From Midwifery to Birth Assistance: Midwives' Practice in the First Half of the 20th Century in the Czech Lands

Abstract: The paper deals with midwives' practice in the first half of the 20th century. The issue is based on the analysis of serial sources, so-called birth diaries. The research analyses ten series of birth diaries in the pre-printed form in which the midwives recorded information on the course of deliveries. The diaries are kept in Czech and Moravian archives and provide data on obstetric practice in various regions of the Czech lands. That makes it possible for us to compare the circumstances under which the midwives worked as well as their performance in different geographical, demographic, and social conditions, both in industrial and agrarian areas. The obtained data provide answers to several questions, e.g. the beginnings of assistants' careers, their performance, the social structure of their clientele, as well as medical aspects of obstetric practice and cooperation with physicians. The research attempts to define the links between these indicators and also focuses on the financial gains of the midwives in their obstetric practice.

Key words: 19th century history – midwives, income – statistics of deliveries

hile the topic of midwives, midwifery, and obstetrics became firmly established in European professional literature as early as the last third of the 20th century¹, it has only been the subject of research in Czech historical science in the last few years. Initially, it was given rather marginal attention in connection to other issues, such as the research into folk culture, ego documents, or the rites of passage.² The topic has only been explored more deeply by Hana Jadrná Matějková for the early modern

¹ For a basic overwiev of foreign literature on the topic of midwives and obstetrics, see Vladan HANULÍK, Porodila šťastně děvče... Porodní deníky čtyř porodních babiček z 19. století, Pardubice 2017.

² Comp. Alexandra NAVRÁTILOVÁ, Narození a smrt v české lidové kultuře, Praha 2004.; Miroslava MELKESOVÁ, "...skrze něž Pán Bůh svět, církev i nebe množí..." Raněnovověké venkovské šestinedělky, porodní báby a kmotry, in: Milena Lenderová – Jana Stráníková – Kateřina Čadková (eds.), Dějiny žen aneb Evropská žena od středověku do poloviny 20. století v zajetí historiografie, Pardubice 2006, pp. 263–289; Tereza DIEWOKOVÁ, "Voják se bitvy nebojí, tak ani já se nebojím svého porodu" aneb vnímání porodu na konci 18. a na počátku 19. století, in: Martin Nodl – Daniela Tinková (edd.), Antropologické přístupy v historickém bádání, Praha 2007, pp. 53–68; Hana STOKLASOVÁ, Katolické přechodové rituály v českých zemích v "dlouhém" 19. století, Pardubice 2017, pp. 119–126.

period and Daniela Tinková for the Enlightenment.³ In the last three years, midwifery has become the main topic of a scientific project supported by the Grant Agency of the Czech Republic (GAČR) implemented by a research team led by prof. Milena Lenderová at the University of Pardubice.⁴ The project also included the research into the birth diaries kept by midwives in the first half of the 20th century and preserved in both Czech and Moravian archives. These unique sources, although not many have been preserved, have considerable informative value as they map the development of obstetric practice from the late 19th century to the early 1950s when obstetrical care was finally institutionalized and integrated into socialist health care. The presented article is based on an already realized research in the course of which the so far discovered and available diaries were examined and analysed to map the lives, activities, and performances of particular midwives in the context of their localities. In this text, we will try to generalize the previously acquired data to determine some general characteristics that were typical of the activities of midwives in the Czech lands in the first half of the 20th century.

Since midwives were present at the crucial moment of the baby's arrival, their activities had received increased attention since Christian antiquity. In the Czech lands, the first legislative measures concerning midwives are found in early-modern obstetric manuals and also in church ritual rubrics where attention is paid to the information to midwives on so-called emergency baptism. However, it was only the Enlightenment monarchs who defined clear rules for practising midwifery and laid the foundations of modern legislation in obstetrics. These rules also contained the obligation for midwives to be educated in so-called midwifery courses that were offered by medical faculties of existing universities. Thus, the system of obstetric education began to be formed, which contributed to the gradual medicalisation of childbirth and caused gradual decline of midwifery resulting in the transfer of competence from midwives to physicians. In the first half of the 20th century, childbirths, so far carried out in the home environment, began to get under medical control

³ Hana JADRNÁ MATĚJKOVÁ, "Slovou a jsou ony nás všech veliké matky" Porodní báby a jejich role v raně novověké společnosti, Historica Olomucensia, No 39, 2011, pp. 51–62; Ibid, "Vzdávej lékaři patřičnou úctu, neboť i jeho stvořil Hospodin." Tolerance v rámci kompetenčního sporu mezi porodními bábami a lékaři porodníky v raném novověku? Theatrum historiae 13, 2013, pp. 93–106; Ibid, "A tak mají báby rodícím ženám kazatelkyně býti." Duchovní rozměr v úloze porodních bab v českojazyčné babické literatuře raného novověku, in: Jedinec a evropská společnost od středověku do 19. Století, Olomouc 2014, pp. 311–328; Ibid "Neznalé" báby a "vzdělaní" lékaři? Konstrukce (ideální) porodní báby a strategie vytváření autority ve spisech autorek a autorů raně novověkých porodnických příruček z německojazyčných oblastí, Praha 2016; Daniela TINKOVÁ, Tělo, věda, stát: zrození porodnice v osvícenské Evropě, Praha 2010.

⁴ GACR, grant project 17-14082S Porodní báby: profesionalizace, institucionalizace a výkon historicky prvního ženského kvalifikovaného povolání v průběhu dvou staletí, 1804–1948. (Midwives: Professionalization, Institutionalization and Performance of the First Female Qualified Profession in Two Centuries, 1804–1948).

to be completely transferred to the hospital environment at the beginning of 1950s. Owing to the surviving diaries, the course of this process can be observed very well.

The birth diaries analysed during the research are a historical source that originated at the end of the 19th century, although it had its predecessors too. The birth diaries, or better midwives' private observations on childbirths, have been documented even in the previous period when the official registering obligation was not yet in force. Czech and Moravian archives yielded up four birth diaries of this type from 1842–1898. They were written by midwives Anna Vondráčková from Choltice, Anna Bicanová from Týn nad Vltavou, Anna Štěpánková from Zašová, and Marie Chejstovská from Ledeč nad Sázavou. The analysis and edition of these diaries was the first output of the said research grant.⁵

It was ordered during the inspection of midwives' activities in 1881 that the course of births be recorded in the so-called birth charts.⁶ Midwives obtained the charts at either the district or municipal council, and having filled them out, they passed them to their senior physician. However, the instructions also allowed keeping a birth diary provided that the midwife could write, which was generally to be assumed given the obligation to attend midwifery courses.

The introduction of pre-printed form diaries, which will be discussed in this study, dates back to 1897 when the Service Regulations for Midwives were published stipulating the obligation to keep a diary and fill in the charts. Although the set of surviving diaries contains two which date back to 1898, when the directive came into force, the research suggests that it took some time before the practice had settled and midwives had taken keeping of a diary for granted. The new diary had a set form containing boxes for up to 30 childbirths, the course of birth being rather exactly defined through sections to record the labouring woman's name, status, age, religion, and address, the number of the birth, the time of midwife's arrival at the woman in labour, exact time of birth and placental expulsion, child's position, sex and approximate weight, the month of pregnancy in which the child was born, the state of the mother and child immediately after the delivery, the course of the puerperium, the presence of a physician at birth and his/her name.8 Such a detailed description of the birth provides a wealth of information to answer questions about midwives' activities and the ordinariness of the birth process. The information describes not only the performance of midwives and health aspects of delivery but also the social and economic conditions in the regions where midwives worked. Although only

⁵ V. HANULÍK, Porodila šťastně děvče.

⁶ Nařízení vydané od c. k. ministerium záležitostí vnitřních dne 4. června 1881, jímžto se vydává revidovaná instrukce bábám porodním, Praha 1881.

⁷ Služební předpisy pro porodní báby vydané nařízením c. k. ministeria věcí vnitřních ze dne 10. září 1897 (ř. z. č. 216), Praha 1897.

⁸ *Ibid*, pp. 38–41.

ten diaries with sufficient data for relevant research have been preserved, the resulting analysis has produced interesting results that we will try to present below.⁹

Table 1 summarizes the basic data on analysed diaries and their authors, as well as the details on the nature of the localities where the diaries were kept. The order of the diaries in the table is determined by the length of practice, the number of diary books, and the number of recorded births.

Table 1 Overview of analysed diaries and their authors

Midwife Place and dist of work		Number of diaries and dating	Number of births recorded in diaries
Rohrová Marie	Rohrová Marie Skuhrov nad Bělou, district Rychnov nad Kněžnou		968
Mastilová Marie	Černotín district Hranice na Moravě	26 diaries 1912–1953 (gap March 1942 – October 1944)	1086
Fišerová Marie	Hostomice district Beroun	30 diaries 1926–1954	883
Schubertová Marta	Hrádek nad Nisou district Liberec	24 diaries 1912-1946 (gaps 1934/35, 1940/41 and a part of 1942)	874
Waleschová Františka	Svojetín district Rakovník	6 books/36 years 1912–1946 (gap 1919/21)	639
Švehlová Kateřina	Horní Dubenky district Jihlava	22 diaries 1898–1909	657
Hilschová Elsa	Hrádek nad Nisou district Liberec	14 diaries 1920–1946 (gaps 1924/25, 1939/40)	575
Hůlková Anna	Kožlany district Plzeň-sever	18 diaries 1903–1947 (with numerous gaps)	564
Maierová Františka	Česká Skalice district Náchod	diary book / 11 years 1911–1922	425
Mukenšnáblová Jana	Chlumčany district Plzeň-jih	10 diaries 1921–1941 (with numerous gaps)	298

⁹ The analysis of all preserved dairies makes up the second publication of the research team. The text also outlines the life stories of the authors of the diaries. I would like to thank my colleagues who participated in the creation of individual studies for the opportunity to use the data extracted by them. More in Hana STOKLASOVÁ, *Porodní bába? Asistentka?: porodní deníky z let 1898–1954*, Pardubice 2018.

Even at a glimpse, there are certain disproportions evident in the analysed sample. This mainly applies to the localities from where the diaries come. Almost all of them were kept in rural areas or smaller towns. No diary was found to record births in a larger conurbation. If we focus on the economic character of the localities which the diaries come from, we find greater variability. There are agrarian areas with local industrial production, the localities with more or less the same share of industrial and agricultural production, and purely industrial regions. Table 2 indicates the types of localities in which the individual diary series were kept.

Table 2 Economic and social character of the localities where the diaries were kept

Type of locality	Midwife, place of work	Locality specifications	Type of industrial production
	Rohrová Marie Skuhrov nad Bělou	agricultural area at the foothills of the Orlické hory	foundries
Agrarian with local industrial production	Mastilová Marie Černotín	an agricultural area at the edge of Hornomoravský úval	quarries, lime works
	Fišerová Marie Hostomice	an agricultural area at the edge of Pražská plošina	glove making, nail making
Locality with an equal share of agrarian and industrial production	Švehlová Kateřina Horní Dubenky	agricultural area in the middle of the Českomoravská vrchovina	glassworks
	Waleschová Františka Svojetín	an agricultural area at the edge of Pražská plošina	stone quarries, sand quarries
	Hůlková Anna Kožlany	industrial area at the edge of the Brdská pahorkatina	brickworks, black-coal mines
	Maierová Františka Česká Skalice	industrial area at the foothills of the Orlické hory	foundries, weaving mills, sawmills
Locality with prevailing industrial production	Schubertová Marta Hrádek nad Nisou	industrial area at the edge of the Lužické hory	textile industry, lignite mines
	Hilschová Elsa Hrádek nad Nisou	industrial area at the edge of the Lužické hory	textile industry, lignite mines
	Mukenšnáblová Jana Chlumčany	industrial area in the Plzeňská pahorkatina	coal mines, kaolin deposits

This division enables us to put the data obtained by analysing diary entries into a specific economic and social context and to define the differences between them.

The analysis of the diaries focused on the following: number of births in individual years, assistance of physicians and birth complications, maternal mortality, number of stillbirths and child mortality in puerperium, foetal monstrosity, multiple births, the time

between the arrival of a midwife to the labouring woman and the delivery, mothers' age, number of childbirths, social stratification of women in labour and their marital status, midwife's religion and range of action. We will mainly use these indicators for the purpose of this study which relates to the performance of the midwives (the number of performed births, the area of midwife's activities), the nature of the society served by the midwife (age, marital status, and social composition of women in labour), and health aspects of obstetric practice (maternal and child mortality in puerperium, number of childbirths, assistance of physicians). All data obtained will be related to the total number of births performed by individual assistants.

However, it has to be acknowledged that the relevance of the extracted information varies from one indicator to another, which is mainly due to the different approaches of midwives to keeping birth records. While some midwives were very conscientious about recording, others showed a laxer approach. This is most evident in the records relating to mothers' social status since midwives would most often determinate a woman's social status through her husband and record the profession of the father. Although we find the mother's occupation in some diaries, it is often defined very vaguely or only in case of single women, while other diaries miss this information at all. The indicators concerning mothers' age, childbirth, and religion are not always complete either. More trustworthy information relates to medical aspects of childbirths, as midwives were rather precise at documenting physicians' interventions and birth complications. Even the areas of midwives' scope of activities have been mapped well and reliably. The analysis of diary data shows that economic conditions and resulting social character of the locality were fundamental at affecting the structure of midwives' clientele. Based on the analysis of the diaries, three types of localities were defined in the above table with respect to the working area of the midwives the comparison of whose diaries showed obvious differences. Therefore, we will try to identify the features characteristic of midwives' activities in these localities and outline the problems that accompanied them in their obstetric practice.

The practice of birth assistants in agrarian areas with local industrial production

Regarding this type of locality, three of the ten researched diaries may be included herein. These are the diaries of Marie Rohrová from Skuhrov nad Bělou in the Podorličí region, Marie Mastilová from Černotín near Hranice na Moravě, and Marie Fišerová from Hostomice near Příbram. ¹⁰ Coincidentally, the records of the three midwives contain

For a detailed anaylsis of these diaries, see Hana STOKLASOVÁ, Porodní bába Marie Rohrová ze Skuhrova nad Bělou, in: Hana Stoklasová (ed.), Porodní bába? Asistentka?: porodní deníky z let 1898–1954, Pardubice 2018, pp. 20–47; STRÁNÍKOVÁ, Jana. Porodní bába Marie Mastilová z Černotína. In Ibid,

the highest number of childbirths of all analysed diaries that reaches almost a thousand. However, each of the midwives began her practice in a different period.

Marie Rohrová began studying an obstetric course in Praha in September 1900, and already in October the same year did she record the first delivery in her diary that took place at the maternity hospital in Praha. In February 1901, she returned to Skuhrov nad Bělou to begin her forty-year practice (1900–1940), during which she wrote a continuous series of 33 diaries which show that she led 968 births during her career.¹¹

Marie Mastilová studied a course in Brno, probably from September 1912 to February 1913. She assisted at five childbirths at the Brno maternity hospital, while all the other ones recorded in the diaries were performed at homes. Her practice, during which she filled in 26 diaries, lasted forty-one years. Although the records of some births are incomplete and part of them is not recorded in the form-type diary, it could be reliably proved that she assisted at 1086 births.

Due to GDPR, it was impossible in the case of Marie Fišerová to obtain all the biographical data, so our findings are somewhat more modest. We are certain that she, like Rohrová, studied in Praha, but much later. Although she recorded her first childbirth in the diary in March 1926, it cannot be inferred with certainty when she finished the course. Assuming that the diary of 1926 was indeed the first one, it must have been at the turn of 1925–1926 at the earliest, which implies that she might have worked as a midwife for 28 years and, as in the case of Marie Mastilová, her private practice was terminated as a result of the centralization of socialistic obstetrics. It seems that two of Marie Fišerová's diaries are incomplete, so it could be ascertained that she led 883 births during her practice. ¹³

Of course, the beginnings of all three midwives' careers were limited by family circumstances. Both Marie Rohrová and Marie Mastilová attended the course when they already had some children. Marie Rohrová was 22 years old and commenced the course in Praha after her husband and second daughter had died of tuberculosis. Therefore, it can be reasonably assumed that, by doing so, she was trying to solve the difficult financial situation of the family that *de facto* depended on the help of her parents. Marie Mastilová, too, began the course at the age of 22 when she already was a mother of two, and her motivation to

pp. 48–81; BOROVIČKOVÁ, Martina – VALOVÁ, Eliška. *Porodní bába Marie Fišerová z Hostomic*, in Ibid, pp. 82–101.

State District Archives in Rychnov nad Kněžnou, collection of MNV Skuhrov nad Bělou, inv. No. 43/77-43/94, book No. 62–79, card 203. In addition to the diaries, the collection also contains Marie Nosková's certificate, 1901, inv. No. 43/76. The diaries were in the care of the family and were archived in Rychnov nad Kněžnou in the 1990s owing to Marie Rohrová's grandson, Miloslav Kouřím.

¹² The museum a gallery in Hranice na Moravě, collection of Marie Mastilová, Documents: genealogical and biographical materials, non-inv. The diaries were handed over to the musem by Marie Mastilová's family, namely by Marie Kuběnková.

¹³ State District Archives in Beroun, collection of Marie Hájková Fišerová, The diary of a birth assistant No.1–30, 1926–1954.

enter the course in obstetrics was likewise financial. Her husband, Karel, came from an old peasant family, but his parents passed the right to farm to his younger brother while he lived with his wife at a peasant exchange from his parents and worked as an ordinary railroad employee. Therefore, there was no greater hope for the economic growth of the family. Besides, the proper wedding of Marie and Karel only took place three months after the delivery of their first child whom Marie gave birth to in the house of her parents. We can only speculate whether the marriage was postponed due to the disapproval of groom's parents because he had conceived his child with a girl who only served on their farm or whether it was delayed by something else.

Marie Fišerová, still Hájková by then, began her practice as a single woman. Her first diary comes from the time when she was 35 years old, and we know that it had taken her another two years before she, then aged 37, got married to a butcher, Tomáš Fišer. The inaccessibility of registers makes it impossible to verify whether she gave birth to some children even in such advanced years, but since there are two longer time gaps in her diaries during which she did not attend any births, we may assume so. The fact that Marie Fišerová remained unmarried for a long time may indicate that her decision to pursue midwifery was driven by an effort to become economically self-sufficient. Having married the butcher, whose trade was lucrative, she might not have had to deal with her financial situation as much, although we can only speculate about it.

Family circumstances and the number of children whom the midwives assisted at birth during their careers are the main aspects that affected the performance of their profession and the number of births they performed during their practice. This is clearly illustrated by the charts 1–3 below which show the midwives' performance.

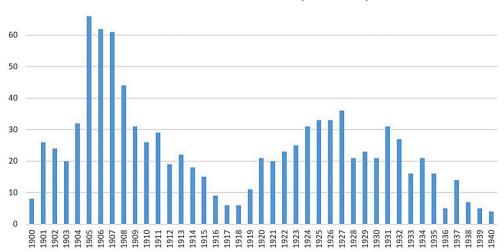
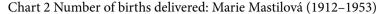


Chart 1 Number of births delivered: Marie Nosková (1900–1940)



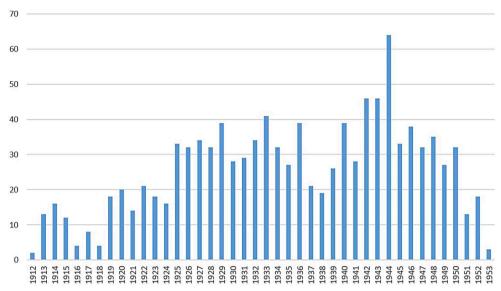
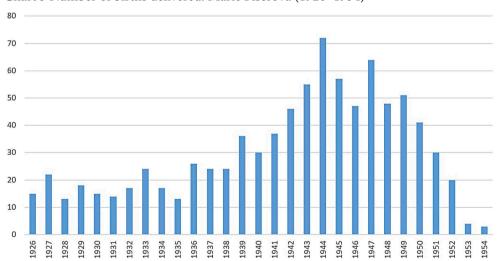


Chart 3 Number of births delivered: Marie Fišerová (1926–1954)



The charts show clearly that at the beginning of their careers, the three midwives served fewer labouring women, which was caused by the fact that it had taken them some time before they could establish their practice and gain sufficient clientele. Being an exception in this respect, Marie Rohrová commenced her practice quite vigorously as she was the only midwife around and managed to overtake almost completely the clientele of the midwives who travelled to the Skuhrov region from more distant villages. There were also

some family aspects since Marie Rohrová and probably even Marie Fišerová gave birth to two children during the first decade of their practice, the care for whom reflected itself in the number of assisted births. Marie Mastilová did not give birth to any more children in her marriage, but four years after she had begun her practice, she and her husband took over a farm after a deceased brother, which undoubtedly entailed several duties associated with seasonal farming that limited her obstetric practice. The last aspect to consider was the political situation in which the Habsburg monarchy appeared after the outbreak of World War I. Men leaving to the front line caused a significant drop in birth rates, which is evident in the performances of both Marie Rohrová and Marie Mastilová. During the three war years of 1916–1918, the number of childbirths led by both of them did not exceed ten. The charts with the data of both Marie Mastilová and Marie Fišerová also show that they led most births in the last decade of their practice. Naturally, this was due to the fact that they had had their maternity duties fulfilled, had gained enough experience from the previous practice, had a permanent clientele, and at the same time, they were at the peak of their physical strength. In both cases, this stage falls into the period when they were between 40 and 55 years of age. In case of Marie Rohrová, the tendency is similar, although she led most deliveries at the beginning of her career when, after the death of her first husband, she was looking after her little daughter trying to provide them both with the necessities of life.

We have already mentioned that the localities where the three midwives worked were mainly agricultural. This also affected the social composition of the midwives. It is surprising how the data from the diaries of Marie Rohrová and Marie Mastilová are similar, although the areas of their work were geographically quite far from one another. Both midwives

recorded the occupation of each mother's husband, which gives us a good idea as to the
social class to which the family belonged. The data extracted from the "Occupation" box
is presented in Table 6.

Midwife	Farming population	Qualified professions, sole traders	Unqualified professions ¹⁴	Intelligentsia	Other, not specified
M. Rohrová	45.9%	16.3%	31.6%	3.9%	2.3%
M. Mastilová	48.6%	18.1%	28%	1.8%	3.5%

Tab 6 Social stratification of Marie Rohrová's and Marie Mastilová's women in labour

The predominance of the farming population is evident as, in the case of both the midwives, half of the women came from this stratum. One third is represented by unqualified professions - unqualified workers (mostly from Porkert's foundries) predominate in the case of Marie Rohrová, whereas in the case of Marie Mastilová, they rather belonged to

¹⁴ Marie Mastilová also included the railway employees herein (5.9%).

unqualified farming population. A fifth of all fathers were sole traders or had a qualified profession, which resulted from the proximity of foundries and quarries where the workers, whether qualified or unqualified, worked and the sole traders provided their services. Both localities are consistent in showing a very low proportion of the intelligentsia, which even fails to reach 5% in this case. Also, the marital status of labouring women suggests that there was still a very traditional society in these localities, as about 95% of women would only deliver in matrimony.

Unfortunately, there is no such complete data in the case of Marie Fišerová. Owing to the fact that she only recorded the professions of mothers and not fathers, 88.5% of women in labour entered in her files are recorded as a "housewife". The remaining one-fifth of women mostly belonged among the unqualified or farming population (a worker, peasant, maid) or were sole traders (e.g. a seamstress, modiste, tailor, businesswoman, or hairdresser).

Given the large number of the farming population, it can be assumed that the women in labour in this stratum did not suffer from major food shortages and had better facilities than those from the working-class environment. This is also clearly illustrated by the statistics on maternal and infant mortality recorded in the diaries for the period of the puerperium. If we consider the data to be reliable, we may state that maternal mortality in the monitored localities was very low, approaching only 1‰ on average. Marie Rohrová recorded two deaths of women in labour in 968 deliveries, Marie Fišerová likewise two deaths in 883 deliveries and Marie Mastilová encountered no case of mother's death during her whole practice. Undoubtedly, the reason was adequate nutrition of mothers in typically agricultural localities together with the functionality of the established midwifery system, in which the care for women in labour was relatively well ensured under the given conditions.

Naturally, infant mortality shows higher numbers since it includes stillborn children and those who died in the puerperium. Infant mortality in Marie Rohrová's records reach 4.9%, in Marie Mastilová's 5.6%, and 4.3% in Marie Fišerová's. The figures suggest that maternal well-being was reflected in the health of the newborn. However, the low infant mortality rate also attests to the help of experienced assistants capable of dealing with a number of birth complications.

The low maternal and infant mortality rates were also affected by labouring women's age and the number of childbirths they had undergone. Agricultural areas were characterised by a higher number of births and also by the fact that more mothers gave birth at a younger age. The comparison of the data is somewhat distorted by the fact that Marie Rohrová failed to record the age of 14% labouring women, which is a relatively high number. The reasons for the missing records remain unknown to us and they are striking since Marie Rohrová was very conscientious at keeping her diaries. If we compare the age of women

¹⁵ To express this statistic, the following age cohorts were established: 16–20 years, 21–25 years, 26–30 years, 31–35 years, 36–40 years, 41–45 years, and 46–50 years.

in labour, we find that about 60% of births were concentrated in two age groups – most women gave birth between 26–30 years of age (about 30% on average) and between 21–25 years of age (about 25%). This was probably due to two factors, namely to the age of majority that was 24 years of age by 1919 only to be reduced to 21 after the foundation of Czechoslovakia, and also to the economic self-sufficiency which pushed marriage and hence even the birth rate to a higher age. This is evident from the fact that, on average, 25% of mothers would deliver their children between 30–40 years of age. The number of childbirths after the age of forty drops sharply. In case of Marie Fišerová, the data in the lowest age group of 16–20 years are out of the average as there were 10% of births recorded, which is a relatively high number.

The numbers of childbirths in the diaries of the three assistants were quite high and similar. Prevailing were the deliveries of primiparae, which accounted for about 30% of all childbirths, followed by the deliveries of sekundiparae that totalled approximately 25%. The number of women in labour who delivered for the third time was between 15–20%, about 10% in the case of the fourth delivery, respectively. It was not unusual in these localities that 20% of mothers delivered more than four times, and in case of about 2–3% of women in labour, we even have records of nine- to thirteen-fold childbirths.

Interventions by physicians in standard childbirths had not been common in agrarian areas yet. This is particularly evidenced by the data from the diaries of Marie Rohrová and Marie Mastilová, where more than 95% of deliveries were led by an assistant only, 4% being complicated deliveries necessitating the presence of a physician. There is no physiologically normal birth that would be led by a physician. Therefore, we can assume that the majority of the population still considered the presence of a physician at uncomplicated childbirth unnecessary and that midwives still enjoyed a fairly high level of trust in general. Moreover, a physician was not always at hand in the mountains, at foothills, and in peripheral areas, and it was even more difficult to get to a labouring woman in winter. Also, physician's intervention was more expensive, which was a significant problem in socially weak strata. Municipalities tried to make medical care more accessible and therefore subsidized it, but only as late as in the 1920s and 1930s. This is evidenced by the data from the diary of Marie Fišerová who began her practice at this time. Herein, the interventions of physicians in uncomplicated deliveries are already routinely recorded – a physician was present at 17% of childbirths, a third of which were physiologically normal deliveries. This trend was already well documented in previous periods in larger towns and cities from where it gradually spread to the countryside. Indeed, the locality where Fišerová practiced her midwifery was quite close to Praha.

The last indicator we will pay attention to is the assistants' area of work. The research shows that some localities had enough assistants who competed quite strongly. The competition was further increased by the so-called bunglers who had not passed a midwifery

course and whose only qualification was their experience gained from practice. Although the state authorities had been trying hard to eradicate such unfair competition since the Enlightenment, bunglers managed to carry out their services until the mid- 20^{th} century. On the other hand, we also find places with a scarcity of midwives. This was particularly severe in places where hilly terrain made the passage more difficult.

Such was the locality of work of Marie Rohrová who spent 40 years as a single assistant within the area reaching from Rychnov nad Kněžnou towards Deštné in the Orlické hory. She used to walk in a submontane terrain that reached an altitude between 350m and 550m. Although 80% of women in labour, whom she provided with her services, lived within 5km, she had to walk up the hills from the Skuhrov valley, the terrain making her journey longer. The fact that she served a wide clientele from all social strata is evidenced in her diary that records 19 towns, villages, and settlements where she used to come. The diary lists the poorest single mothers alongside women from the wealthy Porkert family. Undoubtedly, the vastness of the area she worked at was also affected by the fact that the foothills were sparsely populated and people lived in more settlements spread over a larger area. Such an extended practice is more typical in not very densely populated agricultural localities whereas the labouring women in industrial areas, as we will see, were more socially structured, and there were midwives who assisted either to wealthier or poorer clients.

Concerning Marie Mastilová, her area of practice is mainly interesting in its gradual growth, which proves that a midwife gained her clientele gradually and sometimes even in a longer term. In the first decade of her practice, Mastilová served the women in the immediate vicinity and it took her 13 years before she began to be regularly called to such places like Ústí 5km away, where she finally led one-fifth of all her births. This was probably due to the decline in midwifery competition in this place, which resulted in the expansion of the area of practice.

Similarly, Marie Fišerová's catchment area was defined narrowly. In fact, it was limited to five nearest villages – including the one where she lived and another one she was born in – where Fišerová led 80% of all reported births. Obviously, the familiarity with the home environment contributed to the acquisition and expansion of her clientele.

These are the general characteristics of obstetric practice in agricultural localities. We will get back to them in the Summary and use them in the comparison of midwifery in the designated locations.

The practice of birth assistants in localities with an equal share of agrarian and industrial production

Obstetric practice in the areas that are straddling economic and industrial regions will be characterized through four birth diaries. They were kept by birth assistants Marie Švehlová

from Horní Dubenky in the Českomoravská vrchovina,¹⁶ Františka Waleschová from Svojetín near Rakovník,¹⁷ Anna Hůlková from Kožlany between Rakovník and Plzeň¹⁸, and Františka Maierová from Česká Skalice near Náchod.¹⁹ The number of childbirths recorded in the diaries of these assistants was lower than in the case of the previous three. Marie Švehlová led 657, Františka Waleschová 639, Anna Hůlková 564, and Františka Maierová 425 births. It is not possible to say that the analysis of these diaries would show such coherent data as outlined above, yet some identical indicators can be observed in their case, too.²⁰

The conditions under which these birth assistants began their careers were very different, and undoubtedly so were their motivations that made them attend the midwifery course. In 1898, when she began to study the course in Olomouc, Marie Švehlová was already the mother of three children. The family lived in Horní Dubenky in the Českomoravská vrchovina. The population of this agricultural and rather average fertile area was poor wherefore many of them welcomed the opportunity to work for local and relatively large glassworks. Kateřina Švehlová's husband was a stonemason, and as we know from the sources, he would leave the family from time to time to look for some work beyond the Austrian border. As the curatorial file made after his death suggests, the family suffered from material need, which may be why Kateřina decided to practice midwifery.

On the other hand, both Františka Waleschová and Anna Houšková commenced their practice as single women. Unfortunately, we have no idea of the time and place of Waleschová's studies. In any case, she began her practice in 1911 as a very young woman because she led her first childbirth being only twenty years old. Soon afterwards, she got married and had four children until 1924, which is evidenced by the diary where she recorded the delivery of her fourth child in the same year and filled in the *Marital Status* box as a widow. We know that Waleschová never married again, and so midwifery seems to have become the only source of income for the widowed woman with four children (assuming they all reached their adulthood).

Anna Houšková attended an obstetric course in Praha and she began her practice in 1903 as a single woman aged 25. A year later, she married a furrier, František Řenč, who

¹⁶ State District Archives in Jihlava, collection of the Parish Congregation of the Evangelical Church of Czech Brethren in Horní Dubenky (1784–2003), The diary of a midwife, 1898–1909, sign. L–III H.

¹⁷ State District Archives in Rakovník, collection of Waleschová Františka, card 1, non-inv.

¹⁸ Museum and gallery of Northern Pilsen Region in Mariánská Týnice, The diary of Anna Houšková / Řenčová / Hůlková, 1903–1907.

¹⁹ Regional Museum in Náchod, Birth reports from 1911 Františka Maierová.

For a detailed analysis of these diaries, see Hana STOKLASOVÁ, Porodní bába Kateřina Švehlová z Horních Dubenek, in: Hana Stoklasová, Porodní bába? Asistentka?: porodní deníky z let 1898–1954, Pardubice 2018, pp. 142–161; Vladan HANULÍK, Porodní bába Františka Waleschová ze Svojetína, in: Ibid, pp. 118–141; Milena LENDEROVÁ, Porodní bába Anna Hůlková z Kožlan, in: Ibid, pp. 182–199; Veronika LACINOVÁ NAJMANOVÁ, Porodní bába Františka Maierová z České Skalice, in: Ibid, pp. 200–218.

was 25 years older than her. Subsequently, she gave birth to her only daughter. We know from the sources that the considerably older husband gradually ceased his business and struggled with an illness, which suggests that Anna Hůlková alone provided for the family. Although she got married again at the beginning of the thirties to a nearly 70 years old military pensioner, František Hůlka, it is more than certain that even this marriage failed to secure her financially, so she was forced to spend a large part of her career making her living by herself.

We have the least information about Františka Maierová's midwifery practice. We do not know where she attended the course or when exactly did she commence her practice. The registers show that she began her practice at the age of 32 in Česká Skalice, where she had moved, but it is not impossible that she had practiced before because the first preserved diary comes as late as from 1911. Her family circumstances remain almost unknown to us. It is certain that she gave birth to at least two children – a daughter and a son – and died in 1926, aged fifty-five. We can only speculate about what motivated her to become a midwife.

Unfortunately, the lack of information and fragmentariness of the diaries make it complicated for us to comprehend the performance of all four birth assistants. The most reliable information we have relates to the activities of Kateřina Švehlová and Františka Maierová whose diaries have been preserved in a continuous series, followed by the practice of Františka Waleschová where the continuity of the records is interrupted by one gap. Unfortunately, Anna Hůlková's diary contains numerous gaps, which makes only some data useful. The performance of the three assistants is shown in Charts 4–6.

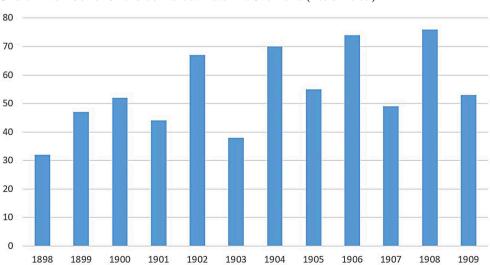


Chart 4 Number of births delivered: Kateřina Švehlová (1898–1909)

Chart 5 Number of births delivered: Františka Waleschová (1911–1946)²¹

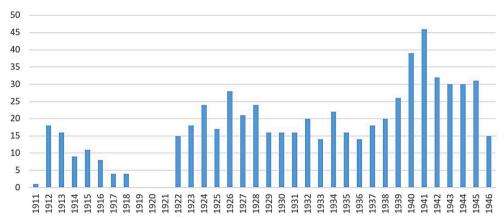
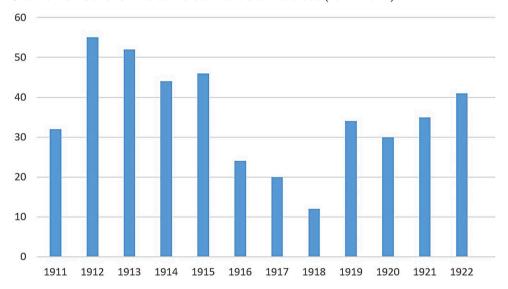


Chart 6 Number of births delivered: Františka Maierová (1911–1922)



The charts of Waleschová and Maierová clearly illustrate the above fact that the biggest drop in the number of childbirths came during the war years of 1916–1918, since both of them led fewer than 20 childbirths during these years. Such data in the case of Kateřina Švehlová is missing because the time series of her diaries end in 1909. Concerning the careers of the three assistants, it is confirmed that they were most influenced by family circumstances and their own deliveries. In the case of Kateřina Švehlová, this is evidenced by the drop in her performance in 1903 when her husband died and when, subsequently,

²¹ No data for 1919-1921.

she gave birth to her fourth child. We know that she later entrusted the raising of the children to her mother, and therefore the number of births she led in the next period is rather continuous. Her performance was the highest of all the analysed diaries, never dropping below 40 births per year and in some years even exceeding 70–80 assistances per year. Obviously, under normal circumstances – i.e. if she had taken care of her three children and the youngest toddler – such performance would not have been feasible at all. Švehlová used local conditions, namely the presence of a large glassworks community together with the absence of midwifery competition to the fullest, to not only provide for her children but undoubtedly also to financially support the parents who looked after them.

After a promising start, the practice of Františka Waleschová was restrained by her marriage and the delivery of four children in rapid succession. However, this period coincided with the decline in birth rates caused by World War I, so it is difficult to estimate how difficult it was for her to combine motherhood with the practice of a birth assistant. After the death of her husband, the situation certainly was not easy for her, which may be the reason why she, until the outbreak of World War II, never led more than 30 births per year. The sharp increase in the birth rate during the Protectorate found her at a productive age and on the peak of physical strength. Recently having become a woman of forty, she managed to serve 10 to 20 more women in labour per year. The reason was probably that Waleschová's clientele expanded significantly after the conclusion of the Munich Agreement when the area around Svojetín was attached to the Third Reich as an inland German enclave, which probably resulted in the withdrawal of a part of Czech birth assistants. Waleschová identified herself as of German nationality and her services were mainly sought by German clientele even in the pre-war period. The increased number of childbirths she assisted at is recorded in her diaries until 1946 when she was ordered to terminate her practice, was subsequently moved to a concentration camp and finally out of Czechoslovakia.

Unfortunately, the diary of Františka Maierová reveals no specific tendencies unless we take into consideration the decrease in the number of births during World War I. It could be assumed that she was keeping the first diary, which begins in 1911 and has got preserved till these days, when her practice had already been established, because the diary shows no gradual increase in clientele but, contrariwise, a continuous number of births per year with an upward trend. After the war, we may also observe an increasing birth rate, but the diary ended in 1922, and three years later, Františka Maierová died. Therefore, it is not possible to draw any more specific conclusions from her records.

Given the fact that these four assistants worked in an area with roughly the same proportion of agricultural and industrial production, we will try to outline the social stratification of the local population based on the data obtained. The highest number of matches is contained in the diaries of Kateřina Švehlová and Anna Hůlková, where there is

the highest proportion of the farming population that reaches 35% of the total number of women in labour. However, other data differ. In the case of Švehlová, there was a very high proportion of qualified professions and unqualified workers; the number exceeded 50% while, undoubtedly, including most of the workers in the nearby glassworks. The proportion of sole traders reached only about 9%, which indicates a not very developed network of services. Regarding the intelligentsia, it made up a rather insignificant part (under 2%). In the case of Anna Hůlková's diary, on the other hand, the number of women in labour from sole trading families made up a third of the clients, another 20% were unqualified and qualified professions, and the intelligentsia reached 5%. The data show clearly that Anna Hůlková worked in a locality with a developed network of services, and although there were some quarries and brickworks, they only employed one-fifth of the local population.

The diary of Františka Maierová shows a similar population structure as the one of Hůlková. The data are incomplete due to insufficient records, but the sole traders accounted for about one-third of the total number, another third of women in labour being from the families of men with unqualified professions. The rest of the social composition was made up of farming population and qualified professions, while the representation of the intelligentsia was minimal.

Neither in case of Františka Waleschová can we rely on a wealth of information, since we only have data from about two-thirds of labouring women and, what is more, only fragmental. The largest part was represented by the women in labour from working and farming families, the third being taken by sole traders' wives. Here too, the intelligentsia was only minimally represented.

In general, we might conclude that the women in labour recorded in these four diaries were mostly of a lower social status, which is also evident from their marital statuses. While only less than 5% of single mothers were recorded in agricultural localities, the figures are already increasing herein. In the case of Švehlová and Maierová, we find about 10% of unmarried women in labour, which would still correspond to the traditional model, even though the figure is somewhat higher. However, the same proportion in the case of Františka Waleschová is already a quarter, i.e. 25% of unmarried mothers, which is quite a high number. This undoubtedly relates to the somewhat looser approach of German and mostly Lutheran population to matrimony as the Lutheran church was far from being as rigid in the matter of matrimony as the Catholic one. However, the number does not mean that the women did not live in pairs, because occasional recordings of their second or third deliveries prove that they might have had the same partner with whom they had just not entered into marriage. Unfortunately, such data in case of Anna Houšková is missing.

Whether the partially industrial character of the localities had affected the state of health of the mothers and children can be monitored through their mortality, and it is observable that mortality in both these groups was indeed higher than in agrarian regions, namely by average 2% in case of children. Kateřina Švehlová recorded the highest number of stillbirths and deaths in puerperium (6.7%), which proves the dismal state of health in workers in central Českomoravská vrchovina. Next in the list, there are similarly high figures recorded by Františka Waleschová which show the mortality of 6.2% of children, and even Františka Maierová is similar in numbers (5.6%). The low mortality in children in agricultural localities is only comparable to the statistics of Anna Houšková, whose mortality figures of below 5% correspond with a low proportion of workers and a dense network of sole traders in the area of her practice. Maternal mortality at birth and in puerperium appears more optimistic since in neither case did the number of maternal deaths exceed 0.5%,²² which confirms the above hypothesis that the care for labouring women was relatively comprehensive.

The age of the women in labour and the number of deliveries is most different in Kateřina Švehlová's diary. The figures suggest that the area of her activities indeed showed a number of abnormalities. First of all, it is apparent that many women postponed their first deliveries to an older age, because in the other three diaries, the most children, about 30%, were born in the age cohort of 21–25 years, whereas Švehlová only recorded 25% of them. The remaining 5% moved to higher age cohorts, so for example where there were about 10% of children in the age cohort of 36–40 years elsewhere, Švehlová recorded by 4% more, which means that the women in her locality had children in older age and also delivered more times. The other three diaries provide us with a rather similar distribution of women in labour in age groups, although in case of Waleschová, there is a surprisingly small number of mothers in the lowest age group of 16–20 years where we find only 3% compared to the usual 6% or similar, which could attest to a more conservative approach of the local German population to an intimate life.

The statistics on the number of deliveries indicate that the number of children per family was already being reduced in these areas. This is mainly evidenced in the diaries of Anna Hůlková and Františka Maierová²³ which record 30% and 40% of primiparae respectively, more than one-fifth of sekundiparae (20% and 25%), while another 30% of deliveries falls within the third to fifth childbirths. After that, the numbers fall sharply. This is particularly evident from Františka Maierová's diary where only 6% of mothers had more than five children while in case of Hůlková, it was about 10% of mothers. The statistics of Kateřina Švehlová again deviate from the average. While the births by primiparae in all the analysed diaries are always at the forefront, Švehlová records the highest number of

²² We do not have the information on maternal mortality from the diaries of Františka Waleschová.

²³ Likewise, we do not have the information on the number of childbirths from the diaries of Františka Waleschová.

deliveries by sekundiparae. This shows that this assistant began her practice in a locality with unusually high number of children per family, since as many as 45% of deliveries fell upon the fifth to tenth child, and Švehlová even assisted at the delivery of the sixteenth child. It is difficult to find an unequivocal reason for the data being so far off the average, but in any case, the birth rate in this locality was strongly influenced by a very low social status of the population in combination with traditional thinking typical of undeveloped agricultural areas.

The low number of physicians' interventions recorded in the diaries confirms the fact mentioned above, namely that the midwives still dealt with most of the complications themselves. Concerning the diaries of Kateřina Švehlová and Františka Maierová, the physician only intervened in less than 5% of births and always in case of complications, so he was never present in physiologically normal birth. In Anna Hůlková's diary, the physician assisted more often, namely in less than 15% of cases, and only 2% of interventions were unjustified, which confirms the hypothesis. However, Františka Waleschová's diary gives us different figures. The records show that the physician assisted in no less than a third of cases (28%), but there were no complications in more than half of them. This could indicate that in a German national environment, the habit of calling a physician to a physiologically normal birth spread more rapidly.

The last indicator characterizing obstetric practice was the vastness of the area of practice. Owing to the existence of the local industrial production, which was linked to a larger number of workforce and concentrated in more populous settlements, the diaries show clearly that the local birth assistants did not have to travel such large areas as in agricultural localities. The smallest localities were served by Kateřina Svehlová and Františka Maierová, the former having led 90% of childbirths in four villages situated under 3km from one another, the latter assisting the same number of women in labour in five villages likewise situated within a 3km radius. The journey to the villages did not take more than 40min. Františka Waleschová and Anna Hůlková already served larger areas with more settlements. Waleschová led 85% of births in six surrounding villages within 6km, whereas Hůlková was limited by the fact that her clientele was spread out in settlements with a lower density of population, so she had to serve seven villages on average, one of which was situated 9km away. Another interesting fact about the area of her practice is that she did not lead a single birth in a relatively populous Kralovice that had around 3,000 inhabitants and was situated only 2km from Kožlany where Hůlková lived. Undoubtedly, Kralovice must have been served by her competitors.

In the previous paragraphs, we have outlined the characteristics of obstetric practice typical of areas with the same share of industrial and agricultural production. We will mention them again in the end and use them for comparison.

The practice of birth assistants in localities with prevailing industrial production

Industrial regions are the last type of localities through which we will characterize obstetric practice in the Czech lands in the first half of the 20th century. Three birth diaries from these areas have been preserved, but their informational value is limited by certain facts. The diaries of two birth assistants, Martha Schubertová and Elza Hilschová, were created in Hrádek nad Nisou, which gives us a unique opportunity to compare the activities of two competitors in one place and study how they divided the local clientele, but on the other hand, it limits the variability of the analysed data. The third diary, which was kept by Jana Mukenšnáblová in Chlumčany u Plzně, is considerably fragmental, which makes it impossible, for example, to describe the performance of an assistant more precisely or to follow some indicators. Nevertheless, the extracted data offer some interesting information.²⁴

We have already mentioned that the birth assistants, Martha Schubertová and Elza Hilschová, worked in Hrádek nad Nisou.²⁵ Hrádek was an industrial locality with a textile proto-industry already developing in the early 18th century. The 19th century saw the development of industrialization accelerated by the connection of the region of Hrádecko to the railway that linked the Austrian monarchy with Saxony. In the first half of the 20th century, there were lignite mines as well as textile and chemical factories. Both the assistants had their practice in the region with a high proportion of workers who were mostly of German nationality, likewise the assistants. Schubertová studied a course in Vienna and commenced her practice in 1911 when she was twenty-three. Three years later, she married a paver, Emil Beitlich, but the marriage was probably not happy because, in 1921, she is registered herself as divorced and childless. In 1924, she entered into her second marriage, this time with a worker, Edmund Schubert, but this marriage also remained without children. It is evident from the occupation of the spouses that Schubertová's social status remained low even after the marriage and she undoubtedly secured part of the family budget by practicing midwifery. This is further evidenced by the fact that the family would move very often, which means that there were insufficient means to build a solid background. It is reliably documented in Schubertova's diaries, which map her more than thirty-year

²⁴ For the detailed analysis of these diaries, see Vladan HANULÍK, *Porodní bába Martha Schubertová z Hrádku nad Nisou*, in: Hana Stoklasová, Porodní bába? Asistentka?: porodní deníky z let 1898–1954, Pardubice 2018, pp. 102–117; Vladan HANULÍK, *Porodní bába Elza Hilschová z Hrádku nad Nisou*, in: Ibid, pp. 162–181; Milena LENDEROVÁ, *Porodní bába Jana Mukenšnáblová z Chlumčan*, in: Ibid, pp. 219–228.

²⁵ The depository of her diaries: State District Archives in Liberec, collection of Schubert Marta, Card 1; State District Archives in Liberec, collection of Hilsch Elsa, Card 1.

practice, that she led 874 births, although the number must have been higher because the series of diaries is incomplete.

The second assistant, Elza Hilschová, came from the same social stratum, but when her mother married a second time and ran a china shop together with her husband, the social status of the family improved. After the marriage with a joiner, Albin Hilsch, Elza gradually gave birth to three children, and in 1911, between her first and second delivery, she took a midwifery course in Vienna. She finished the course in 1912 and went on to commence her obstetric practice. Later, this decision of hers proved very far-sighted since, in 1914, Elza's husband had to enlist and birth assistance made it easier for the family to survive the difficult years of World War I. After the war, Albin founded a small joiner's workshop that the family ran until 1946 when, due to the decision on the expulsion of Germans, Elza had to terminate her practice, the joiner's shop was confiscated and the family forced to leave Czechoslovakia. Those Hilschová's diaries which have been preserved come from 1920–1946 and document 575 childbirths.

We have almost no information on the last of the trio, Jana Mukenšnáblová from Chlumčany. We do not know when and where she was born, nor do we know where she attended the course and when she commenced her practice. In any case, at least the area of her practice suggests what her practice might have looked like. Chlumčany and Dobřany, where she mainly worked, were industrial areas. There were coal mines and large deposits of kaolin, and the population consisted of workers who mostly claimed German nationality. Mukenšnáblová's diaries have been preserved with many gaps in the twenty years between 1921 and 1941; 298 births could be proved reliably, which is the least in all the analysed diaries.

If we are to comment on the performance of the assistants in industrial areas, we have to rely on the diaries of the midwives from Hrádek, i.e. Schubertová and Hilschová. Charts 7 and 8 show us the number of births in which they assisted. Owing to the fact that they both worked at the same period of time, their performances can be well compared, although Hilschová's diary lacks the data for the World War I. It is evident in case of Schubertová that the number of her assistances at the beginning of her carrier fluctuated greatly, but the cause for that remains unknown. Perhaps she had another job, or her activities were limited by her husband whom she later divorced, but it remains interesting that while the midwifery activities of the other assistants stagnated during the war years, in 1917 and 1918 Schubertová assisted much more than at the beginning of her career. However, the reasons remain unknown. From the year 1920 until the 1940s, the number of childbirths in her diary is continuous being around 40 assistances per year, which shows

²⁶ State District Archives in Plzeň-jih, registered office in Blovice, collection of Mukenšnáblová Jana, 1921–1941.

that after her second marriage, her obstetric practice had stabilized and she performed it regularly. The rapid increase comes in the 1940s, which corresponds to the increase in births rates in the Czech lands during World War II. The maxim was reached in the last war year during which Schubertová led almost eighty births and she would probably have reached the same number in 1946 too if she had not been made to terminate her practice and leave Czechoslovakia.

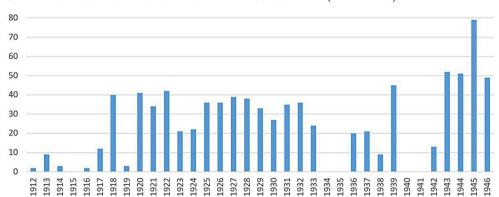


Chart 7 Number of births delivered: Martha Schubertová (1912–1946)

The diary of Elza Hilschová has been preserved since as late as 1920, and although the continuous numbering makes it clear that she also assisted in the previous period, it is complicated to confirm the number of births as the diary is fragmental. In the case of Hilschová, there is a particularly interesting fluctuation in the number of deliveries from 1924 to 1925 when they increase rapidly. It is very difficult to estimate the reason because the diary shows a gap for this period, thus making us reliant on the continuous numbering only. She may have assisted in a medical facility, which would have increased the number of assistances significantly, but it is also possible that she just made an unintentional mistake in the numbering. Since the late 1920s, the number of Hilschová's assistances decreased without even reaching ten deliveries in some years, which might have been linked to the onset of the economic crisis that hit the light industry in German borderland with very strong intensity. The number of birth assistances increases again towards the end of the war, but as in the case of Schubertová, this promising growth is interrupted by the forced termination of obstetric practice and getting to a concentration camp.

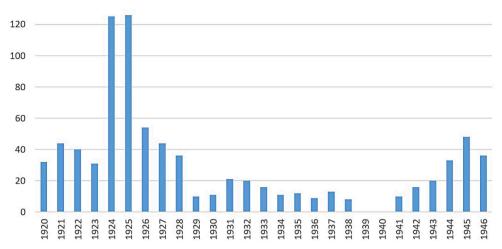


Chart 8 Number of births delivered: Elsa Hilschová (1920 –1946)

Any attempts to determine the development in the number of births in Jana Mukenšnáblová's diaries are complicated by the fact that the diaries are not kept continuously and contain numerous interruptions. It was only possible to determine the number of assistances for the period of 1921–1923, as shown in Chart 9. However, it just becomes evident that during the three years, Mukenšnáblová assisted in a rather high number of births that reached about 50–60 per year despite some stiff competition in the area. This suggests that the local working class was characterised by a high birth rate and Mukenšnáblová worked hard because the income from her obstetric practice was a substantial and probably the only source of her livelihood.

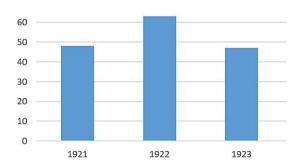


Chart 9 Number of births delivered: Jana Mukenšnáblová (1921-1923)

The diaries reveal what the social composition of women in labour in these industrial localities looked like. We have the best-documented data from Martha Schubertová although it was impossible even in her case to establish the social origin of all the women

in labour since about one-tenth of the sample was missing. Almost 50% of mothers came from working-class families and about 35% stated to be housewives, which makes it difficult for us to determine what their husbands did for living, although we may assume that the women took care of the family smallholding. This might be confirmed by the low proportion of farming population that covers mere 5% in the diary, which is quite low even in an industrial locality. About 10% of mothers stated that they belonged to the craft class. Likewise in all the other localities, intelligentsia's representation was about five best-documented.

Regarding Hilschová, we only have data from the war period, i.e. from the period of 1941–1946. About 50% of her clientele were workers and craftsmen, about 10% was made up of the farming population. In Hrádek, Hilschová seems to have served more affluent clientele than her contemporary, Schubertová, because her statistics include almost 20% of middle-class clientele.

Jana Mukenšnáblová's diary shows that she probably served the poorest. Over 50% of fathers had an unqualified profession, while another 15% belonged to the lower agricultural class. The sole traders together with qualified employees made up for about 25% in her statistics while traditionally, the share of the intelligentsia was low at about 5%.

Concerning the family status in Hrádek nad Nisou, we may say that it corresponded to the character of the German population of the Lutheran religion. It is evident in the case of Schubertová and Hilschová that the society was strongly secular because about 30% of mothers had their children out of wedlock, and about 20% of them were single mothers, the remainder being the divorced and widows. We find out in case of Jana Mukenšnáblová that despite the high share of working class, the diaries only contained below 4% of single mothers, which is surprising. Perhaps such a low number may be due to not always conscientious record keeping.

The not very favourable social structure of the population reflected itself significantly in the mortality of both the children and mothers. The most stillbirths and deaths in puerperium were recorded in Jana Mukenšnáblová's diaries, where the figure reached 7%. It is the highest mortality found in the analysed diaries, and it testifies to the poor health of local population. Furthermore, Mukenšnáblová recorded the highest maternal mortality of 1%, which is a high number, namely in comparison with agricultural areas where maternal mortality was around 1‰. Both Schubertová and Hilschová recorded the death of only one woman in labour, which in total was 0.1%. The number of stillbirths and deaths in puerperium corresponded to how the two assistants had divided their clientele. Schubertová, who provided service to the lower social strata, showed relatively high infant mortality of 6.3%. Hilschová, whose clients were more likely to come from higher strata, recorded 3.7% deceased infants, which was a propitious number corresponding to the situation in agrarian localities.

Moreover, the age of the women in labour and the number of their deliveries was similar in both Hrádek assistants; 60% of children were born in the first three age cohorts, i.e. before the mother was thirty. Schubertová, who provided service to socially weaker women in labour, showed a higher number of mothers in the lowest age cohort of 16–20 years (7%), whereas the same figure in case of Hilschová was only 4%. The other childbirths were evenly distributed within the higher age groups, while only 5% of women in labour gave birth to their children after the age of forty, which is typical for industrial areas of this type. It could imply that even the number of deliveries per mother was not high. However, this hypothesis cannot be supported by any of the diaries because they do not record the number of childbirths per woman.

Regarding these indicators, Jana Mukenšnáblová's statistics are far above the average. The lowest age group of 16–20 years records 12% of mothers, which is an unusually high number, the highest of all the analysed diaries. This was reflected in the number of mothers at the end of the age scale since Mukenšnáblová's diaries only contain four mothers (1.3%) who delivered their children after the age of forty. This corresponds to the number of deliveries which shows a gradual decrease in the number of children per family since almost 90% of deliveries fall on the first to fourth child, the fifth to tenth delivery being recorded only rarely.

Although we have already indicated that the health of women in labour and their children was poor in these regions, it was not reflected in the presence of physicians in childbirths at all. This confirms the hypothesis that the working-class population did not have the money for medical treatment and that the assistants were able to cope with many complicated cases on their own. The most medical interventions, almost 21%, were recorded by Martha Schubertová, which corresponds to the fact that she provided service to poorer clients who were not in the best health condition. All these interventions were justified, i.e. they addressed some birth abnormalities, although once the presence of the physician was only passive. Elza Hilschová's statistics were more optimistic since her clients came from higher strata of society. The physician was called to 10% of births, his presence only being passive in four cases (0.7%). Although Jana Mukenšnáblová also provided service to poor clientele, she called a physician in less than 4% of cases, and his intervention was always justified.

Lastly, we will answer the question of what the area of birth assistants' practice in industrial localities was like. Generally speaking, the density of the population was quite high, so even if there were more midwives in the area, it was not necessary for them to travel to labouring women to remote villages. This is clear when we compare the areas of practice of Martha Schubertová and Elza Hilschová. Although they both worked in Hrádek, they had divided the local clientele without much difficulty. Schubertová would mainly

provide service to Hrádek mothers, who accounted for 45% in her statistics. The other women lived in the immediate vicinity, i.e. within 3km, so it was enough for Schubertová to serve Hrádek and four nearest villages.

Hilschová had her clientele distributed over the same villages (perhaps except Oldřichov na Hranicích where she, unlike Schubertová, led only a few childbirths), although more evenly. While Schubertová most assisted in Hrádek, Hilschová led the same number of births both in Hrádek and Donín (under 200 assistances) and also in Loučná and Dolní Sedlo (under 100 assistances).

Jana Mukenšnáblová's district included almost the same number of villages, i.e. about five, but more distant from Chlumčany, where she would mainly work and assisted. The normal walking distance of Mukenšnáblová to the women in labour was 5km. Interestingly, she omitted populous Dobřany with about 6,000 inhabitants who were in the care of local birth assistants.

Comparison of obstetric practice in individual localities

Although the analysed diaries are characterised by considerable variability, they contain some indicators which, at least in rough outline, describe the obstetric practice in specific economic and social conditions.

However, it would be rather misleading to compare the performance of the respective birth assistants because this was strongly influenced by family and social circumstances that varied from case to case. In general, the assistants in agrarian localities provided their services to fewer women over larger areas of practice, which harmed their income related to the energy expenditure on running obstetric practice, but on the other hand their practice was facilitated by a conservative nature of farming population with relatively sound health.

This was significantly reflected in maternal mortality. The birth assistants in agrarian localities recorded infant mortality not exceeding 5% and maternal mortality of only 1%. The conditions in industrial areas differed considerably in this respect since infant mortality reached 6-7% and maternal mortality was 0.5-1%.

Furthermore, it was typical for agricultural localities that mothers would deliver more times, unexceptionally even eight to ten times per family, unlike industrialized regions with a noticeable trend in reducing the number of children, which is particularly apparent from the diaries kept after the establishment of Czechoslovakia. The mothers recorded here mostly gave birth to one to four children, whereas only about 5–10% off all births accounted for the fifth to tenth child.

It was rather difficult to describe the tendencies related to the age of labouring women because although it might seem that the women in agricultural localities had their first child earlier because they had a more stable background, the diaries indicate rather an opposite trend. However, we may state with certainty that the lower number of deliveries in industrial localities was the reason why, in comparison to agrarian areas, there were fewer women who would have a child after the age of forty.

Interestingly, some indicators have also been affected by the nationality of the population that brought about certain differences. The German working-class environment had a significantly higher number of single mothers reaching about 20–25% while the same ratio in the Czech environment was only 5%. Apparently, the different habits of the German population also influenced the presence of physicians in the physiologically normal childbirths. While the Czech assistants would usually call the physician only in case of some complications, the diaries of German assistants often recorded a passive presence of a physician in a normally proceeding delivery. However, this was also affected by the onset of modernity and the proximity of larger towns from where the trend spread.

If we should pay attention to the characteristics typical for the regions with the same share of industrial and agrarian production, we have to state that they are difficult to define because the data herein are very mixed and we can observe the tendencies typical for both industrial and agricultural localities.

However, all the diaries provide one common testimony, i.e. that obstetric practice could provide the assistant with long-term financial support. These women were almost always balancing on the edge of poverty, especially if they did not have a husband who would have contributed to the family budget. Not only did they face considerable competition, whether in the form of their qualified or non-qualified colleagues, but their situation was not made any easier by the state either, whether we speak of monarchy or the First Czechoslovak Republic. The state authorities completely failed to define basic conditions of midwifery, such as the areas of practice or the fees for medical acts. "The women with a case and hope" thus visited their labouring clients day and night without much chance that their profession would ever bring them a real social ascent.

Summary

From Midwifery to Birth Assistance: Midwives' Practice in the First Half of the 20th Century in the Czech Lands

The research analyses ten series of birth diaries in the pre-printed form in which the midwives recorded information on the course of deliveries. The diaries are kept in Czech and Moravian archives and provide data on obstetric practice in various regions of the Czech lands. That makes it possible for us to compare the circumstances under which the midwives worked as well as their performance in different geographical, demographic, and social conditions, both in industrial and agrarian areas. The obtained data provide answers to several questions, e.g. the beginnings of assistants' careers, their performance, the social structure of their clientele, as well as medical aspects of obstetric practice and cooperation with physicians. All the diaries provide one common testimony, i.e. that obstetric practice could provide the assistant with

long-term financial support. These women were almost always balancing on the edge of poverty, especially if they did not have a husband who would have contributed to the family budget. Not only did they face considerable competition, whether in the form of their qualified or nonqualified colleagues, but their situation was not made any easier by the state either, whether we speak of monarchy or the First Czechoslovak Republic. The state authorities completely failed to define basic conditions of midwifery, such as the areas of practice or the fees for medical acts. "The women with a case and hope" thus visited their labouring clients day and night without much chance that their profession would ever bring them a real social ascent.