In tracing the history of gynecology and obstetrics, it becomes clear that evidence of the masculinization of thought, which some scholars have argued began in the early modern period, can be found in medical texts of Late Antiquity and the Middle Ages. From there, the practice and study of gynecology experiences a continued process of masculinization. With the exceptions of Hildegard of Bingen and Trota, the authors of all extant pre-modern and medieval gynecological texts were men. Men continued to write about the female anatomy in the setting of the medieval university from which women were excluded. A new definition of what it meant to be a physician emerged with the development of the university; the field of medicine consisted of the memorization of certain authoritative, male-authored texts. Those who could afford medical care viewed a university degree as a desirable quality in their practitioners, thus giving professional legitimacy to the university-educated intellectual elites. Female practitioners, namely midwives, who lacked access to the knowledge offered at the university never achieved the same levels of legitimacy. Instead, the reverse happened; midwives’ traditional methods of providing care appeared suspicious to onlookers, effectively delegitimizing their practice while drawing comparisons to witchcraft. The witch craze brought increased regulation of midwives and their practice, requiring them to gain the approval of male physicians or local magistrates.

The increased male presence in gynecological practice was met by the increasingly masculine practice of gynecology itself. It became increasingly invasive, dominated by a desire to explore women’s bodies through autopsies, surgeries, and anatomical drawings. Physicians dissected the female body while Caesarean sections and births aided by forceps gave male physicians control over women’s health. These procedures rendered women passive, not simply during delivery, but more generally in the practice and nature of gynecology and obstetrics in the early modern period.

This process of masculine control over the feminine did not culminate with Baconian and Cartesian ideas about the conquest of Nature. Women with no affiliation to the medical community would come to feel the effects of the masculinization of gynecology. Women no longer had the ability to define their own bodies and minds. The myth that male gynecologists replaced midwives is largely exaggerated, but the rise of the male expert had serious consequences for women of the early modern period. The professionalization of male gynecologists and obstetricians certainly impacted the lives of midwives. Physicians repeatedly thwarted attempts midwives’ attempts to form professional associations – corporations that might have provided midwives with greater opportunities for educational and institutional development. Male physicians also refused to allow midwives to join their medical colleges, maintaining their monopoly on medical knowledge and technology. Midwives’ lack of access to centers of learning left them unaware of any scientific and medical developments and were they subsequently portrayed as incompetent and untrustworthy.

The continued pushing-aside of women from the field of medicine came to be seen as a natural exclusion. In the nearly complete absence of women, male physicians redefined and redeveloped an image of the female body and mind that would be used for centuries. This new depiction of women’s nature suggested that females were naturally incapable of understanding the complexities of science and mathematics. According to this model, their physiques were intended for the bearing of children, not for higher learning. The uterus was no longer described as an imperfect manifestation of male genitalia, but as the perfect organ for giving birth. Drawings of a uniquely female skeleton also emerged in the late eighteenth century - one with exaggerated hips and a dainty skull – as physicians resumed their study of sexual differentiation.

Faculty Mentor: Dallas Denery

Funded by the Edward E. Langbein Summer Fellowship