The Lord my God Has Given My Wife a Child

Childbirth in 18th-Century Transylvania*

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HISTORIANS SAW the lives of women and children as something of little historical importance, belonging to the private world, while they focused on exposing the public world of men. The second half of the 20th century changed that perception, due to the development of social history, and the unknowns of the population came more into view, so that there was an increasing interest to present the women in some other roles, as wives and mothers. This paper fits in this new current as it is an attempt to reconstruct contemporary attitudes toward childbearing and parenthood in Transylvania, presenting especially prenatal and postnatal care of women. We are aware of the fact that most researchers of childhood and family are concerned with finding evidence to support their arguments rather than evaluating their sources. So there are those who are writing about the tears and others who are writing about laughs, both making creative interpretations sometimes on the same narratives. The aim of this paper is not to argue about the fact that there were or there were not parental feelings or childcare, but rather to let our very few and barely representative data talk for themselves. The study aims at interpreting a wide range of published and unpublished biographical works, in the form of correspondence, diaries, autobiographies and other family papers, written by members of the political elite or by representatives of the nobility and civil servants from the 18th century, such as: György Bereczk (Vízaknai), Kata Bethlen, Miklós Bethlen, Kata Csáky, Mihály Cserei, György Rettegi, István Wesselényi.

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Fertility and Birth Control

A woman's social existence was influenced by her maternal potential.² Pregnancy also changed her position in the family, because children were regarded as God's gift, and in the same time, as a wife's proof of love and devotion.³ But birth also had a pragmatic meaning as it redefined the roles of men and women (assuming the role of father, and respectively mother – women became wives in order to become mothers),⁴ ensuring the integrity of accumulated goods, and providing ample opportunities and perspectives to extend the already existing kinships.⁵ Through centuries childbearing became the foremost obligation of the wife, her fertility scoring, in fact, her usefulness in the community. She became a responsible and respected member of a group only after fulfilling the biological and social tasks assigned to her by God. Religious faith provided a context and a meaning for the work of motherhood; furthermore biblical texts promised salvation through maternity.⁶

In light of the previous statements, it appears that the lack of fertility was seen as an evil, a source of shame, primarily for women. Sterility was usually considered to be the wife's fault. A childless woman was labelled a barren woman, and: the higher their social position was, the unhappier was their lot. In fact women were not accepted by their husband's family until giving birth to a child.8 Ecclesiastical discourse followed, of course, to obscure the negative role of the woman, explaining sterility as a curse of God, and not something that could be controlled by human beings. Yet the community regarded barren women with suspicion, as they are presented in most cases without maternal love, greedy and notably nasty. Moreover Transylvanian literature shows us some cases in which sterile women did anything to get "in possession" of a child. The most striking case is found in the memoirs of Kata Bethlen, who, after the death of her husband, had to watch how her children were taken away from her, because of religious consideration: "I started to be disrupted by Count Haller, driven by his wife of course, Zsuzsanna Apor, who never had children, and wanted to take one with force both from God and from me."9

So those who failed to fulfil this task (giving birth) were disregarded, rarely sympathized, but never fully accepted, they remained for a lifetime subjected to insults from both men and fertile women. Or as Thomas Aquinas had said, the woman who never gives birth is more tortured than one who has passed several times through travails.¹⁰

Regarding the Transylvanian memories, we rarely find cases in which couples, in particular because they belong to noble or bourgeois families, would have preferred a small number of survivors. More so, the sources elucidate that, after birth, women were not excessively abused by educational tasks. The studied

memories show that noble families always hired wet nurses for their children, and after weaning they requested a governess's services. Rich women, having abandoned maternal breastfeeding, had an entirely different reproduction pattern. The period which could offer the women some safety lacked, most of the noble women giving birth every two years, so the number of offsprings was quite high in the early modern Transylvanian society.

The situation was however different for women who had extramarital relations or came from some modest social structures. Giving birth was a Christian sacred duty, in total consonance with the divine will, to avoid it (not getting pregnant) was considered already a sin. ¹² But motherhood was approved only within marriage. By definition "adultery was a crime committed only by married woman, while married man was guilty only of fornication." ¹³

There were three ways to negatively influence birth: the actual methods of contraception, abortion and infanticide. The abandonment of the newborn was considered to be infanticide, despite the fact that the chances of survival of a forsaken child could significantly increase. 14 The law provided penalties for both cases: "How to punish a woman who kills her child? It is known that in some cases the woman or girl deviate from the right Christian path and get pregnant, and as to hide her misery, kills her baby immediately after birth and buries it where she can. These persons were earlier led to the archpriest and were judged, being forced to confess their sin. After that, the women were taken to a monastery to spend their remaining days fasting and mortifying their flesh, but the law condemns them to death today."15 The law was just as severe with men who killed their illegitimate children: "The poor priest from Leta (Léta) has impregnated a servant, when he observed that it was time for the girl to bear, he has threatened her not to dare give him away, but she didn't listen to his words. He got a knife and stuck it in the womb of the woman who fell immediately, but in the meantime the girl had sent for the midwife: when the woman saw the stabbed body, she immediately sent for the priest. [...] The man was convicted, decapitated and then impaled."16 Capital punishment, in cases of infanticide, was prohibited in a decree of 1769, which stipulated that women who had resorted to these arrangements are not criminals, and they should not be beaten or humiliated in public, drawing attention to the fact that "seduced women" had to be protected and if possible sustained until birth.¹⁷

According to Farkas Cserei's law corpus, within the Transylvanian jurisdiction they did not only punish those women who had killed already born babies, but also sentenced the cases in which a foetus with soul was killed (abortion), by the preparation of medicines or squeezing the belt, jumping, tumbling etc., and doing other practices that jeopardize the child's life, accelerating the birth. In such cases the woman is sentenced to death "totally justified." Physicians blamed mainly contemporary midwives, who were entitled to hold various remedies

in their pharmaceutical cases, including solutions or herbs for abortion. ¹⁹ If women committed abortion before the child in the womb *was animated with soul*, they got off without death penalty, but they had to stand the consequences of their sin. Opinions about the moment when the child began to have a soul vary across Europe. Thus, in England it is considered that the *reception of a soul* took place on the 45th day after conception, when also the mother could feel the child in her womb. ²⁰ Medical treatises and juridical registers reflect that, according to early modern Transylvanians, the soul moves into the body at different times for the two sexes: for boys at 40 days after conception, and for the girls only after 80 days. A few centuries ago it was thought that the child was soulless 45 days, if it was a boy, and 50, if it was a girl. ²¹ These debates over the soul were then suspended by the sentence of Pope Clement XI. He was an ardent follower of the cult of the Virgin Mary and in particular of the Immaculate Conception. According to him the foetus has soul already from the moment of conception, reason for which any abortion falls within the category of infanticide. ²²

Pregnancy²³

HE PERIOD preceding the birth is rarely mentioned in the memoirs we have studied, and we know surprisingly little about the actual situation. However, pregnancy is more present in the mixed annotations of family chronicles. Each family had concrete ideas about how they had to care for a pregnant woman. She had to be: "first of all filled with devotion to God, realizing the significance of the moment," than "take care to not idle too much or eat much, she must be balanced, active, walk as much as she can, but not run, because she can miscarry, still to move, in order to keep the child small, because if she lives too quietly, the child will get fat, risking then to kill them both". Pregnant women also had a severe diet, they were prohibited to eat food hard to digest such as beef or rabbit; then milk, cabbage, rice, chestnuts, etc... instead they should eat prunes, figs, chicken, ginger, apple with honey, but it was strictly forbidden to drink, especially dry wines.²⁴ These prohibitions and recommendations were kept in every family, especially the noble ones, all seemed to have special recipes for their pregnant wives and daughters.²⁵

Women in early modern Transylvania, in spite of being aware of the importance of prudent behaviour during the nine months, did not perceive pregnancy as a disease, and sought to carry out the same activities they normally did. So the physical work, riding or long journeys were seen by women and doctors too,²⁶ as beneficial activities to the mother and the foetus as well, considering that physical activities contribute to an easier birth. However at the end of the century

more physicians pronounced their fears about the consequences of these wanton acts. Thus, in Mátyus's opinion in premature births (in the 7th or 8th months) pregnant women were the only ones to blame for causing miscarriage because of demanding physical labour or an irregular diet.²⁷ It is curious that he also recommended pregnant women some really shocking therapies. In his view, women would be wise to stay for as long as they could in cold and wet rooms, asking their relatives to sprinkle the walls with cold water to create an ambiance as cool and moist as possible. Moreover, in the opinion of the physician, pregnant women should be carried in carriages because the speed of horses and the chaotic motion of the vehicle would help the child to find the ideal position for birth. Riding was also not out of the question.²⁸ Bethlen's wife fell ill because of such a travel in the winter of 1680: "in very rough weather, cold wind, snow and blizzards, although in a glazed carriage, but as there was in the old glazed carriages a seat that stood on four iron legs, and on this occasion it had not been put in, the cold came up through the hole and pierced my wife in the womb and loins, as the doctor maintained. Suffice is that she developed stones, was confined to bed and suffered terribly from them for four whole months until she bore a son. It was God's miracle that this child came into the world fit and well, and that his mother too recovered."29 This child was her last child, although Ilona Kun survived six years after this incident.

Another controversial and extremely dangerous example is the case of István Wesselényi's wife, who was forced to bleed in the last month of pregnancy. The relatives' stupor (and even the surgeon's) shows that extreme interventions, such as bleeding or purgation were contraindicated in the last months of pregnancy. Kata Bánffi happily survived the surgery, bringing to life a healthy baby a few days later. In the perception of contemporary medicine, bleeding was one of the medications commonly used in the first months of pregnancy. Medical opinions were divided on being bled after the fifth month. Some have become reluctant to this method, as apparent from the notes of Apáczai, 30 others indicated this intervention even in the ninth month, in order to prevent the pain of childbirth. 31

Birth

IVING BIRTH was a private event, but with public significance. The child came into the world in a private place in the room where his parents lived, but surrounded by an assistance consisting of relatives and neighbours, so his birth became a public act. Hungarian women have accepted the presence of their husbands at birth in a few extreme cases, as were those in which physical force was required. Although the birth was a well organized

and highly populated event, men were not welcome. They could make themselves useful by preparing the water, calling the midwife or, in extreme cases, the priest and the doctor; otherwise they spent time with friends or servants.³² Witnessing the event was one of the main roles of women. Almost each time young children came to the world, they did so under the eyes of their grandmothers or aunts. Many of the studied memories or daily annotations prove this. We are familiar with some cases when wives did not give birth at home, but at relatives' or friends' houses. On these occasions not only the grandparents were present, but often neighbours or family friends, being present primarily out of curiosity. Those who were not married were excluded from childbirth, and those who had not borne children themselves were "deemed to lack authority."³³ Thus, the birth was a very crowded public event.³⁴

We can reconstruct the actual birth from the contemporary medical treatises. According to them, when the pregnant woman entered labour, she had to lay on her bed, waiting for about an hour, after that she began to walk around the room, or scream, or kick different objects, gestures which were supposed to release tension and prepare for the birth itself. Sources indicate that, in Transylvania, in most cases women gave birth sitting, except the obese ones, which were recommended to be left on four legs, "like animals", because it was too difficult to them to sit on the chair for a long time. 35 So women bore children sitting, standing, squatting or kneeling. It sometimes happened that they used each of these positions. It was important that the obstetrician or the midwife did not quarrel with mothers about appropriate ways of birth, "due to custom or instinct to choose the most convenient way". With respect to the seats, they could be drilled, resembling some classical flap seats, or constituted from two parts, with an opening angle varying from case to case. Midwives were sitting before the women on their knees; the future mothers were dressed in long robes, so nobody could have any direct, visual contact with the genitals of women. The midwives held a piece of cloth or put a vessel under the seat holes.³⁶

We have two records and multiple descriptions that show that Transylvanian women delivered sitting on a chair. It is difficult to reconstruct, we suspect that it was a traditional birthing seat with support, or two chairs placed so as to support women's thighs. On the ground were different litter sheets, as well as straw and the midwives were kneeling before the pregnant woman waiting for her child. However, some cases show that newborns had suffered injuries because of these methods. Rettegi's son remained marked for life because of the carelessness of the midwife: "Look what misery has happened to us, when my poor wife felt that the time is coming, she sat down, but once out, the child fell into the pot placed under the seat, hitting his lips, which started to swell, and unfortunately it remained so." At the time when Rettegi wrote his memoirs, Zsigmond was

8 years old. Rettegi's subsequent notes show that his boy's lips had never returned to their original form, despite the fact that Zsigmond spent several years abroad consulting different doctors. In addition to its ugly wound "and so I wonder how could so many love him," the swelling often caused, especially in childhood, dangerous diseases, fevers and bizarre chills. The mistake considered insignificant at the moment proved to be an indelible stigma.

In the absence of internal notes, we have no clear picture of the birth, and due to the fact that women have not left traces of their existence, from documents written by men we can rarely decipher the mysteries of this event.³⁸ The only exception being of course György Bereczk, who being a doctor, felt entitled and obliged to be present at the birth of his first child: "On November the 2^{nd} , 1699, at six o'clock in the evening, my young wife gave birth to a child, that she had carried over 10 months, she lived some unimaginable ordeal, nobody left her for a moment from 10 am, and when the time finally arrived, the foetus was already dead in her womb, and she seemed to have eased a little, but she was running again in horrible pain for 12 hours. I had no hope, when, much to the astonishment of those who were present, following the intervention of the surgeon Matthias, but with the inexperienced hands of an ignorant midwife, they have taken out of her a child, it was fat and thick, an inch wide and long as three hands, but God manifested His grace upon us leaving us at least the mother."39 Not so lucky was the Bethlen family: "That winter my mother too died [...] she had been pregnant and the child died because of her illness, then she too because of the dead child. Had I been listened to, the doctor who attended her would have aborted her to remove the dead child, but my father and the doctor dared not or would not do it."40 The case is even more curious because, as English or German social historians pointed out, the ecclesiastical legislation offered instructions in cases of caesarean section. 41 If the child had died in the womb of a woman, the midwife was required to perform caesarean section, pulling the baby through a cut made on the left side of the abdomen. If women were not strong enough to perform this procedure, the doctor, or the husband had to intervene. 42 However, the surgical intervention presented a great danger to the mother's life.43

Nevertheless, the description provided by Bereczk is unique in Hungarian historiography, memoirs and journals passing over on intimate aspects, remaining silent when it came of pain experienced by women, usually writing a few words such as: "it was a prolonged labour", or "easy confinement", "the birth-throes lasted more ...". Even in the absence of descriptions, the narrative sources show that during those terrible hours, the men implored God for mercy and grace, to keep their partners and the unborn children alive.⁴⁴

The first weeks

◀ HE HISTORICAL child of Philippe Ariès and Lawrence Stone was born to parents who have watched with indifference their helpless children and placed them immediately to a servant, usually an unwise nurse. We find the same perception of the early modern childbearing at Edward Shorter or Elisabeth Badinter, 45 according to which, in pre-industrial age, the infant mortality rate reaches so high that it is impossible to believe that there is proper care or maternal concern for the child.⁴⁶ Well, European diaries, especially the Puritan ones, prove the exact opposite attitudes. Authors such as Stephen Ozment, Sulamith Shahar and Linda Pollock, all have different opinions on the subject mentioned above. Because our paper is based on the analysis of the same class of personal documents, we are particularly interested in the work of Pollock. This adherent of continuity (Hanawalt), in her ambitious work (which has proposed rethinking 400 years of childhood), 47 analyzed a large number of personal sources, based on a well-elaborated analytical model. Her research shows us a different family. Taking into account the methodological model offered by this author, in the following pages we would present data referring to the first weeks of the child; however our sources do not offer such a positive image of childcare than the English or German personal documents.

The authors' constant interest in weaning suggests that it was of considerable importance in family life; a period of anxiety and uncertainty. Breast-feeding and weaning was one of the most frequently raised issues of privacy. Favourable conjuncture for cessation of breastfeeding appears in early modern Transylvanian astrological calendars too. The large number of references on this aspect of life makes it evident that the feeding of newborns was considered to be an act of utmost importance.

But in spite of advice from theologians or physicians, most children were not breast-fed by mothers (of course we are referring to the aristocracy). 48 Women had numerous problems for this reason. Our sources are aware of a significant number of deceases caused by breast infection. It is not surprising at all that each family offers in its medical book several remedies against breast hardening. Infections were either cured, or they caused the mothers' death, but curiously, the Transylvanian noble families did not realize the link between breastfeeding and breast infection. Doctors or midwives seem to have neglected the correlation between various breast infections in the wealthy families, and the poor, but healthy women, who did not face such problems. Despite numerous sources that refer to high mortality among young mothers, in some scholars' opinion, the truth is actually the opposite of the idea that we had. Studies have revealed that mortality caused by breast infection was not a common matter; birth had much more to do with life than with death. 49

One thing is sure, that the variety of recipes and "healing herbs" for women suffering from breast infection proves that this was one of the main reasons for death among young wives. From our sources we found out that the Governor's wife, György Rettegi's first wife, and László Wass's too, died during the postnatal period.

The high fertility in wealthy families is explained by the custom of giving children to wet nurses soon after birth, eliminating in this way the inhibiting influences of lactation on the reproduction.⁵⁰ Thus, in Wass's or Wesselényi's homes, births occurred every two years, just as in the second marriage of Bethlen. In such conditions, the presence of a fosterer was indispensable. They often moved into the home of their employers and, in some cases, became part of the extended family. In return, they were asked to show sympathy and devotion to the child they breast-fed. If they served the noble family faithfully, they could even receive gifts. Our sources revealed that finding such reliable and affectionate women was quite difficult and hazardous.⁵¹ Hiring a nurse required serious investigation, about the woman's biological features, namely the number of children she had, if they were healthy, if she suffered an abortion, etc... These women had to be healthy and clean, kept on diet to give the highest quality of milk. Most people thought that wet nurses must be affectionate, with a kind nature, because their temperament could easily be passed on to the child through their milk (which was widely believed to be blood made white in her breasts), so it was desirable for lactating women to have pleasant physical and moral qualities. Many authors preferred women who gave birth to boys; others chose the ones most resembling to the biological mother of the child, to avoid a possible gap between child and parent,⁵² and to avoid the moral corruption of the child, because they believed that the "child's character was shaped by the milk it suckled". 53

The wet nurses came usually from two categories, on the one hand they were poor women, seduced and excommunicated, who found protection and material benefits by feeding the wealthy families' children. Moving to a noble's house could be a very attractive possibility, especially for single mothers. On the other hand they could be peasant women from villages, whose child died or was given away.⁵⁴

In most diaries we find information on the nature of nurses and almost always economic data such as their salary or the gifts given to them. Most pieces of information on this subject are offered by the diary of Wesselényi. This family had hired about 20 nurses in Sibiu (Szeben) over a period of five years, but apparently none of them won their sympathy. The first girl ran away, abandoning the child and family, so that the author was forced to buy his daughter, Katica, a goat. The child could not grow with goat milk,⁵⁵ so the Wesselényis' looked for another woman, but this was caught stealing. So within one year, Katica

had three wet-nurses, she was weaned at 27 months, according to the diary annotations. About Ferko's nurse we find more information: "I've found a girl from Odorhei (Udvarhely) who was knocked up by a soldier, and had a child, but even this one was very hard to find. I gave her 20 florins per year, a shirt and a broad-cloth apron. For her child who was given up till Christmas, we paid six bushels of wheat, a pair of Saxon sandals for 2 florins. I gave her a hat and a piece of bacon for 10 pounds."56 Yet this one fled too, and Wesselényi's wife fell into depression fearing that Ferkő would not accept the new nurse's milk. Meanwhile the family had another child, a girl who, in turn, needed another nurse, so that the author paid 17 florins for Ferkő's nurse, because she did not have any living children; 14 for the one who breast-fed Máris and 12 for her child who was kept for half a year for 16 bushels of wheat.⁵⁷ The boy was weaned at 27 months, much to the despair of his mother, who "was crying because he abandoned breast too easily." The family could not rest, because soon after Ferkő's weaning, István was born, so the family again needed two wet-nurses (Máriskó was still an infant): "the nurse costs 25, a pair of boots, thin blade for a person, six butts of wheat, 2 cups of honey, two of peas and rice, a bushel of lentils, a piece of bacon and it would be more than nice from her to pay her own child's maintenance from this goods. In five years we had 20 nurses in Sibiu, but none of these creatures I found to be with common sense."58

As we can see, the first years of the child could be essentially reduced to the material costs required for hiring a nurse, the daily annotations of Wesselényi alternate from numbers and notes to anxiety, especially because children are frequently visited by the doctors. It is not surprising that the father became desperate "since we came to Sibiu, the whip of God is upon us, that nobody here has so many problems with keeping nurses than we have." This matter was delicate taking into consideration the unfavourable situation of the exile. Employing good wet-nurses was a costly business. The nurse issue was a problem which equally affected all the existing social structures in Transylvania, including the families of public officials, like the Halmágyis, every family being forced to take nurses to fill the lack of breast milk.

With regard to the weaning age, researches have revealed that the Hungarian children were breastfed for at least a year⁶⁰ (in some families like Wesselényi, Wass over two years). Practical advice was exchanged among women; they take into account factors such as the health and age of the child, the weather and the cycle of the moon.

Many authors, however, believed that for both the child's safety and for the sake of the family, children should be breastfed by their mothers: "Otherwise I have never been healthy, am not now, as I heard from my mother because of the fact that I had been breastfed for one year by a whore, of whose

unfortunate nature my parents did not know. And once when the nurse went to the loft with a wanton womanizing man, they have taken me with them, and as long as they went about their business, I was all turned up and I fell down ... and broke my ribs. I was kept lying down for one year, during which time they couldn't treat me at all. Let this be a lesson for all, especially mothers, not to keep from breastfeeding their children; if they cannot, hire someone they trust, but do not let children in the nurse's care, but take care of them personally."61

Moreover, we can read many stories regarding the unfortunate and evil character of the nurses; these women are presented in an unfavourable light, as beings who served driven only by money and the security offered by affluent families, without being either affectionate towards the child or full of gratitude to the family. Moreover, sources reveal that some nurses, in case the child left to their care died, changed the body with a living one, probably from fear of condemnation and losing salary.⁶²

Memoirs provide us with numerous examples of the nurses' ignorance and ill intention, which, because of their negligence, could lead to tragedy, as one of Kata Bethlen's children was breastfed by a woman infected with plague: "the nurse of my son Pál fell ill with plague, but we knew nothing of it, and the mess being in her womb I thought she had a hernia, but the child had a heavy night, and the nurse could not wake up, I got up and took Pál next to me. The next morning she asked me to let her leave for her home to Hărănglab (Harangláb): she had six children, who all fell ill in three days with the plague, but we did not know about these things either. My child did not fall ill from the infected milk or from her womb's heat, although they have slept together and the new nurse slept in her infected clothes and did not catch up the plague. And this wet nurse has not once milked milk in my hands, when she felt that it was too hot for the baby."63 Happily, this time, no one in the family or the household was infected with the plague. However we also have a record which proves that the family had a wet-nurse who was so beloved, that she was mentioned even in the pages of Kata Bethlen's will.64

HE PERSONAL narratives we have analyzed revealed some aspects of childbirth and childcare, such as: childbirth was a social act, and women gave birth with the company and support of other women among whom the most important was the midwife. So childbirth took place in the domestic sphere under female authority. Our study shows that it was normal for all ranks of society to employ wet nurses, because suckling by the mother was not the normal feeding method for middle- and upper-class children. But the image of the nurse, just as the midwife's, was ambiguous or negative.

We are aware that such an investigation cannot provide a complete picture of confinement or childbearing, especially because our sources are doubly indirect: first, because they are written, second, because they are written, in general, by males more or less related to the dominant culture. This is the reason why we prefer not to make general statements regarding family life. However, Transylvanian memoirs reveal that there are no diaries or memoirs which do not reflect on the husband's fear and concern in times of crisis, or on the family's agony when it came about children, the parents being aware that the health of their offspring depends on their care and attention.

Notes

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- Patricia Crawford, "The construction and experience of maternity in seventeenthcentury England," in Women as Mothers in Pre-industrial England: Essays in Memory of Dorothy McLaren, ed. Valerie Fildes (London and New York: Routledge, 1990), 9.
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- 5. Cressy, Birth, 15.
- 6. Patricia M. Crawford and Laura Gowing, Women's World in Seventeenth-Century England (London and New York: Routledge, 2000), 194.
- 7. Crawford, "The construction," 19.
- 8. Zita Deáky and Lilla Krász, Minden dolgok kezdete. A szülés kultúrtörténete Magyarországon (XVI-XX. század) (The beginning of all things. The cultural history of childbirth in Hungary [16th-20th Century]) (Budapest: Osiris, 2005), 47.
- 9. Kata Bethlen, *Önéletírása* (Autobiography) ed. Mihály Sükösd (Budapest: Magyar Századok, 1963), 73.
- 10. Shulamith Shahar, *Gyermekek a középkorban* (Childhood in the Middle Ages), trans. Katalin Király (Budapest: Osiris, 2000), 71.
- 11. Dorothy McLaren, "Marital fertility and lactation 1570–1720," in Women in English society 1500-1800, ed. Mary Prior (London and New York: Routledge, 1985), 23.
- 12. Cressy, Birth, 20.
- 13. Crawford, "The construction," 9–10.
- 14. Deáky and Krász, Minden dolgok kezdete, 101.
- Farkas Cserei, A magyar és székely asszonyok törvénye (The statute of Hungarian and Szekler Women), Biblioteca Centrală Universitară "Lucian Blaga" (Lucian Blaga Central University Library) Cluj-Napoca, Department of Special Collections, Mss. 500, 112v.

- 16. György Rettegi, *Emlékezetre méltó dolgok* (Things worthy of remembrance), ed. Zsigmond Jakó (Bucharest: Kriterion, 1970), 159.
- 17. Deáky and Krász, Minden dolgok kezdete, 107.
- 18. Cserei, A magyar, 113r-113v.
- 19. Gyula Magyary Kossa, *Magyar Orvosi Emlékek* (Hungarian medical memories) (5 vols., Budapest: Magyar Orvosi Könyvkiadó Társulat, 1940), vol. 4, 123.
- 20. Cressy, Birth, 45.
- 21. XVI. századi magyar orvosi könyv (Hungarian medical book from the sixteenth century), ed. Béla Varjas (Cluj-Napoca [Kolozsvár]: Gróf Teleki Pál Tudományos Intézet, 1943), 368.
- 22. Deáky and Krász, Minden dolgok kezdete, 112.
- 23. The parts about *Pregnancy* and *Child-birth* have appeared in an extended version in Andrea Fehér "When the time is coming...Childbirth in Eighteenth century Transylvania," *Studia Universitatis Babes-Bolyai. Historia* 1 (2011): 135–149.
- 24. XVI. századi magyar orvosi könyv, 365.
- 25. Gergely Gellén, Orvosságos könyve mindenféle nyavalyákról embereknek és lovaknak betegségeiről, méhekről és az esztendőnek hónapjairól. Írtam én Gellén Gergely Losonc városában anno 1680 (Medicine book about people's illnesses and all sorts of horse and bee diseases, and about the months of the year. Written by me, Gergely Gellén in 1680 in the town of Losonc), Biblioteca Centrală Universitară "Lucian Blaga" (Lucian Blaga Central University Library) Cluj-Napoca, Department of Special Collections, Mss. 679, 102–118; The Diary of the Cserei Family, Biblioteca Centrală Universitară "Lucian Blaga" (Lucian Blaga Central University Library) Cluj-Napoca, Department of Special Collections, Mss. 658.
- 26. "minden örömöm elegyes volt bánattal". Csáky Kata levelezése ("All my joy was mixed with sorrow". The correspondence of Kata Csáky), ed. Klára Papp (Debrecen: Erdély-Történeti Alapítvány, 2006), 162. Kata Csáky's letter from 1778 to her son-in-law.
- 27. Physician Mátyus is the author of the first Hungarian dietetic work (1766). In his book he dedicated a chapter to pregnant women and young mothers giving them specific advices on eating habits in order to maintain the good health of the foetus and newborn, and of course themselves as well.
- 28. István Mátyus, "Diaetetica, az az: a jó egészség megtartásának módját fundamentumosan eléadó könyv," (Diaetetica: an explanatory book about how to keep good health), (Cluj-Napoca [Kolozsvár]: Páldi, 1762–1766) in *A jó egészség megtartásának módjáról. Szemelvények Mátyus István Diaetetica valamint Ó és Új diaetetica című műveiből* (On how to keep good health. Excerpts from István Mátyus's works: Diaetetica and Old and New Diaetetica), ed. Mária Szlatky (Budapest: Magvető, 1989), 357–359.
- 29. Miklós Bethlen, *The Autobiography of Miklós Bethlen*, trans. Bernard Adams (London: Kegan Paul, 2004), 321. The work used for this translation is Miklós Bethlen, *Élete leírása magáról*, ed. V. Windisch Éva (Budapest: Szépirodalmi, 1980). The Autobiography has been translated to romanian: Nicolae Bethlen, *Descrierea vieții sale de către el însuși*, trans. Francisc Pap (Cluj Napoca: Casa Cărții de Știință, 2004).
- 30. József Spielmann, "Mechanikus materialista elemek Apáczai Csere János élettani és orvosi felfogásában," (Mechanical materialist elements in the physiological and medical conception

- of János Apáczai Csere) in *A hazai orvostudomány történetéből* (From our History of Medicine), ed. József Spielmann (Bucharest: Editura medicală, 1957), 100.
- 31. Deáky and Krász, Minden dolgok kezdete, 157.
- 32. Ibid., 127.
- 33. Crawford and Gowing, Women's World, 194.
- 34. Alan Macfarlane, *The family life of Ralph Joselin. A seventeenth century clergyman*, 2nd ed. (New York: Norton, 1977), 85.
- 35. XVI. századi magyar orvosi könyv, 376. Otherwise researchers revealed the same recommendation for obese women in the whole Europe; Ozment, When Fathers Ruled, 108.
- 36. Deáky and Krász, Minden dolgok kezdete, 163.
- 37. Rettegi, Emlékezetre, 70.
- 38. Cressy, Birth, 16.
- 39. György Vizaknai Bereczk, *Naplófeljegyzései* (1693-1717) (Diary: 1693-1717), Biblioteca Centrală Universitară "Lucian Blaga" (Lucian Blaga Central University Library) Cluj-Napoca, Department of Special Collections, Mss. 693, 117r–117v.
- 40. Bethlen, The Autobiography, 180.
- 41. The first medieval mention of caesarean sections is not in medical literature, but in synodal legislation, because it was important not as a medical, but mostly as a spiritual life-saving procedure. This explains why the directions on how to perform such operations are placed in the sections dealing with baptism. Kathryn Taglia, "Delivering a Christian Identity," in *Religion and Medicine in the Middle Ages*, eds. Peter Biller and Joseph Ziegler (York: Boydell & Brewer, 2001), 86–87.
- 42. Shahar, Gyermekek, 68.
- 43. Ozment, When Fathers Ruled, 110.
- 44. Cressy, Birth, 28-29.
- 45. Elisabeth Badinter, *A szerető anya. Az anyai érzés története a 17-20. zázadban* (Original title: Mother Love: Myth and Reality: Motherhood in Modern History), trans. András Szekeres (Debrecen: Csokonai, 1999), 309.
- 46. Edward Shorter, *The Making of the Modern Family* (New York: Basic Books, 1975), 168.
- 47. Linda Pollock, Forgotten Children. Parent-child Relations from 1500 to 1900 (London and New York: Cambridge University Press, 1983).
- 48. McLaren, "Marital fertility," 28.
- 49. Cressy, Birth, 30; Ulrike Tancke, Bethinke Thy Selfe in Early Modern England: Writing Women's Identities (Amsterdam and New York: Rodopi, 2010), 123.
- 50. Jacques Gelis, "Individualizarea copilului" (Individualizing the child/L'individualisation de l'enfant), in *Istoria vieții private* (A History of Private Life / Histoire de la vie privée), vol. 5: *De la Renaștere la Epoca Luminilor* (From Renaissance to Enlightenment / De la Renaissance aux Lumières), eds. Philippe Ariès and Georges Duby, trans. Constanța Tănăsescu (Bucharest: Meridiane, 1995), 15.
- 51. Crawford and Gowing, Women's World, 203.
- 52. Shahar, Gyermekek, 105.

- 53. Christine Peters, *Women in Early Modern Britain*, 1450-1640 (New York: Palgrave Macmillan, 2004), 66.
- 54. Zita Deáky, "A szoptatás, a dajkaság és a csecsemőhalandóság kérdései az orvostörténeti forrásokban" (Breast-feeding, wet-nursing and infant mortality in medical sources), *Erdélyi Múzeum* 1–2 (2003): 190.
- 55. Family historians revealed that in the early modern European society, parents feared to give their children animal milk, especially in the first month. This could explain Wesselényi's concern to find wet-nurses for his daughter. Ozment, *Ancestors*, 67.
- 56. István Wesselényi, *Sanyarú világ, Napló 1703-1708* (Wretched World. Diary: 1703-1708), ed. András Magyari (Bucharest: Kriterion, 1983), vol. 2, 537.
- 57. Different registers attested the fact that those nurses who had children were more expensive, because they had to pay for their children's care. Deáky, "A szoptatás," 191.
- 58. Wesselényi, Sanyarú világ, vol. 2, 594.
- 59. Ibid., vol. 2, 398.
- 60. Katalin Péter, "A gyermek és a gyermekkor a történetírásban," (The child and childhood in historiography) in *Bölcsőtől a koporsóig* (From cradle to coffin), ed. Tamás Faragó (Budapest: Új Mandátum Kiadó, 2005), 67.
- 61. Mihály Cserei, *Históriája* (His history), ed. Gábor Kazinczy (Pest: Emich Gusztáv Könyvnyomdája, 1852), 103.
- 62. Rettegi, Emlékezetre, 330.
- 63. Kata Betlen, Önéletírása, 60-61.
- 64. Széki Gróf Teleki József özvegye Bethleni Bethlen Kata grófnő írásai és levelezése. 1700-1759 (The Writings and Correspondence of Count József Teleki's widow Countess Kata Bethlen. 1700-1759), ed. Lajos Kardoss Szádeczky (Budapest: Grill, 1922), vol. 2, 563.

Abstract

The Lord my God Has Given My Wife a Child. Childbirth in 18th-Century Transylvania

It is the purpose of this study to show first, how maternity/fertility was socially perceived in 18th-century Transylvanian society, and second, how memoirs describe our ancestors' child-bearing experiences. Therefore we have outlined some of the practices related to fertility concepts, birth and confinement. In order to complete the picture offered by the memoirs, we have also used legal or medical treatises outlining the historical, social and medical milieu of early modern Transylvania.

Keywords

memoirs, social history, child-bearing, wet-nursing, childbirth, fertility, parenthood