-natal classes | Wellcome Collection](#)

To find out more about Alice Stewart;

[We are the survivors of slow-motion epidemics | Wellcome Collection](#)

A [YouTube Playlist](#) has been created and most of the films mentioned here can be watched with here or via the links provided in the body of the text.