

What to Expect When You're Expecting **– in the Greco-Roman World**



University of Oslo, Institute for Archaeology, Conservation and History.

Master thesis, spring 2022, 60 credits

Amanda Josefine Pedersen

Abstract

This thesis argues that gender norms and gender roles affected ancient gynaecology and obstetrics. It argues that gender relations created preferences of medical solutions and moral limitations to what solutions were desirable and attainable for women. Starting with puberty the thesis approaches the topic in depth through pregnancy and giving birth, as well as the role of the midwife. The thesis employs gender theory. Further, it examines both archaeological material and ancient texts as premise to discuss the relevance of gender in ancient medicine. This will result in a broader reconstruction, focused on the women's role in her own sexual and reproductive health. A central angle to feminist history and gender studies, important to further explore.

Key words: Ancient Athens; Ancient Rome; Ancient women; Ancient Gynaecology/Obstetrics; Gender study

Acknowledgements

I would like to thank my academic advisor Daniele Miano for all the help and guidance he have provided over the last year.

I would like to thank Søren Handberg for all his support in the beginning phases of this project, and my fellow students for all the encouragement and good company. Specifically, would I like to thank Josefine Horak Elders, for almost daily discussions; Anastasia Bertheussen for keeping me accountable and keeping my emotions in check when I was on the breaking point; and Astrid Torsvåg Sirevåg, for always having the time for always having the time for a coffee break and a laughed.

Lastly, I would like to thank my family, which have had to deal with a stressed-out student over the last few months.

Thank you to my entire support system, without you, this would not have been feasible.

Table of contents

Abstract:	i
Acknowledgements	ii
Chapter One - Introduction	1
1.1 Background – Gender in Antiquity	3
1.2 Background – Ancient Medicine	10
Chapter Two – Before and Now; Research History and Theoretical Framework	15
2.1 Feminist Critique and Gender Theory	15
2.2 Ritual Theories	20
Chapter Three - Girl, Woman, Wife	23
3.1 The Girl	23
3.2 Menstruation and the Wondering Womb	29
3.3 Virginity and Marriage	33
3.4 Fertility and Health	37
Chapter Four - The Helping Hands of Others	39
4.1 The Midwife	39
4.2 The Physician	44
4.3 The Healing Sanctuary of Asklepios	47
Chapter Five - A Woman's Choice	53
5.1 Abortifacients	53
5.2 Well G5:3 and Mortality Rates	55
5.3 Infant Exposure, and Infanticide	60
Chapter Six - Concluding Remarks	63
6.1 Conclusion	65
Figures	66
Bibliography	70

Chapter One - Introduction

“Men say that we live a life free from danger at home while they fight with the spear. How wrong they are! I would rather stand three times with a shield in battle than give birth once.”

(Euripides *Medea* 245-255).

I think it is fitting to start this thesis where it began for me. While reading Euripides's *Medea* I came to the lines quoted above. Euripides' *Medea* is the continuation of Medea and Jason's story from the myth of Jason and the Golden fleece (See *Apollonius of Rhodes, Argonautica*). It starts not long after Jason leaves Medea to marry the king of Corinth's daughter. Medea is heartbroken. The quote is part of her longer speech to the people of Corinth. As an exile from her home, she has no family to shelter her, and no friends to support her in Corinth. She explains how trapping marriage is for women, herself included. Further she asks for a favour, if she finds a way to punish the ones that hurt her, she asks the people to keep it secret (Euripides *Medea* 210-270).

I have always found Medea's speech to be powerful. On that day, the part that stood out to me was the last line quoted above: *“I would rather stand three times with a shield in battle than give birth once.”* (Euripides *Medea* 255). Medea would rather fight in a battle than be pregnant and give birth; and not once, but three times.

Medea was written by Euripides in 431 BC (Kovacs 1994:277), the same year the Peloponnesian war started (Amadou 2017:25), in a time where battles were a regular occurrence. The Athenian military was organized by classes and tribes. Annual casualty lists were published for each tribe. One such inscription remains in its entirety. It dates to 458-59 BC, a year the Athenian military was in six active battles. 176 names are on the list. Approximately 1,760 would have died in battle that year if the other tribes lost the same number of men (Smith 1919). Furthermore, death is not the only result of war on a person. If we exclude the mental toll warfare has on soldiers, we are still left with physical injuries that might be life altering if severe enough.

The quote made me wonder what it would have been like for ancient women. If the odds and tolls of war, times three, was in Medea's mind a better option than giving birth, how scary must it have been? Giving birth today in a hospital, surrounded by highly educated medical

professionals, modern equipment and medicine is still scary. 17.4 per 100,000 women died a maternal death in 2019 in the United States (Hoyert 2019), double the 8.7 per 100,000 women that died a maternal death in the United Kingdom (9.8 per 100,000 in Ireland) in 2018 (Knight and Tuffnell 2018). Faced with obstetric emergencies, ancient doctors were almost helpless (Demand 1994:71). So, what would those numbers have been for antiquity?

The World Health Organizations definition of maternal death is as follows: *The annual number of female deaths from any cause related to or aggravated by pregnancy or its management (excluding accidental or incidental causes) during pregnancy and childbirth or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy* (Cresswell 2022). Sue Blundell puts maternal deaths in antiquity to one in five pregnancies (Blundell 1998:49). However, we cannot know the actual extent of maternal deaths, and it is not my intent to try. Though a possible maternal death is quite important in understanding the emotions that lead the women to seek help or support it is not the only worry they would have had.

Ancient Greece and Rome were androcentric societies, whereas gynaecology and obstetrics is by nature the opposite. It is therefore interesting to examine how the ancients navigated the medicine and science surrounding reproduction. In my thesis, I will ask how gender affected ancient gynaecology and obstetrics.

The methodological approach will be a case-based comparative analysis. A focus on a smaller number of cases contained within the same gynocentric situations will make it possible to gain a deeper understanding and to draw generalizations for the complex unit (Porta 2008:205) of women in ancient Greece and Rome in relation to gender and their own reproductive health. It is not by any means my intent to universalize. At most, I hope to have results that are translatable to similar context in other societies and times.

The thesis starts off with two background parts, 1.1, introduces gender roles, and gender expectations in the ancient world, and is based on the second wave feminist argument that the patriarchy eventuate in the subordination of women. 1.2 introduces some ancient medical thoughts that will be further explored through the thesis. *Chapter two – Before and Now; Research history and Theoretical framework* is dedicated to a short research history and the theoretical approach of gender studies that the thesis employs. Following are four chapters, that roughly parted to follow the chronological order of the chains of events in a young girl's life,

starting with puberty. *Chapter three -Girl, Woman, Wife* examines in its first part 3.1 the social puberty of young girls, and possible transitional rites they may have been a part of. 3.2, examines the physiological side of puberty, and the dangers of having a uterus. Everything in a girl's life is to educate her into being a good wife and mother. 3.3 examines the value put on virginity through excerpts of Catullus poems, and 3.4 examine the concept of fertility.

Women were however not alone in their health care, and *Chapter four – The helping hands of others*, examines exactly that, the help and care given by others. 4.1, and 4.2 examines the role of the midwife and that of the physician. 4.4 examines temple healing, with a focus on the healing sanctuary of Asclepius at Epidaurus.

Despite the efforts and focus put on fertility and pregnancy, the children themselves were not always wanted. *Chapter five* examines the options available to women who did not want their children, either by not conceiving in the first place in 5.1, or by infant exposure and infanticide in 5.3. 5.2 examines mortality rates with a focus on Well G5:3 in Athens, and a young girl from Pompeii. The last chapter is the thesis concluding remarks.

I will keep within the geographical area surrounding the Mediterranean, mainly Athens and Rome, as most writers originate, lived, or wrote of those two places. Furthermore, I will mainly keep to the Classical period to the early Roman Empire (5th century BC – ca. 200 AD). However, when relevant, I will draw from material outside my defined time and place to show continuity and quantity, or in the cases of few remaining artefacts where examples exist in the greater Roman empire or near east.

I have used Owsei Temkin's translation of Soranus' gynecoogy, and R. Scott Smith and Stephen M. Trzaskoma's translation of Hyginus' fabulae. Unless stated otherwise, have I consequently used Loeb Classical library for translations of the ancient sources.

1.1 Background – Gender in Antiquity

Ancient Greece and Rome were androcentric patriarchies, which have traditionally been understood to be solely led by men with singularly male interests in mind. In the last few decades, this notion has slowly been challenged. I will introduce the everyday relationship ancient women had with society and the opportunities they would have had. I will base this chapter on the argument that the androcentrism of these patriarchies eventuated in the

subordination of ancient women. Second wave feminists were concerned with this relationship between women and the patriarchy; “*power relations which structures the subordination of women, through institutions such as the family, education, religion and government*” (Gilchrist 1999:2).

The ancient Athenian and Roman societies have traditionally been thought of as divided into two - the public sphere and the private sphere - outside the confines of the Greek *oikos*, or the Roman *familia*, and inside it (Kamm and Graham 2015:148). Andrew Wallace-Hadrill (1988) are among the scholars who have challenge this black and white divide. In his article *The Social Structure of the Roman House* he argues that the divide between public and private was a scale, affected by the social hierarchy. Persons with higher status were afforded the privilege of more privacy and a closer relation to the *paterfamilias* (Wallace-Hadrill 1988:58-59).

It has traditionally been assumed that gender roles followed the same divide of the public and private spheres. The public sphere, as well as the government was the male domain. The interpretation that in Athens political rights were restricted to native Athenian men over the age of eighteen (JACT 2017:146) have recently been challenged by Josine Blok. Due in part to the male bias of ancient sources, as most surviving sources were written by men, and that more men held positions of office, the male participation in government left more traces than the female participation (Blok 2017:208). Despite there being positions of office that seem to be held exclusively by men, and the limitation on a prominent and large participation of women, Josie Blok concludes that women did participate in the government (Blok 2017).

The other three categories explored by second wave feminists: family, religion, and education, are more relevant to this thesis. In this section, I will briefly discuss female education, as well as give a quick overview of religion and family in relation to women. The latter two, however, are quite central in multiple discussions and cases to come and will be explored more thoroughly throughout the thesis.

Oikos is a central term for studies of ancient Greece. It is a complex term with many different translations. However, they all could be placed under the umbrella of ‘home.’ The *Oikos* is the house and other properties connected to the household, it is the economy connected to said household, and it is the family members (Demand 1994:2; JACT 2017:148-149; MacDowell 1989). The male landowner was the head of the *oikos*. Therefore, its survival was dependent

upon a male heir. To ensure the survival of the *oikos* over a gap in the agnatic line of succession, a daughter would become heiress. She would become 'attached' to the *oikos* until she married and bore a son who would inherit. By law, the heiress was to marry a male relative on her father side, usually her uncle or his son (Blundell 1998:40; Demand 1994:3-4). Even if she was already married, she was subject to this law. In the fourth century Isaeus when situating about this law remarked that "*many men who have already been living with their wives [were] deprived of them [in that manner]*" (Isaeus 3.64. G translated by Lefkowitz and Fant 2016:80).

Motherhood was the most significant role a woman would have had. If she gave birth to a son, she had secured the next line in the family. Having a male heir to inherit the family farm was also important for the state. Spreading the wealth among the community by having the land given to the next generation, instead of ending up in the hands of the wealthy, was a way to keep civil unrest at bay (Blundell 1998:41-42).

Like the Greeks, the Romans had the term *familia*, that would have encompassed everyone subject to the authority of the *Paterfamilias*, the oldest living male of the family, including his wife, children; both biological and adopted, as well as anyone in the male line, like grandsons (Kamm and Graham 2015:148). This authority went a step further with female relatives. It was believed that girls were naturally wild beings, prone to outbursts: excessive, uncontrolled behaviour and needed a guardian to give her guidance. Children had guardians, often the father or another male relative. In the cases of women however, after marriage, it was her husband who would become her guardian (Blundell 1998:16). The guardian could even have been a state official (Kamm and Graham 2015:153).

In Emperor Augustus' Rome (27 BC – 14 AD), freeborn women who had three or more children were removed from their guardianship (Kamm and Graham 2015:153). This was to encourage a cultural and moral renewal of society. Women were signs of health and civic moral, and the new reform gave the Romans a way to imagine themselves as the heirs of the traditional moral that gave them the empire (Sebesta 1997:529-530).

Theophrastus, a student of famous philosopher Aristotle, wrote in fourth century that "*A woman should not look [at others] nor be seen.*" (Theophrastus Fr.157 translated by Lefkowitz & Fant 2020:67). And Aristotle himself, also commented on women's silence in his *Politics*: "*As the poet says of women, 'Silence is a woman's glory'*" (Aristotle *Politics* 1260b19). From

their point of view, ideally, women were silent. Her role in society was that of the unseen, and unheard housewife. However, this is not the only point of view found in ancient literature. Preceding Aristotle is his teacher, Plato, who argued for the education and inclusion of women in both state and other professions (See chapter 4.2 in this thesis).

Moreover, men would have felt it necessary to keep a careful eye on their female relatives. It was commonly believed in a lack of sexual self-control in females (Sissa 1990:92). Even putting herself in situations of temptation could bring dishonour and shame on her *oikos* (Demand 1994:147). The Romans held the same view that women belonged in the home. Even small tasks outside the home, would fall into the male domain and responsibility (Kamm and Graham 2015:151).

Religious practises was the exception. Excluded from the public sphere and equal participation in social life, women still had a prominent role in ancient religion (JACT 2017:122). For example, there were male and female Gods and Goddesses, as well as priests of both genders (JACT 2017:86), and as will be discussed in chapter three, young girls had multiple sacred duties. Further, the act praying played a large part of a woman's life, and she would make offerings at every important event in her life, as well as participate in the annual religious festivals.

While it was possible to stay at home as the unseen and unheard daughter and wife, to achieve the ideal of being 'respectable' for upper class and elite women (JACT 2017:60), it was not the reality for all women. If we put a pin in the occupation of prostitution, and woman in medicine, women did have other occupations. Terracotta reliefs from Ostia, a harbour city about 25 km outside Rome dated to the 2nd century BC, show women vendors (Lefkowitz and Fant 2016:270).

Additionally, in Rome close to Via Castilina and Via Prenestina, and the later Porta Maggiore, are the remains of the Bakers tomb. The tomb belongs to Eurysaces, and his wife. It is presumed to be dated to 50-20 BC. The tomb inscriptions mentions his wife, Atistia (Petersen 2003). While the inscription does not mention her direct participation in his business, her involvement has been speculated (Lefkowitz and Fant 2016:269; Petersen 2003:251). Moreover, the corpus of Latin inscription includes mentions of women being, among other occupations, dealers of

silk, grain, and vegetables (CIL 6.9683; 6.9891 in Dolansky and Raucci 2018:48-51), indicating that women had an active part of commercial life in the Roman world.

In both ancient Greece and Rome, the way to learn trades was through apprenticeships. Many would have had the opportunity to have an apprenticeship with a master, both young boys and young girls (Laes 2015:475-479; Lefkowitz and Fant 2016:267). Still, asymmetric learning from mother to daughter was a large part of the education of girls, especially regarding household duties, and handcrafts. Further, girls received training in moral and sense. This is commonly understood as learning moderation in various aspects, like eating and drinking, as well as obedience and marital fidelity (Wolicki 2015:305-306).

One master could have had multiple apprentices at the same time. However, mass schooling did not start until the nineteenth century. In the earlier periods, a word for school did not exist, as the children would go to the teacher of whatever subject they were to be taught (Griffith 2015:47). In the comedy *Clouds* by Aristophanes, there is the phrase *εἰς καθαριστοῦ*, which is directly translated to ‘into the art of playing the lyre.’ It is used when the neighbourhood boys are going to learn how to play the lyre (Aristophanes *Clouds*:964). Teaching could take place anywhere, and where dependant on the teacher. Therefore, if the teacher moved away or died, the learning opportunity could have gone with them (Cribiore 2015:149).

In Ancient Greece, boys started their education at age seven, where one of the subjects would have been writing (Griffith 2015:47; JACT 2017:171). The level of literacy in the population is difficult to determine, and it is further difficult to determine what gender those who could read and write had. The archaeological remains of writing equipment are few and are not gender specific. Additionally, both genders are depicted on vase paintings with writing equipment. The earliest depiction of a woman reading is the Painter of Athens 1836, a white-ground *Lekythos* dating to 460 BC. The woman is seated on a chair with a scroll tilted so the viewer clearly can see the Greek letters. The letters do however, not make up anything, despite the woman depicted being literate, the artist was probably illiterate, with only the knowledge of who the letters looked (Dillon 2013:398).

A red-figure *kylix* painted by the Painter of Bologna depict two girls. One of them is holding the others hand leading her somewhere, while the other holds in her hand a writing tablet. The *Kylix* known as the Painter of Bologna 417 dates to 460-450 BC (Dillon 2013:397). It has been

interpreted as two girls on their way to a teacher to learn to read and write. This has been used as evidence for female literacy. On the other hand, Mark Golden (1990:74) interprets the *kylix* as a joke, that it, along with similar depictions, are of *hetaerae* training. Hetaerae were expensive, highly educated prostitutes who would participate in intellectual conversations with her clientele.

Jenifer Neils (2012:163) acknowledges this interpretation "*Since Athenian girls did not go to school, could this be a parody of boys going to school? Another joke like the female courtship scenes on the exterior?*" (Neils 2012:163). However, she disagrees. The outside of the *kylix* depicts six female couples. Neils points out that the inside and the outside are meant to be seen together. The homoerotic relationships fits better with Spartan culture. Sparta and Crete were two of the few places that took pride in having an educational program where both genders participated (Neils 2012:163; Plato Protagoras:342d; Pomeroy 2002:1). A likely interpretation is that the girls are spartan, and the intent with the vase was to depict two aspects of the life of spartan women (Neils 2012:163-164).

There might still be some validity to Mark Golden's interpretation of the depiction as humorous. Where female education, in more ways than just literacy was prevalent in Sparta, the education of boys was the clear priority in the rest of the Greek world (Dillon 2013:396-397), and girls' education in Athens was more informal (JACT 2017:171). Parents did not legally have to educate their children, and they would have paid the teacher for his services themselves (JACT 2017:151). This results in clear class differences.

Education was more flexible in the Roman period. Some schools would have been open for both genders, and many parents would have had teachers come to their home to teach both their sons and daughters. However, girls were married earlier than boys, so education would have been more inconsistent and varied for girls. Still, girls that would grow up to become working women would need at least some degree of literacy and numeracy to function in their occupations (Hemelrijk 2015:293-296).

Female education was met with varied reactions. On the one hand, the philosophers argued for female education, on the grounds of personal qualities over gender (Lefkowitz and Fant 2016:67). On the other hand, educated women were met with scepticism. They were accused of, among other things to be pretentious, meddlesome, and especially promiscuous. Their

education distracted them from fulfilling the ideal of chastity, modesty, and domesticity, turning them into unbearable and unfaithful wives (Hemelrijk 2015:297).

Some women would have had an education, and most would have participated in religious activity outside the home. Consequently, blurring the line of belonging in the public and the private sphere. Women like Sappho, the most famous woman poet of the ancient Greek world gives us an opportunity to read from the perspective of a woman (Blundell 1995:82). However, breaking this gender divide did not always end well for the women. Aspasia, a woman originally from Miletus, in what is Turkey today, came to Athens in the mid-fourth century BC. At home, she had received a good education. And as a non-Athenian she was brought up with different social norms and were free from the traditional enclosure young Athenian women were under. She ignored the Attic morals that would have kept her in the private sphere and distinguished herself in the public sphere with her intellect and mind for politics (Glenn 1994:181-183).

She has been credited for opening an academy for young wealthy girls, but she has also been accused of teaching young girls to become courtesans, like she herself has been accused of being one (Plutarch *lives:Pericles:24:6-7*). She was also out on trial for impiety. Aspasia's part in the public sphere did not come without consequences, and at the expense of her respectability and reputation (Glenn 1994:184-186).

Aspasia was not from Athens, neither was Sappho. While some written text from women have survived, most was written by men. There is therefore gender bias from antiquity to consider. Moreover, Athens was the epicentre of the ancient world, and many cases, the texts were produced by Athenian men or by men based in Athens. The societal norms reflected in the written sources does not exist everywhere in the ancient world. Case in point, Aspasia came from modern day Turkey to Athens, and brought with her a different set of morals and norms.

There is an intersectionality to gender studies, and there are more dichotomies than female-male to consider. As Aspasia illustrates there was differences between the people who was native to Athens, and later Rome, and those who were immigrants. There are further differences between the classes and peoples social standing. Most of our knowledge is from, and about the upper classes. While this thesis is attempting to create a general impression of how gender affected gynaecology and obstetrics, it leans more towards the upper-class experience.

I based this chapter on second wave feminist argument that the androcentrism of these patriarchies eventuated in the subordination of ancient women, through the institutions of government, family, religion, and education. Traditional interpretations fits well with this statement. On the one hand, ancient government was mainly male ruled, and limited female participation. However, as Josine Blok (2017) showed in her book, there were women actively partaking in government, but the male bias could be the reason for few traces of them. Women were to some degree subordinate to men, for example, Emperor Augustus, used the role women filled as mothers to encourage a change in society. Women plays an especially significant role in the family to bring forth the next male in the agnatic line of succession. Still, she was under careful observation, and under the rule of her male relatives, or husband.

On the other hand, women had more freedom and responsibilities in religious contexts. Additionally, there is concrete evidence for women's participation in commercial life. And even though it is impossible to know what the prevalence of female literacy and education was, we can conclude that at least some women had a working knowledge of reading, writing and maths.

Still, as Margarethe Bieber (1961:9) states "*Attic morality banished women from public life*". The overall male dominance in society and the belief that women were naturally weaker, created a subordination that prevented women from having a public voice. Furthermore, it was not well received when women did partake in the public sphere. Consequently, most of our knowledge of the lives of ancient women comes from their male counterparts; from the written word and art of men (Blundell 1995:10; Millender 2009:355).

1.2 Background – Ancient Medicine

The first mention of a doctor is in the *Iliad* (JACT 2017:192). Written under the name Homer, the *Iliad* are commonly dated to the mid-8th century BC, and it tells the story of the battle of Troy (Homer *Il*:4.220; Wyatt 1924:4). Healing co-existed with divine intervention; gods caused and healed disease (JACT 2017:192). This co-existence continued as Ancient Greece and Rome had a medical pluralism that included multiple and diverse systems of healing (Draycott 2019:5). Religion, magic, and medicine were intertwined, as well as effected by social ideals (Sissa 1990:112-114). There was very little distinction between professional medicine and

popular medicine. Additionally, one could treat oneself or utilise ‘temple healing’, by seeking the intervention of the gods, particularly Asklepios.

Ancient medicine is a large field of study, and this chapter will by no means include all. I will give a brief overview of ancient medical thought relevant to the view of the female body and with regards to gynaecology. Further discussions on physicians and midwives are included further on in the thesis (See chapters 4.1 and 4.2 in this thesis). Likewise, the uterus, menstruation, and childbirth take up larger parts in following chapters (See chapters 3, 4 and five in this thesis).

Greek scientific thinking has its origin in the sixth century BC, in Ionia, at the coast of modern Turkey. In the following centuries, theories that attempted to explain the universe were produced. In addition to the main concerns of cosmology and meteorology, there was an interest in the development of humans. Moreover, sexual differentiation was a topic of discussion. By the fifth century, this interest became the beginning of the study of medicine (Dean-Jones 1994:5).

Central for studies of ancient medicine is the Hippocratic corpus. The texts referred to as the Hippocratic corpus is a heterogeneous collection of around sixty medical texts. Hippocrates of Cos, known as ‘the father of medicine’, did write down some of his teachings, but we do not know which of the treaties were his (Dean-Jones 1994:5). And despite its namesake, it is possible that none of the treaties were written by Hippocrates’ himself (Totelin 2021:2). The texts are anonymous, mostly dating to the late fifth and early fourth century BC and were likely collected in Alexandria in the third or second century BC (Dean-Jones 1994:6).

The corpus include a wide variety of topics and content, including case histories, professional monograph and treaties on trauma and emergency medicine, neurology, pathology, and gynaecology. (Dean-Jones 1994:6; Kalachanis and Michailidis 2015:1). In common for the texts are their shared theoretical position (Flemming 2013:570; King 2001:21). They explain the origin of disease from natural causes rather than supernatural, like gods and daimons (Demand 1994:34). However, not all authors in the corpus are contemporaries of one another, and consequently they do not agree on everything. For instance, there is disagreement on the number of vital fluids of the body, the humours, and what they consists off (Dean-Jones 1994:6). There is still many points where they do agree, especially in the gynaecological

treaties (King 2001:21), and Lesley Dean-Jones (1994:11) is of the opinion that unless an author specifically challenges another, it can be assumed that they are in agreement.

Ancient medicine was dependent upon empirical data, and the word of the patients (King 2001:160). One Hippocratic author links the seven Greek vowels to the seven senses:

“there is hearing for sounds, sight for the visible, nostril for smell, tongue for pleasant or unpleasant tastes, mouth for speech, body for touch, passages outwards and inwards for hot or cold breath. Through these comes knowledge or lack of it”.

(Hippocrates *regiment 1.23*)

By using their senses the healer was able to figure out what was wrong with their patient (King 2001:40-41). Most of the Hippocratic writers were practicing physicians, that collected data while treating patients. However, their observations were included if favourable to their theories, and rarely considered if they contradicted them (Dean-Jones 1994:7-8). Despite there being account of surgery in the Hippocratic corpus, most only every had surface level interactions with the body, rather than the deep structures. Dissections of humans was not widely practised. Physiology was therefore in large part based on logic (Dean-Jones 1994; Rousselle 1988:5).

Other schools of medical science existed contemporary to the Hippocratic corpus, like the Sicilian school, which derive from the Pythagorean philosophical and the Empedoclean traditions. Rather than the humours that the Hippocrates was concerned with, their focus was on *pneuma*, breath (Dean-Jones 1994:13). The Sicilian school was the grounds for discussions of sexual abstinence and sexual health between medical writers during the first century AD (See chapter 3.3 in this thesis).

Out of the around sixty Hippocratic texts, ten are gynaecological in nature. These are among the earliest of the treaties (Dean-Jones 1994:11). The interest of female anatomy, physiology and pathology derived from the women’s purpose of reproduction and the value of procreation (Sissa 1990:44).

Some philosophical principles were incorporated into the study of medicine, namely the idea and relevance of temperature differences (Dean-Jones 1994:8). Women differ from men, not

only in the respect of their sexual organs, but on a deeper level. They had another temperature than men, and while the Hippocratic authors agree on this point, there is no consensus in whether women were warmer or colder than men. To some, women were warmer because her blood was hotter, saying that “*the uterus will become warm from the blood remaining there for a time, and provoke warmth in the rest of the body*” (Hippocrates *nature of the child* 4). The heat of the female body created menstrual blood from food (Dean-Jones 1994:45). To others, women were colder because they lost heat once a month when menstruating (Dean-Jones 1994:45-46). Aristotle followed the Sicilian tradition, that along with *pneuma* (Dean-Jones 1994:13), believed in *physis*, that also ascribed the colder nature of women to menstrual blood leaving the body once a month (Dean-Jones 1994:46).

The humors was important to the Hippocratic authors, and were typically the grounds for diagnosing illnesses, and thereafter treating them (Demand 1994:74). This differs when it comes to gynaecological issues, and the humors are not the main concern in the gynaecological treatises. For women the humor of blood was dominant, and the organ of the uterus regulated it (King 2001:69). Therefore, the uterus had a central role in female health care (Dean-Jones 1994:225).

The flesh of females was considered spongier than that of males, thusly taking up more moisture, making them wetter than men. The nature of the female flesh allowed for more blood created from food in the stomach to be absorbed than the male body did (Dean-Jones 1994:55).

For the Hippocratic physicians balance was key to health. This was difficult for women as their bodies was in a constant flux between excess and evacuation of blood. The womb was considered fragile, and the risk of interrupting the balance it was in control of, was ever-present (King 2005:156).

To summarize ancient Greece and Rome had medical pluralism. Health care could be found in the form of temple healing, self-treatment, or by the hands of medical professionals. Ancient medicine relied on empirical data to draw their conclusions. The Hippocratic corpus is central to studies of ancient medicine. It was written by practicing physicians, and dates to the late fifth and early fourth century, and among its varied contents are ten gynaecological treatises. Unlike the rest of the Hippocratic corpus there is many points of agreement among the authors of the gynaecological treatises.

The interest in female anatomy, physiology and pathology derived from the value of reproduction. Women differ from men, and in their health the humor of the blood was the only one that was of importance. Difference between the sexes was in relation to blood. The female body was spongier than the male, thus taking up more blood from the stomach. And despite disagreements the blood affected female body temperature, either making them hotter or colder than men, depending what school you asked. The uterus regulated the humor of blood, and with menstruation the female body was in a constant flux of excess and evacuation of blood, making it fragile and at constant risk of imbalance.

Chapter Two – Before and Now; Research History and Theoretical Framework

“*For centuries, half of the ancient world remained invisible*” is the tagline on the back of the 2015 paperback edition of Sarah B. Pomeroy’s book *Goddesses, Whores, Wives & Slaves* (Pomeroy 2015). An inaccurate, and perhaps slightly exaggerated statement that works very well to introduce the twofold challenge of women in classical studies.

The introduction to this thesis was based on the argument that ancient gender norms eventuate in female subordination. To some point said subordination has left consequences. Ancient women did not themselves leave many remains, in form of written work or art. That does not mean that they are truly invisible, it just means that one need to look in a different place to find them, to read between the lines and find their quite voices in the sea of male shouts. The other side of the challenge is, for a long time, there was a lack of interest in listening for their whispers.

With woman’s scholarships major changes was forced upon both disciplinary paradigms and existing scholarly work (Scott 1996:153). It forced the discipline into a greater pluralism, where feminist topics are viewed as important, and no longer considered bad science (Dean-Jones 1994:1; Gilchrist 1999:1-3). The history of feminism, and gender studies, can, and have filled large volumes. I will therefore only give a brief summary of the main stages of the evolution of feminist thought, the four waves. I will give a brief introduction to the theoretical framework of gender theory, that is directly relevant to this thesis. As the research history goes hand in hand with the theoretical framework, and they evolve symbiotically, it is advantageous to approach them together.

2.1 Feminist Critique and Gender Theory

“*We hope to bring the subject of gender into the domain of archaeological discourse*”, is the second to last line of the introduction to Margaret W Conkey and Janet D. Spector’s influential article, ‘*Archaeology and the study of Gender*’. When they published their article in 1984, there was no systematic works of archaeological study of gender. While archaeologists did not steer away from gender structures and gender behaviour there was a serious problem with assumptions and statements of ‘facts’ about gender. Archaeology of the 1980’s lacked the framework to conceptualize and research gender (Conkey and Spector 1984:1-2). It is safe to say that Margaret W. Conkey and Janet D. Spector’s wish came true, and a magnitude of

articles focus specifically on the study of gender, with titles not far from the examples of what asked for in the article (Conkey and Spector 1984:2). I will present a brief summary of the feminist critique of archaeology, and gender theories while leaning on the wave analogy of the evolution of feminist thought.

While Conkey and Spector's work is considered the official start of gender archaeology and brought with it awareness and interest in gender in archaeology internationally, they were not alone with their feminist movements. Not even in archaeology were they first. There was awareness and interest in gender prior to 1984, especially in Scandinavia. Five years earlier was the conference, '*Were they all men?*' held, questioning the assumed male dominance of prehistory. The papers from the conference were however not published until 1987 (Moen 2019:22).

Furthermore, archaeology lagged behind other disciplines in regard to feminist studies, and Conkey and Spector's article was written at a time where the world outside archaeology was concerned with social structures and feminism (Gilchrist 1999). Gender Archaeology like many social sciences evolved symbiotically with feminist thinking and experienced a paradigm shift in the 1970's and 1980's (Gilchrist 1999:1). Feminist thought have been perceived as advancing in traditionally three waves.(Gilchrist 1999:2) And as of 2013 an active fourth wave has been recognized by feminist scholarship and journalism (Chamerlain 2017:1).

The first wave is commonly defined by the struggle for the right to vote for women, with its peak in 1880's to the 1920's. The 'suffrage movement' resulted in the public emancipation of women, greater rights of education and employment, as well as political rights (Gilchrist 1999:2). The use of the wave analogy persists in illustrate progression of feminism, despite the criticism and disagreements regarding it. The struggle for the right to vote for women were not the only event or issue tackled by first wave feminists. In the United Kingdom, issues of sexuality, economy and childcare were also topics entertained. The wave analogy simplifies the depth of the movement. The movement that occurred all over the world, not specific to the first wave, was responses to cultural conditions that was not necessarily the same everywhere. One wave is really many waves together advancing feminist thought (Cochrane 2013).

The second wave emerged in the late 1960's with a focus on personal issues of equality of personal fulfilment, sexuality, and reproduction. Not surprising is it then that the intellectual

movements that grew out of this wave were concerned with the root of women's oppression. Especially were they united behind the theories of the patriarchy. Different schools of feminist thought had their own theories. Most prominent are the socialist feminism and their view of gender as socially produced and historically changing (Gilchrist 1999:2-3).

Socialist feminist view of gender as socially produced is still standing, and American feminist of the 1990's used the term *gender* as a way of referring to the social organization of the relationship between the sexes. They insisted that the distinctions based on gender had a purely social quality. Thereby completely rejecting biological determinist standpoint, and terms like 'sexual difference'.(Scott 1996:153).

The theory of biological determinism, also known as genetic determinism, explains observed differences in humans by linking them to the individual's biology or genetics. Most societies in the western world are built on the ideology of equality, that however is not the reality, and biological determinism is an explanation for this socio-political paradox of such immense power, and wealth inequalities in our equal opportunity world (Lewontin 1982:150-151).

Richard Lewontin (1982:157-158) lists six social problems focused on within biological determinism, among them are *sex* and *human nature*. The innate abilities and temperament in the sexes comes from chromosomal differences. According to biological determinism, men have a higher rationality and analytical abilities, as well as aggression, and anatomical development. Therefore, men are better equipped in the face of emergency or danger and are a better fit for leadership than women. Women on the other hand are better fit for the emotionality and domesticity of raising children (Miller and Costello 2001:592). Male dominance is one of many traits viewed as *human nature*. Traits that have been built into our genes as part of natural selection and are now human universals and unchangeable. Thus, any society that try to break from them are bound to fail (Lewontin 1982:157-158).

Feminists insists that such distinctions are not biological at all, but rather a social construct (Scott 1996:153). Sex is in most cultures ascribed at birth, determined by external genitalia. There is a correlation between the propagation of the species and genitalia. Regardless, no culture considers external genitalia sufficient justification to separate females from males into distinct roles in society. Other less apparent qualities or traits are therefore ascribed to each sex to naturally differentiate them from each other and support this divide (Dean-Jones 1994:41).

Other than socialist feminist, radical feminism and Marxist feminism among the main schools. Radical feminism argued for the biological differences between males and females. They have received criticism for being too essentialist and discarding intersectionality with the view that women share similar identities and have common experiences. And for not considering differences in class, race or cultural situations. Marxist feminism argue that the root of female oppression was based in origin of private property, and that women were of one single class created by their collective appropriation by the capitalist system (Gilchrist 1999:3).

Second wave feminism, where Margaret W Conkey and Janet D. Spector fit in, were especially concerned with taking a closer look at our own disciplines. Examining the impact of male bias and critiquing the androcentrism (Gilchrist 1999:3). Archaeologists were careful when handling ethnography, aware of the ethical and political concerns connected to studying cultures, both dead and alive. This did not extend to the subject of gender. Margaret Conkey and Janet Spector wrote in 1984, that *“The uncritical use of gender stereotypes in our scholarship perpetuates and supports sexism and gender asymmetry”* (Conkey and Spector 1984).

Furthermore, the gender balance among professional archaeologists was askew. Rather than seeing women in a position of power and prestige (e.g., directors of field projects) they worked as technicians and laboratory analysts. The marginalization of women eventuated in furthering androcentric, partial, or erroneous interpretations of the past (Trigger 2006:458-459). This marginalization has decreased, but it is still an issue today. Among the humanities, philosophy proportionally have the fewest female academics. In the decade from 1997 to 2007 between 23 percent and 33 percent of the doctorates in philosophy was earned by females (Wylie 2011:374). Considering a large part of archaeological theory have been ‘borrowed’ or has its origin in philosophical theories, the number illuminates the major male-dominance within theory.

In the 1990’s, men made up the majority of professional archaeologist. Only approximately 20 percent of professional archaeologists were women in the United States; and in the United Kingdom and Australia approximately 35 percent. In Norway in the early 90’s 49 percent of professional archaeologists were women. Archaeological knowledge is affected and gendered by the different questions asked by male and female scholars (Gilchrist 1999:23).

Conkey and Spector (1984) refers 'uncritical gender stereotypes' in their critique. Many works that involved gender had a quite biological deterministic approach to gender roles and worked with assumptions that women were naturally associated with the private sphere, and domestic work such as childcare, food preparation and the production of clothing (Gilchrist 1999:18). This traditional view have and are being challenged today (See chapter 1.1 in this thesis). A major focus of feminist critique are interpretations based on ungrounded female stereotypes, and that renders the lives and contributions of women invisible (Gilchrist 1999:22).

Pomeroy's book, originally published in 1975 was at the time one of its kind. Despite the few, and far between articles and books published in the decade preceding 1975, ancient women were not a common topic of research. Pomeroy herself point out the lack of a comprehensive book on the "*social history of women through the centuries in the Greek and Roman worlds.*" (Pomeroy 2015:x).

Until the 1980's truly little research had been done on the ancients view of female physiology. However, as the feminist movement took root in academia this changed (Dean-Jones 1994:1). Early research done on ancient medicine was mainly concerned with examining the cases where ancient medicine was right, or nearly right, as to explain where it led to the progress of modern medicine. The treaties in focus was the ones considered rational, and gynaecology was not among them (Dean-Jones 1994:1).

The term third wave was coined by Rebecca Walker in 1992, not by criticizing the preceding waves but by continuing the struggle of female oppression (Walker 1992). Academically the 1990's resulted in scholarly progression, and gender theory and female related studies increased in popularity (Gilchrist 1999:2)

For many studies of gender, the term is synonymous with women. The term gender are more neutral, and "*seem to fit within the scientific terminology of social science and thus dissociates itself from the (supposedly strident) politics of feminism*" (Scott 1996:155-156). This usage implies that to study women, is also to study men, that they are a part of the same world. Therefore, rejecting the idea that men and women exists in different spheres and have separate experiences (Scott 1996:156), that has traditionally been strong in classical studies.

By the mid-1990's studies on the female medicine and physiology in antiquity received considerable attention. Furthermore, the attention had shifted from examining the occasions when the ancients appeared to be correct, to how their medicine was shaped by their ideologies. And to how it could illustrate the patterns of thought that guided their perception of the physical world (Dean-Jones 1994:1-2). Lesley Dean-Jones (1994:2) notes that “[...] *the mistaken conclusions they arrive at in spite of their genuine attempts at empirical observations and rationality can be very revealing of societal assumptions about women's bodies [...]*”.

However, societal assumptions about women is not the only topic gender studies can illuminate. Joan Wallach Scott (1996:168) criticizes anthropologists for restricting the use of gender to the kinship system, remarking the need for a broader view that includes the labour market, education, and the polity. Gender studies does include more than just women's studies. It is intersectional, including interests of everyone, considering that our world perception especially of gender and race is not the only nor the right one.

Joan Wallach Scott's criticism of the mid-90's reflects very well the movement of fourth wave feminism. Central to this last, active wave is the use of social media as a platform. It has sped up communications and created a feeling of community across the world. This wave is not as contained to the west. It is concerned with a broader array of topics, on self-identity, and expression as well as the previous topics of injustice, prejudice and subordination of minorities (Chamerlain 2017).

Feminism and gender theory is a huge topic that since Margaret W. Conkey and Janet D. Spector's criticism in 1984, have filled the volumes they hoped and asked for. I have given a short summary of some of the key elements that have led academia and society to the fourth wave we are now in, with a focus on intersectional problems.

2.2 Ritual Theories

Myths and religion were central to ancient life and culture, both in private and in public. Their importance are illustrated by the prevalence of depictions and associations to the gods, heroes, monsters, and their stories (March 2009:1). The ancient religion was ritual-centred (Parker 2011:2). I will present a brief overview of ritual theories. I would like to note that for the work of Arnold van Gennep, I have picked out parts of a larger work. Furthermore, studies of rituals and religious practice are too extensive to properly be presented, and the two scholars and their

theories I have chosen to include are directly relevant to this thesis. However, as most studies encounter intersectionality, the theories I have chosen are by no means the only ones that could be argued to be relevant.

Arnold van Gennep was an ethnographer and folklorist, and in 1908 he published his work titled *Les rites de passage*, in English, *The rites of passage*. It is a much-quoted book and while only a minor part of his complete works, Arnold van Gennep himself judged it to be particularly important. He did not get along with most of his French academic contemporaries. His colleagues did not take him seriously, thusly excluding him from the *année sociologique*, and he was kept away from the academic society in Paris. His works have been particularly polarising. His contemporary anthropologist Marcel Mauss believed his work was too general and remarked that ritual behaviour aims to change the status of something or someone. He further criticises van Gennep for have a too broad use of methods and overall rambling (Belier 1994:148, quoting Mauss 1910:201). On the other hand, Academics positive to his works referee to him as a “master of French ethnology” and a heroic martyr. Today his terminology is generally accepted (Belier 1994).

Chapter VI *Initiation rites* in Arnold van Gennep’s book *The rites of passage* tackle rituals in connection to puberty and the transition into adulthood. Transitional rites, puberty rites are the “*incorporation into the world of sexuality and, in all societies and all social groups, into a group confined to persons of one sex or the other*” (Gennep 1960:67). In Albert van Gennep opinion such rites should not be called puberty rites. He makes a distinction between physiological puberty and what he call ‘social puberty’. The physiological changes of puberty in females are the swelling of the breasts; the growth of the pelvis and pubic hair; and menarche, the first menstruation cycle. Physiological puberty is difficult to date, as these changes occurs at different times for everyone. In addition, can emissions of mucus, often unnoticed, precede the first emission of sperm. Further physiological changes in males like the growth of body hair are more visible and becomes the defining of physical puberty for males (Gennep 1960:65-67).

Social puberty is not defined by physiological puberty. Albert van Gennep (1960:66) uses marriable age of girls as examples. Girls in early 1900, Paris were considered of marriageable at age sixteen and six months, while in Rome they were of marriageable at age twelve. Only a

twelfth of the girls in Rome menstruated at that age. Physiological puberty occurred around age fourteen to fifteen, likewise around age fourteen in Paris. Social puberty then precedes physiological puberty in Rome, but not in Paris. Therefore, prefer Albert van Gennep (1960:65-68) to not use the term puberty rites, but rather initiation rites. Gender-separated festivals focused on political and military communities for young boys, and on sexuality and procreation of the polis for women (Blok 2017:204).

By the end of the nineteenth century a new interest in the relationship between myths and rituals arose. The beliefs reached from the idea that rituals were the primary and they were reflected, paralleled, or interpreted in myths, to myths and rituals fulfilling different, but comparable functions. Robert Parker (2011:23) criticizes this view remarking that it resulted in downplaying the importance of myths. Without myths the rituals would have been addressed unknown powers, with unknown attributes and histories.

Growing up, or transition from childhood to adulthood is a common theme in Greek myths (e.g., Theseus, see Plutarch *lives Theseus*; and Perseus, see Apollonius of Rhodes *Argonautica*), and a central concern of many rites. In Robert Parker's the myths do not derive from the rituals. The two are entangled and influence each other (Parker 2011:27-28).

Myths and religion is central to life and culture, and one way its relevance is practised is through rituals. I have introduced Arnold van Gennep's term social puberty and noted on Robert Parkers thoughts on the relationship between myths and rituals, as this will be relevant, especially in chapter three.

Chapter Three - Girl, Woman, Wife

“Your maidenhead is not all your own; partly it belongs to your parents, a third part is given to your father, a third part to your mother, only a third is yours; do not contend with two, who have given their rights to their son-in-law together with the dowry.”

(Catullus poems 62:60-65).

Catullus was born in Verona in 87/84 BC, and moved to Rome, where he lived until his death, sometime after 55 BC (Fordyce 1961:ix). The lines quoted above are the five last lines of his poem 62. Poem 61 and poem 62 are often referred to as wedding hymns, despite them not actually being hymns. Both poems enlighten the reader on social expectations, sexuality and how weddings could have been (Panoussi 2007:276). As the lines show, a lot of importance and value was put on a girl's virginity. It is grouped together with the girl's dowry as it would have been considered a commodity for her parents to give away. This poem is a fitting start to this chapter as it introduces the main players involved in pre-pregnancy related topics. Indeed, her parents, her husband, and the young woman herself.

In this chapter, I will examine pre-pregnancy related topics; I will examine puberty, menstruation, virginity, and sexual health, I will argue how the ancients understanding and interactions with female reproductive health was affected by the social limits created around women, and I will argue that gender affected the transition from child to womanhood.

3.1 The Girl

Gynaecology and obstetrics include more than just pregnancy. As we have already seen women in ancient Athens and Rome were partly contained to the *Oikos*, and their fathers house, by the gender norms of their societies. To be able to gain an understanding of how gender affected gynaecology and obstetrics in the ancient world, it is advantageous to first take a step back, and examine girls lives before marriage. I will argue that gender affected the preparations young girls were put through as a transition into adulthood, and that their future gender roles were introduced at an early age.

Xenophon of Athens lived from the outbreak of the Peloponnesian War to Philip of Macedon started his campaign to invade Greece, from ca. 430 BC to at least 355 BC. As an ancient writer he is important to a vast array of topics, from history and memoirs to political and military

science, and philosophy and enlightened ideas of his time (Marchat and Todd 2013:ix). In the 4th century BC, he wrote in his work *Oeconomicus* of a conversation between Socrates and Ischomachus about the training of his wife. As we have seen, the girl would have learned household duties by her mother. Ischomachus comments on his wife's training, saying: "*when she came she knew no more than how, when given wool, to turn out a cloak, and had seen only how the spinning tasks are allocated to the slaves, isn't that as much as could be expected?*" (Xenophon *Oeconomicus* 7.5-7). It was also expected that she learned to fulfil her duty as a wife and making his life more convenient, by knowing his personal preferences and give him children (Lefkowitz and Fant 2016:247).

Xenophon notes, until the time of her marriage to Ischomachus the girl was kept under supervision, likely of her father, to keep her from "*seeing, hearing and speaking as little as possible.*" (Xenophon *Oeconomicus* 7.5). While this statement fits well with our knowledge of asymmetric learning at home, from mother to daughter, not all the female education was kept at home, hidden from the eyes and ears of others.

Xenophon's wife was "*not yet fifteen*" when she married him (Xenophon *Oeconomicus* 7.5). Before she was ready to be married, she would have gone through transitional rites as part of her religious training. Religious rites were important, and as noted in the introduction, women might not have been as secluded as ancient texts portray. Religious events and rituals would likely have let women be social. This would serve as external framework for social maturation (Beaumont 2013:199).

However, it is important to note that transitional rites, or puberty rites are a controversial topic. there are no general word for such ritual or initiations into adulthood in the ancient Greek language. There are, however, local words, like *Arkteia*, that are mentioned later in this chapter. This does not suggest the complete absence of transitional rites, but that there was large local variations (Graf 2003:9-10). In addition, Robert Garland argues that girls' transitional rites into womanhood might have primarily been performed in the home. Transitional rites would have taken place before marriage at around the time or before menarche, the first menstruation cycle. The time between menarche and marriage was often brief (Garland 2013:214).

Transitional rites from infancy to adulthood was meant to introduce the children to their adult roles. They are better known and understood for boys (Garland 2013:210-211). As mentioned,

differences would have been a reality among classes, but the role the rituals played are translatable. In *Lysistrata* we find a line summarizing prepuberty transitional rituals that Athenian, middle- and upper-class girls may have participated in. *Lysistrata* is a political comedy from ca. 420 BC by Aristophanes. It follows protagonist *Lysistrata* as she successfully organizes a plan to force Athenian and Spartan men to stop their war, with the help of women from all over Greece (See – Aristophanes *Lysistrata*) (Henderson 2000:256-257). While we should not put all our eggs in the *Lysistrata* basket, as it is in fact fiction, it does give us a good place to start.

“As soon as I turned seven I was an Arrephoros; then when I was ten I was a Grinder for the Foundress; and shedding my saffron robe I was a Bear at the Brauronia; and once, when I was a fair girl, I carried the Basket, wearing a necklace of dried figs.”

(Aristophanes *Lysistrata* 641-645)

It is unlikely that a girl would partake in all these rituals. While it started out involving the entire new generation it may have evolved to a small, representative group, likely chosen solely from aristocratic and upper-class children (Garland 2013:212). Lesley Beaumont (2012:171-172) theorises that the rituals addressed the well-being of the whole community. The chosen girls were to highlight the importance of appropriate behaviour, which would ensure the survival and maturation of young girls, especially as they approached the dangers of puberty.

The first of the four rituals mentioned in *Lysistrata* is the *Arrephoros*. The Archon Basileios would choose two or four girls between the ages of seven and eleven who would live at the Athenian Acropolis for a time. New girls would have been chosen each year, and they would help at the Sanctuary of Athena Polias (Beaumont 2012:170). However, the girls were not excluded from society during this time and would have partaken in other rituals and spent time with their family (Graf 2003:12). One of their tasks were to carry hidden objects from the sanctuary of the virgin goddess Athena Polias at the Acropolis, perhaps as Lesley Beaumont (2013:199) theorises to the sanctuary of Aphrodite.

Athena, born out of her father Zeus head, is often referred to as the virgin goddess. She is the goddess of war, wisdom, and handcrafts, where she would keep an eye on the women's spinning and weaving. Aphrodite on the other hand is the goddess of erotic love, beauty, and sexual attraction (March 2009:69,89). These goddesses filled multiple diverse needs in ancient

Greek religion, and it might be too simple to single out only part of their role to understand these rites better. However, the *Arrephoros* may have symbolized the transition the girls would take from virginity and adolescents to sexualized womanhood (Beaumont 2013:199).

It would also have been the responsibility of the *Arrephoros* to weave the *peplos*, a garment, which would be placed on the statue of Athena Polias nine months after the Greater Panathenaia. However, this religious ritual took place only every fourth year. It is unknown how long the girls were *Arrephoros* for, and the Greater Panathenaia are being used by scholars as an argument for a four-year cycle (Beaumont 2012:171).

Being chosen to be an *Arrephoros* was considered a high honour, and by the third century BC families of these girls would erect a commemoration in the form of a votive statue at the Acropolis. Unfortunately, the statues have not survived, but their existence is certain as some of their inscribed bases remain (Beaumont 2012:172). The *Arrephoros* have also traditionally been identified on the east frieze of the Parthenon (See figure 1). Figures 31 and 32 depict girls carrying stools. (Blundell 1998:11; Rotroff 1977:379). However, the frieze is not well-preserved causing disagreement among scholars (Beaumont 2012:172). Rotroff (1977:379) agrees with the identification of the girls as *Arrephoros* and goes on to compare the depiction to excerpts from two comedies by Aristophanes. Aristophanes was an Athenian playwright born mid-fourth century. The plays Rotroff refers to, are *Assemblywomen* line 730-735 and *Birds* lines 1550-1552, both of which describe scenes with young girls carrying baskets.

The second of the rituals mentioned by Aristophanes was grinding, an *aletrides*. Very little is known about this ritual. It would have been performed by girls around age 10, and they would have performed what menial tasks in connection to sacrificial bread, or cakes (Beaumont 2013:217) Lesley Beaumont thinks it likely was for the Goddess Artemis, or alternatively Demeter or Desponia. Like the weaving of the *peplos* in the *Arrephoros*, the grinding of grain and baking of cake was a symbol or foreshadowing for the lives the girls would live as women.

The “*shedding my saffron robe I was a Bear at the Brauronia*” refers to the *Arkteia* ritual. Not a lot is known about the ritual except for the wearing and shedding of the saffron-coloured robe, a piece of clothing called a *krokotos*. The ritual might have been a part of the larger Artemis Brauronia festival, but the *Arkteia* itself was a female-only ritual. The girls of ages five to ten would have been accompanied by women (Beaumont 2012:174-175). Like the

Arrephoros, the girls would live for possibly up to a year, at the sanctuary of Artemis at Brauron, located on the east coast of Attica. One theory for this transitional rite is to atone for the killing of a bear by some Athenian youths in a myth (Blundell 1998:11). Artemis was the goddess of all wild things and the hunt. More relevant is it that she was concerned with childbirth and nursing the young (March 2009:84).

Out of the transitional rituals the *Arkteia* is the best represented in iconographical terms (Beaumont 2012:170). The sanctuary of Artemis at Brauron was excavated in 1948-63 by J. Papadimitriou. *Krateriskoi*, ceramic vessels, have in the form of a miniature *krater*, a high pedestal foot and double handles were among the finds. Such finds have also been discovered at multiple contexts associated with Artemis (e.g., The sanctuary of Artemis Mounichia at Peiraeus, the sanctuary of Artemis Aristoboule at Melite, and the sanctuary of Artemis Tauropolis at Halai Araphendies). Many of the vessels depict girls draped or naked running, dancing in the vicinity of burning alters (Beaumont 2012:175).

The transitional rites were performed with the intention to introduce the children to the roles they would fill in their soon approaching adulthood. The goddesses the girls performed rituals for, and gave offerings too represented the responsibilities and expectations of young women. Blundell (1998:11) theorises that Athena represented both the role left behind and the feminine activities of handcrafts, Aphrodite represented her newly acquired sexuality, and Artemis represented the expectation of children, and motherhood.

In addition to transitional rites, the girl would give offerings to the gods. An action that she would continue to do throughout her life at important happenings. She would pick out the God or Goddess that fit her situation. Athena, Hera, and Hippolytus were all popular among Greek girls, as well as heroized maidens. At Athens Artemis was most favoured. As a young prepubescent girl, or recently pubescent girl she may have given belts, children's toys, and locks of hair, as well as offerings of terracotta figurines of women. These were the most common gifts, meant to ensure safe passage from childhood to adulthood (Garland 2013:214).

Garland (2013) argues that it would have been simpler for girls to transition from childhood to womanhood. The only real influences they would have had was other women: And the young girl would have followed a linear route increasing the concentration on her female identity.

Regardless of how many or how the transitional rites were performed in ancient Athens, three out of four transitional rituals mentioned in *Lysistrata* were held for prepubescent girls, and one for pubescent girls. Using Albert van Gennep's term social puberty is helpful in separating the transitional rites of ancient Athens from the physical puberty that girls would go through later. Physical puberty occurred after social puberty for girls. While there was, likewise to Athens, significant differences among the classes in the Roman period, early social puberty continued among the Roman elite as well. From the first signs of physical change to the female body, usually a while before menarche, girls would have been married (Harlow and Laurence 2005:56).

Boys on the other hand went through biological puberty before social and were married at a much later age and were given more time to mature (Harlow and Laurence 2005:65). In this way, expectations and norms of body, intercourse and marriage and their connection to a specific gender was instilled in children early as prepuberty.

Transitional rites are a controversial topic; it is unknown how many girls would have taken part in such rites; it is likely that the girls that did partake was of the upper class, therefore limiting our possible knowledge to a minor part of the population. There was no general transitional rites across ancient Greece, geographical discrepancies lead to wider uncertainty. Additionally, Robert Garland (2013) argues that these rites would have been performed at home.

In common, transitional rites were meant to introduce children to their future adult roles. The virtues wanted in young girls might be represented through the transitional rites, and the Goddesses they are performed for. Among the characteristics of Athena, Aphrodite, and Artemis are handcrafts, erotic love, and childbirth, creating a picture of a young girl growing into womanhood, where she took the role of a mother.

Transitional rites were performed while the girl was still prepubescent. While boys were given more leeway in their youth, girls went through social puberty before their bodies matured, and with the first signs of physical change they were married.

3.2 Menstruation and the Wondering Womb

The transition from girl to woman from a medical point of view was a potentially dangerous. The displacement of organs, especially the womb was one of the more imaginative natural causes for disease for the Hippocratic authors, and often the reason behind a female's symptoms (Demand 1994:35). I will examine menstruation, wondering womb syndrome and female pathology, and argue that gender affect the understanding of the female body and consequently the medical care provided to women.

Major parts of the gynaecological treatises in the Hippocratic corpus is concerned with the transition from girl to reproductive woman. The Greek term *parthenos* is a girl with no children, who is yet to be married, but is of marriageable age (King 2001:23). While the term is often translated into virgin, the two are not synonymous. *Parthenos* should be understood more as a stage in life for young girls and does not have our modern Christian connotations of purity of the soul and integrity of the body that are attached to our understanding of the word virgin (Sissa 1990:74-75).

Menarche would occur around the age of thirteen or fourteen in ancient Athens, and even before in ancient Rome. Followed shortly by marriage, as they were considered fertile (King 2001:23). It was believed that girls who were of marriageable age but were not yet married often experienced trouble with menstruation. The blood that travelled to the womb did not have anywhere to go, as the orifice was not yet opened. The trapped blood would rush to the heart and the diaphragm, filling the internal organs with blood, creating pressure, and a sluggish heart. This resulted in numbness, delirium, and fear, and the girls would become suicidal (Rousselle 1988:67). However, with the practice of infant exposure and infanticide (See chapter 5.3 in this thesis) daughters of upper-class families were scared enough that there would not have been an issue getting her a husband when she was of marriageable age. Therefore, Aline Rousselle (1988:68) believes that the likelihood of such trouble was as unlikely as coming across a young girl not married. The fear and attitude towards female health and fertility could still be part of the reason for early marriages.

For women blood was the most important humor, and the uterus regulated it (Dean-Jones 1994:225; King 2001:69). Therefore, any disease women had, would have been linked to the uterus. The Hippocratic author of *Places in Man* states explicitly that,

“Diseases of women, as they are called. The uterus is the cause of all these diseases; for however it changes from its normal position—whether it moves forward, or whether it withdraws—it produces diseases”.

(Hippocrates *Places in Man*:47).

Most female ailments seem to stem from menstrual blood passing or not passing normally into the uterus (Dean-Jones 1994:59). The flow of menstrual blood was therefore important in diagnosing women, and doctors would have done so based on the abnormalities they encountered and by inspecting menstrual rags (Dean-Jones 1994:122; King 2001:57).

The symptoms of blockage of the menstruation blood is the same as in the cases of wandering womb syndrome and have been diagnosed by modern scholars as hysteria. The symptoms included suicidal thoughts, along with homicidal thoughts and hallucinations; shivers and fever; general pain, vomiting and the feeling of suffocation (Demand 1994:103-104). Such ailments were considered the result of prolonged sexual abstinence by the Hippocratic physicians. A timely and fruitful marriage would result in normal menstruation, proper moistening of the uterine tissue, and a cervix of the right size, as well as the uterus staying in its correct position (Sissa 1990:45).

For the Hippocratic authors the womb, like other organs could theoretically wander anywhere in the body. The feeling of suffocation that is a symptom of hysteria might very well have been the womb colliding with the diaphragm and that would have been the lump like feeling the women felt in their throats (Demand 1994:104).

Young women were generally moister and had more blood, while older women were drier and had less blood (Hippocrates *Nature of Women 1*). If the uterus was too dry it might wander from its proper placement in search of moisture. (Demand 1994:103-104). In the Hippocratic *Nature of women* multiple cases of wandering womb is recorded, along with remedies. For example, *“If a woman’s uterus moves against her liver, she will suddenly lose her speech, grind her teeth, and take on a livid coloring”* (Hippocrates *Nature of Women 3*). This can occur suddenly to healthy women, which are either spinsters or widowed women. In these cases, women were advised to become pregnant, as the conception of a viable fetus was considered a natural and positive remedy (Sissa 1990:45).

Ann Ellis Hanson (1991:82) theorises that the concept of the wondering womb came from the lack of a designated space for the uterus. The ancients had a better understanding of the male anatomy from war wounds and sporting accidents (Dean-Jones 1994:71). Since there was not place set aside for the uterus in the male body it was popular to imagine it would wander around due to its lack of fixed position (Hanson 1991:82).

Intercourse and pregnancy were often an advised remedy. The same treaty includes the case of a woman with dropsy. Her menstruation lessened and became worse in quality. She suffered from pains in her lower belly, which swelled, her breast dried, and her the “*mouth of her uterus, for to any who touch it, it seems to be dried up,*” just like her breasts. Dropsy was a disease that often came after an abortion. After a long list of treatment, the Hippocratic author advises that “*if she gives birth she will recover*” (Hippocrates *Nature of Women 2*; Sissa 1990:45).

The treatment of many female ailments includes herbal or animal remedies, as well as refined products such as wine and honey. There was three different ways to administer the remedies to the patient, orally; vaginal pessaries; or quite frequently by a method Soranus later argues against, vaginal fumigation (Sissa 1990:45).

One of the anatomical differences between females and males were the *hodos* in females, a tube-like organ with a direct route from the head to the vagina. The “*uninterrupted vagina from nostril to womb*” as Helen King (2001:27) phrases it, connected the mouth with the mouth of the uterus. The womb was viewed as having agency in that it moved towards moisture when it was dry. This could be manipulated, and by fumigation, the ancient physician would make the womb move where they wanted it to.

The idea of the wondering womb is not limited to Hippocratic physicians. The womb possessed a sense of smell, an idea that derives from theories of the womb as an irrational animal (Dean-Jones 1994:70). Plato describes it as being “*desirous of child-bearing*”, and if it went too long without becoming pregnant it would become vexed and would wonder around and cast “*the body into the uttermost distress, and causes, moreover, all kinds of maladies; until the desire and love of the two sexes unite them*” (Plato *Timaeus 91c-d*). In the Hippocratic corpus the uterus is not describes as wandering, but as being displaced (Dean-Jones 1994:70). Still, the characteristic of smell remained.

Fumigation takes advantage of the uterus sense of smell and of the *hodos*. Women were told to sit over a bowl filled with sweet perfumes and have a foul-smelling substance under their noses (Dean-Jones 1994:74). The uterus would be persuaded to wander away from the foul smell, and towards the perfumes, back into the desired place for it. Or vice versa for upwards manipulation of the uterus (Sissa 1990:46).

In the Hippocratic treatise *Nature of Women*, 34 different recipes for fumigation are listed (Hippocrates *Nature of Women* 34). Not all of them were sweet smelling, indicating that there was more to the processes than just the manipulation of the uterus by its sense of smell.

Fumigation was dry or moist warm vapours coming out of bronze or earthenware vessels that was heated, sometime remaining on the coals during the procedure. One example uses an oil amphora: “Take the lid of an olive oil amphora made of thorny burnet, light a fire under it, sprinkle sawdust of cypress wood over it, and employ as a fumigation.” (Hippocrates *Nature of Women* 34:4). The ingredients varied from herbal products like myrtle leaves and cinnamon, to animal products like castoreum or cow faeces (Hippocrates *Nature of Women* 34; Sissa 1990:43-45).

The transition from child to woman was dangerous from a medical point of view. Young girls experienced menarche at age thirteen/fourteen in ancient Athens, maybe even earlier in ancient Rome. At this point they were at the risk of ailments originating in and blamed to the uterus. If menstruation blood did not flow, its blockage could lead to hysteria. Furthermore, the uterus was seen as having agency. It could smell, and it had the ability to wander around. If the uterus became too dry it would move to other organs for moisture. Wandering womb also eventuate in the same symptoms as blocked menstruation.

The best, and most natural solution to such uterine related ailments were intercourse and pregnancy. For the Hippocratic authors a timely marriage, where the woman was kept sexually active would keep the uterine lining moist and its opening aligned; the cervix would be in the right place and of the right size, and the menstruation would flow normally. As most female ailments stemmed from the uterus, abnormalities in menstruation blood was important in diagnosing women.

While spinsters was advised to marry and women in general were advised to get pregnant, the Hippocratic physicians did have other options. Herbal or animal remedies, along with refined products were given to women orally, throe vaginal pessaries or by vaginal fumigation. As it was believed that females had an inner tube, *hodos* that connected the mouth to the vagina, physicians would manipulate the uterus to move where they wanted it by foul and nice smelling vapours.

The ideas of how the female body was build, and how it worked affected the way in which the ancients perceived female ailments, and thus how they treated women. Further might the perceived danger of such uterine caused ailments in part lead to the marriage of young girls.

3.3 Virginitiy and Marriage

Puberty and the transition from child to women was in part a scary phase with major changes in a young girl's life. However, the most important change was marriage (Harlow and Laurence 2005:54) Boys was given more leeway in their youth. Roman boys would after puberty be considered "iuventis", youth. A period, lasting until their marriage around age twenty-five, where he would be in transition into adulthood. Unlike girls, who received training in moral during her childhood by her mother (Wolicki 2015:305-306), and who would have been considered an adult after marriage, boys needed time to learn morals and responsibility (Harlow and Laurence 2005:65). Girls on the other hand would go from girl to virgin, before wife. I will examine virginitiy and marriage and argue that gender norms affected the expectations of women's sexual health.

The Athenians believed that with menarche came sexual enjoyment. In addition, it was believed that girls were naturally wild beings, prone to outbursts; excessive, uncontrolled behaviour and needed a guardian to give her guidance. The role would first be her fathers and after marriage her husbands (Blundell 1998:16). This eventuated in a common belief in a lack of sexual self-control in females (Harlow and Laurence 2005:57; Sissa 1990:92). This led guardians and family members to keep an extra eye on young girls, as even putting herself in tempting situations could potentially bring shame and dishonour (Blundell 1998:16; Demand 1994:147).

Everything in a girls life prior to marriage would have revolved around educating her to fulfil the role of wife and mother (Harlow and Laurence 2005:54-56). In ancient Greece the

transition from *Parthenos* to *gynê*, a mature woman ended with the birth of her first child, and the Greeks would have tried to make this transition as quick as possible (King 2001:23). The same can be said for the Romans. Ideally motherhood shortly followed marriage, making it one transition (Harlow and Laurence 2005:56).

Ancient marriage was not based on love matches, but were practical business arrangements. Often negotiated between the prospective groom and the girl's father (Demand 1994:11). Dowries was normal, and in Nancy Demand's (Demand 1994:3) opinion along with the vulnerability the daughter brought with her, affected the view families had of the birth of daughters negatively, in comparison to the son's that would continue the agnatic line of succession. Together with her dowry would a girl's virtue, her virginity been considered a commodity for her parents to give away.

Catullus poem 61 and 62, despite not technically fitting the term hymns, are still often referred to as wedding hymns. They are the first of a series of longer poems. Both poems is about weddings, and how it is a blessing to the couple, their families and society. Through them it is possible to gain information on how marriage defined and understood gender roles, and how sexuality of both parties worked in the marital relationship (Panoussi 2007:276)

The Romans emulated many aspects of Greek life, like art, philosophy, and literature. However, the Roman morals from the late republic and onwards are focused on duty and obligation to the state, and on virtue. The Romans therefore viewed the Greeks as excessively pleasure-seeking, and morally decadent. The feminine sexuality of Sappho would have been regarded as threatening to the Roman value system. Still, Sappho are regarded as a muse for Roman Catullus. In Ellen Greene's (2007:131-132) opinion, Catullus uses Sapphic stanza and love lyric as a vehicle for his critique of aspects of Roman social and aesthetic values.

Sappho wrote at the end of the seventh century BC, at the island of Lesbos. She is the earliest women writer in the west, and despite only forty fragments of her work being long enough to be intelligible, she has been an undeniable influence on western poetic tradition (Green 2007: 131).

Catullus Poem 61 associate multiple floral images to the vulnerability of virginity and female beauty. The young girl's virtue is that of a hyacinth in a garden that belongs to a rich master.

The flower enhances its owner's power and status. Thus, the wife's beauty and virtue are passive objects for display as assets for her husband (Panoussi 2007:280-281).

The image of the hyacinth as a woman's virginity are to be found also in poem 62, and in the works of Sappho. Unlike the flower in poem 62, and Sappho's fragment 105c, the hyacinth is an object of admiration in poem 61, and it is not threatened. Vassiliki Panoussi (2007:281) interprets the hyacinths in poem 62, and fragment 105c to be in danger of losing their beauty to the violent male sexuality.

Fragment 105c by Sappho is as follows: "*Like the hyacinth which shepherds tread underfoot in the mountains, and on the ground the purple flower [fall]*" (Sappho Fragment 105c). Female virginity is fragile and precarious, and subject to violence by males. The same sentiment is mirrored in poem 62:

"As a flower springs up secretly in a fenced garden, unknown to the cattle, torn up by no plough, which the winds caress, the sun strengthens, the shower draws forth, and even now it unfolds and exhales sweet fragrance, many boys, many girls, desire it; when the same flower fades, nipped by a sharp nail, no boys, no girls desire it: so a maiden, while she remains untouched, the while is she dear to her own; when she has lost her chaste flower with sullied body, she remains neither lovely to boys nor dear to girls."

(Catullus Poem 62:40-45).

Poem 62 can be interpreted as a criticism to the social norms of how marriage defines expectations to gender norms. It does not view the loss of virginity, even to a husband as a positive thing. On the contrary it comments on the sheltered existence virginity creates with the image of the garden (Panoussi 2007:281). It also comments on the loss of value that comes with loss of virginity.

Virginity was a topic of importance for the Greeks too. Hesiod a Greek poet wrote his work *Works and Days* around 700 BC (Millett 1984:85). And in it he advised that a "*woman should have reached puberty four years earlier, and in the fifth she should marry. Marry a virgin so that you can teach her good habits*" (Hesiod *Works and Days* 695). This advice is similar to the experience and story told by Ichamcus (See chapter 3.1 in this thesis).

While the Greeks and the Romans agree that virginity is important, their medical view of the benefits of lasting virginity differs. On the one side of the ancient debate is intercourse harmful. As a continuation of the Sicilian school Galen believed that breath, and therefore air held the characteristic of life (Dean-Jones 1994:13; Rousselle 1988:13).

Galen was emperor Marcus Aurelius' personal physician. He was born in Pergamum in 129 AD., and after extensive education and travel came to Rome at age 35. He wrote on various topics and in large quantities (Hankinson 2008). Galen was among the ones with the belief that the purest air in the body was transported by richer blood towards the testicles and into male sperm. Naturally losing air was not good, and it was recommended caution when having intercourse (Rousselle 1988:13; Soranus *Gynaecology* 30)

Intercourse was regarded as more harmful to men than women, but Soranus points out that “*all excretion of seed is harmful in females as in males*” (Soranus *Gynaecology* 30). The side that believed lasting virginity was healthy believed that the body became sick with desire, and the experience of virginity kept them healthy as they were unacquainted with desire. Further argument was that abstinence made the body stronger. In Soranus opinion, and likely experience from young mothers, pregnancy made the body weak, and exhausted. Virginity safeguarded against such injuries (Soranus *Gynaecology* 30).

The other side of the debate still agree that intercourse was harmful, but only in excess. And that in some cases it could be helpful, such as instances of female ailments, like the Hippocratic authors advised. Soranus answers the question “*whether permanent virginity is healthy?*” that he poses in the title to chapter seven of book one in his *gynaecology* with “*permanent virginity, therefore, is harmful*” (Soranus *Gynaecology* 31).

Marriage was the main change in a young girl's life. It was commonly believed that girls lack sexual self-control. The importance placed on virginity may have in part lead to a cultural need for early marriages for girls (Harlow and Laurence 2005:56). Ancient marriages was in general not love matches, but business arrangements, and the bride's virginity was regarded as an asset.

Ancient poems likens female virginity to flowers, and despite the Roman view that the Greeks were excessive in their pleasure-seeking, Catullus, criticizes the Roman chastity. Even among

the Romans themselves did a debate arise about permanent, or sexual abstinence. One side believing it was healthy, while the other believing it was harmful.

The gender norms and expectations surrounding young girls led them into early marriages and put value on girls' virginal state. As it was further important that the transition to motherhood occurred quick after marriage, many girls would have become pregnant at a young age.

3.4 Fertility and Health

The first line of the tenth book of Aristotle's *History of Animals* states that "*The cause of a man and wife's failure to generate when they have intercourse with each other lies sometimes in both, sometimes only in one or the other.*" (Aristotle *History of Animals* 10). Regardless, the book goes on to explain the copious problems with the female body that would result in infertility, passing over the possibility of male responsibility. For women, health was identical to fertility and maternity (Sissa 1990:60). I will examine infertility and fertility, and argue that gender affected reproduction, and the norms and practises performed to ensure the conception of the next generation.

Rebecca Flemming (2013:571) groups the infertility problems listed in *History of Animals 10*, under four main headlines: "*The anatomical configuration; The alignment and flexibility of the mouth of the womb; the shape, size, composition, and internal environment of the uterus itself; and the woman's overall health and somatic balance*".

There was many reasons for why a woman could be infertile. She could have an imbalance in other humours besides blood; she could be too thin or too fat, or too dry or too wet; or she could suffer from an injury that affected her reproductive capabilities (Flemming 2013:572). In the *Diseases of women 1* and *2*, there are cases of women having dangerous diseases that were possibly fatal, and if they survived, they would become infertile. The uterus was especially sensitive. If its mouth were misaligned, or too open or too closed that could also lead to infertility. The womb too could be too smooth, too wet, or too dry, among several other things there could be too much off or too little off (Flemming 2013:572-573).

Fumigation was not only administered in cases of wondering womb or other diseases, by also for barrenness. The Hippocratic treaty *Barrenness* starts of listing many reason women could be barren, some of which were treatable, while some were not (Hippocrates *Barrenness*). For

women who had an especially hardened, closed or have a misaligned cervix fumigations were among the multitude of procedure she was put through (Flemming 2013:574).

Corviser (1985) estimates that 10 percent of Greek women were unable to conceive, double the modern rate. 15.38 percent of the requests at Epidaurus was related to sterility cures, only exceeded by eye troubles and blindness as 17.94 percent (Demand 1994:17).

The trouble with conceiving might in part be due to the ancients misunderstanding of the time of fertility, which the ancients believed to be just after menstruation (Demand 1994:17). As it was important to figure out if a woman was able to and was going to become pregnant there was various test that could be performed. One of the tests of fertility involved sympathetic magic, and it was to give a fasting woman butter and milk from a woman who was nursing a boy. If she burped, she would conceive. Other tests used the tube from the uterus to the mouth. If the odour of almond came out of the mouth of a woman who had a bitter almond wrapped in wool in the vagina, she would become pregnant (Demand 1994:18).

Even in cases where the woman were fertile, there was ways recommended to become pregnant fast, or to try and control the gender of the child. The advice was on the ideal timing and preparation each party should go through. The woman should be fasting, and the man should be sober (Flemming 2013:574). Further, it was believed that semen from the right testicle produced males, and vice versa (Flemming 2000:205), therefore, if the husband wished for a male heir, he should tie up his left testicle and have intercourse with his wife after her menstruation period had ended or as it was ending. For a daughter, he should tie up the right testicle and have intercourse with his wife during her menstruation period (Flemming 2013:574-575).

Despite the ancient acknowledging that infertility issues could occur in both sexes, it was treated as a female issue. The solutions to infertility included fumigation, and folk remedies. Gender affected the approach to infertility through delegation of responsibility and blame onto women.

Chapter Four - The Helping Hands of Others

“a man and a woman whose souls have an aptitude for medicine have the same nature: or do you not think so?”

(Plato *Republic* 454d).

Plato was born to a noble Athenian family in 428/27 BC. He was a philosopher and teacher concerned with the politics of the polis; of what was right for the individual and state alike (Voegelin 2000:3-4). He was among the philosophers that argued for female education. The line quoted above is taken from his text *Republic* where he is arguing that there was no difference between the female soul and the male soul, and if one, regardless of gender had an aptitude for a craft there would be no difference in quality of the work (Dean-Jones 1994:31; Plato *Republic* 454d). It was not considered ideal for women to work, or even socialise outside the home by some ancient writers (See chapter 1.1 in this thesis.) Further are morals, and prejudice against female nature an obstacle when it comes to female health care.

This chapter argues that gender affected the medical care given to women, as well as the availability of helping hands. I will argue that gender norms, and morals limited male/female interactions, and that as a result women fulfilled the need for medical professionals as physicians and midwives. Further, will this chapter include a closer examination of the healing sanctuary of Asklepios at Epidaurus, arguing that women utilised temple healing and asked for divine intervention in fertility and pregnancy related issues.

4.1 The Midwife

The midwife was an important person in a woman's life. She would have been present during births, and traditionally have been interpreted as more important than the physician for gynaecology and obstetrics. I will examine the origin myth of the midwife, and the tomb of Scribonia Attice. I will argue that gender played a significant role for ancient medical professionals.

Little is known about the author Hyginus, it is likely he could be Gaius Julius Hyginus, a Roman freedman who worked as the head of the Palatine Library during the time of Emperor Augustus. The work *Fabulae* under his name is a collection of earlier works, and myths. Before

being written down by Hyginus the collection saw subject to modifications, reorganised, abridged and expanded again. Making it a complicated work (Smith and Trzaskoma 2007:xlii).

The *fabulae* include a list of achievements, detailing events and people that led to new discoveries. In this list we find the only source for the story of Agnodice (King 1986:53), quoted in full:

“The ancients did not have midwives, and because of this many women died from a sense of shame because the Athenians made sure that no slave or woman learned medicine. A certain young girl named Agnodice desired to learn medicine; because of this desire she cut off her hair, put on men’s clothing, and became the student of a certain Herophilus for formal instruction. After she was trained, whenever she heard a woman was having trouble below the waist, she went to her. Women did not trust her, thinking that she was a man, so Agnodice would lift up her tunic and prove that she was a woman. In this guise Agnodice would take care of these women.

But when doctors saw that their services were not being called upon by women, they accused Agnodice, asserting that she was an effeminate gigolo and deducing them, and the women were only pretending to be sick. The Areopagites assembled and found Agnodice guilty. She lifted her tunic and showed them that she was a woman. The doctors then raised stronger accusations against her. Because of this the women leaders converged on the court and said, “You are not out husbands but our enemies, for you have condemned the woman who discovered a means to provide for our well-being.” The Athenians then change the law to allow free-born women to learn medicine.”

(Hyginus *Fabulae* 274.10-13)

The context of the story is that there was no midwives in Athens, and by law women and slaves were not allowed to learn medicine. Modesty prevented women from seeking the help they needed and therefore many died in childbirth. There are those that believe this story and sees Agnodice as a role model. However, not everyone reads the story that way. To many it seems impossible that there would not have been women who practiced midwifery already. One interpretation is that a new law would have been passed, that banned women from learning medicine. The women in this interpretation did not refuse the help of men only due to modesty,

but also as a reaction to said law, they were demonstrating by not see the ‘new’ male midwives (King 1986:53-55).

Kate Campbell Hurd-Mead (1933:189-190) speculates that women doctors performed abortions, and were accused of immorality, and therefore were excluded from medicine (King 1986:56). Furthermore, does she expand upon the story by adding that from her teacher, Herophilus “*Agnodice must have learned how to perform embryotomy, using a boring and cutting instrument before crushing the child’s head.*” And that she performed operations he taught her, and caesarean sections on dead mothers (Hurd-Mead 1933:190).

Later scholars have taken the added speculations by Kate Campbell Hurd-Mead’s as fact. Helen King (1986:57) believes it is a result of Kate Campbell Hurd-Mead’s phrasing. She further calls out Jean Towler and Joan Bramall, and Margaret Alic as examples of furthering Kate Campbell Hurd-Mead’s narrative in their books, *Midwives in History and Society* and *Hypatia’s heritage*, respectively (King 1986:57).

The question if Agnodice was a real historic person remains. Her teacher in the *fabulae* account of the story is named Herophilus. There exists a historical Herophilus of Chaledon. He was active in the late fourth and early third century BC and wrote and worked on gynaecological matters. On the one hand, if one was to write this story, he would be a natural choice in the teacher role, as Agnodice went off to help pregnant women. On the other hand, Herophilus would also be an appropriate teacher for a real life Agnodice, interested in woman’s health. Regardless, the existence of Herophilus does not equal the existence of Agnodice (King 1986:54).

The story would have originally been in Greek, and Agnodice would have been written as Agnodike, translating to ‘chase before justice’, referring to how she was innocent on the first charges against her of seduction (King 1986:54). One might argue that her name is too fitting to not have been constructed. And in the opinion of Vivian Nutton (2013:101), the story of Agnodice is “*an obvious aetiological myth*”.

Most women likely received maternity care from midwives, and other female healers, however, the male physician might have been more present then traditionally interpreted (See chapter 4.2 in this thesis) (Oberhelman 2014:48). Helen King (1986:60) argues that the story of

Agnodice should be read as a myth where Agnodice moves between an exclusively male sphere and a female one. Further she are of the opinion that by choosing to not take the help offered by men the women are the ones that have created and trapped themselves in the limiting female sphere; one that surround childbirth (King 1986:60).

Agnodice had to dress as a man to get an education to become a doctor. Still, to treat women, she revealed her gender, to make them more comfortable. This illustrates a contrast in societal morals. Men were considered the only ones that should be able to practice medicine, at least according to the myth. Still, women did not feel comfortable enough to receive their help. The societal moral both kept women away from practicing medicine and receiving medical attention. This myth explains why there existed women midwives and physicians, in societies that otherwise, at least a large portion of the upper-class male writers, valued subordinate women, kept away safe at home.

Women did practice medicine. The sense of shame that led the women in the Agnodice myth to decline help, is commented on in Soranus works too. Soranus was one of the great medical professionals of antiquity. He was born at Ephesus, likely in the second half of the first century AD. Despite his fame and reputation few of his works have survived, and the ones that remain have seen alterations. His work *gynaecology* is the most important one (Green and Hanson 1994:969; Temkin 1991:xxiiv).

To keep the woman comfortable during labour Soranus advises against looking directly at the woman's genitals, so she would not become embarrassed or ashamed and therefore having unwanted reactions (Porter 2016:290). In his opinion a woman fit to become a midwife would be literate, have her wits about her, have a good memory, all her senses needed to be in good working order, she needed to be robust, have long slim fingers with shot nails, and she would need to love her work (Soranus *Gynecology* 1.3).

Outside the harbour city Ostia, at the Isola Sacra Necropolis, is tomb 100 located (See figure 2). The tomb dates to the mid-second century AD. It belongs to Scribonia Attice. The inscriptions informs us that Scribonia Attice is the commissioner of the tomb, and it is as follows:

“Scribonia Attice has built [this monument] for herself and for Marcus Ulpius Amerimnus, her husband, for Scribonia Callityche, her mother, for Diocles and for her freedmen with their descendants, with exception of Panaratus and Prosdocia.”

(Porter 2016:290).

On each side of the doorway is terracotta reliefs placed. Marcus Ulpius Amerimnus was a physician, and one of the two reliefs on the tomb depicts a large kit of medical equipment, as well as Marcus Ulpius Amerimnus tending to another man with a leg injury. Scribonia Attice was a midwife. On the second relief a birthing scene is depicted (See figure 3) (Porter 2016:290). A woman is sitting in what is most likely a birthing chair. Another woman has her arms around her giving support. Scribonia Attice is crouched in front of the birthing woman with her hands assisting the birth or giving a physical exam. Her face is directed outwards at the viewer, and not at her work, mirroring Soranus' advice.

The tomb have been largely overlooked by scholars. But it nicely illustrates the relationship between midwives and physicians. While the physician tackled medical issues across the board, when it comes to gynaecology and obstetrics the midwife is an alternative for the female patients. With their work overlapping, their professional relationship must have been more like co-workers. Regardless of the physician's active role in childbirth (See chapter 4.2 in this thesis) it must have been advantageous to Scribonia Attice and her husband that they both were medical professionals, and could refer patients to each other, or collaborate.

Men's access to the female body was limited, which led to logical explanations to be drawn by the male medical writers on female physiology (Rousselle 1988:24-26). Still, they managed to fill volumes of information on the topic, and on how to treat female ailments. Aline Rousselle was in 1988 the first to suggest that the treaties were constructed by incorporating facts and empirical data build up by women and midwives over the years into male knowledge of their own bodies. The knowledge of the gynaecological treaties then originate in an oral female tradition (Demand 1994:xvi; Rousselle 1988:26).

While not everyone agree with Aline Rousselle, it does set the gynaecological treaties in an interesting light. Whereas upper-class males wrote most of the surviving written sources, this might not have been the case for these treaties. The treaties were likely written for the male physician, but Rousselle (1988:26) believed that Soranus wrote for the midwives. Taking the

professional working relationship between midwives and male physicians into account, it does not seem too far fetch that Scribonia Attice would have shared her knowledge with her husband. If Aline Rousselle is correct in her assumptions, it should not automatically be assumed that the men obtained the knowledge from women and wrote it down without their consent or assistance.

Hyginus' *Fabulae* is the only source for the myth of Agnodice, the first midwife. The myth illustrate how gender was a topic of importance within ancient medicine. The myth states that until Agnodice women were not allowed to practice medicine. Scholars disagree with how true this statement is, and the potential reasons behind such a ban. It is, however, clear that Agnodice gender is what is central to the myth and its interpretations.

Soranus gives a list of attributes a fitting midwife should possess., and comments on how she should behave. The female patient's comfort still, seem to have been quite affected by the gender of the medical professional she received the assistance of. Men's access to female bodies was therefore limited. Aline Rousselle argued that therefore the gynaecological treaties and texts were based on an oral female tradition. The gender that can empirically gain information is women. But Scibonia Attice's tomb may show a professional relationship that was beneficial for both the female midwife and the male physician. It is likely that the women shared their information with their male co-workers, that then wrote them down. In that case both genders used their gender to their advantage. Women had access to the information, and men had more of an opportunity to produce written works.

4.2 The Physician

The physician is traditionally interpreted as a man that has minimal direct contact with female bodies. I will examine the funerary stele of Phanostrate and argue that the divide was not as black and white as female midwives and male physicians.

In general, ancient men, except for husbands, were not to look at, or touch the bodies of respectable women, especially their genitals, nor were they to discuss sexual matters with women. It is commonly accepted that normal births would take place in the home, with the assistance of female friends and a midwife. And with the assistance of the male physician only called for in emergencies and if complications occurred (Blundell 1998:49; Demand 1994:19).

Rebecca Flemming (2013:579). argues that this interpretation is incorrect, and that the male physician would have been exempt from the moral that limited men's interactions with the female body. While the Hippocratic corpus include cases of pregnancies they focus on the abnormal cases. Hippocratic, male physicians did have expertise and experience dealing with childbirth. The lack of unproblematic deliveries recorded in the treaties does not mean that there was no male physician present. Nor does it imply that they commonly were present (Demand 1994:19; Flemming 2013:579).

The quality of women's education was varied (See Chapter 1.1 in this thesis). And to receive the title of physician required formal education (Pomeroy 1978). This specialised training usually took the form of asymmetric learning, from father to son, or through apprenticeships (Bannert 2015:413-414). Midwives, and other women in medicine also shared their knowledge and skills to the next generation (Laes 2010:266).

The funerary stele of Phanostrate was found in Acharnae in the village of Menidi (See figure 4). It dates to the mid-second century BC and is the earliest monument commemorating a woman who identifies herself as both a *maia* and an *iatros*, a midwife and a physician (Pomeroy 1978; Totelin 2020:129). The term *iatros* is in the male form. Later in the Roman empire the term *iatromaia* is used for women doctors. And on the epigraph of Mousa of Byzantion is the female form of *iatros*, *iatrine*. She further hold in her hand a scroll, and is in the presents of a young girl, this could be an indication of female medical education (Bannert 2015:224-225).

Phanostrates stele relief depicts two women and four children. Phanostrate is seated, and holding the hand of Antiphile, whose name is given in the inscription. Their relationship, however, is unknown, but she has been identified in varied ways; she has been theorised to be Phanostrate's patron, assistant, patient, client or simply a relative. The children, three little girls, and a baby underneath Phanostrate's chair (Kosmopoulou 2001:316) also receive various interpretations, such as them being Antiphile's children that Phanostrate assisted in the birth of; their presents could also insinuate that Phanostrate was a paediatrician as well as physician and midwife; or that they are Phanostrate's own children, and therefore indicating she was through personal experience qualified to practice midwifery. Regardless, the presences of the children speak to Phanostrate's expertise within medicine (Totelin 2020:131).

Furthermore, in the lines quoted above from Plato's republic he argues that it does not matter if you are female or male if your soul has an aptitude or nature for something that person should be doing that. Even if it is a woman's soul that has the nature for leadership, she should administrate state affairs. In Plato's ideal state women would not automatically be disqualified for any position, because of their gender. Plato uses the example of women physicians as a case of people who regardless of gender became what their soul had an aptitude for. Sarah B. Pomeroy (1978) argues that his argument relies on the knowledge of, and existence of female physicians in Athens, as well as them being no less exemplary than their male counterpart.

Phanostrate's funeral stele display great wealth further demonstrating her talent as a midwife and physician. Her services might not have been restricted to only women. In Hellenistic and Roman periods women also treated men, and women would sell remedies not only intended for woman related ailments. However, expectations and social pressure likely limited women's treatment of men (Nutton 2013:101). Sarah B. Pomeroy (1978) considers the occupation of Physician to be the only respectable occupation a woman could have that was not banaisic.

While Phanostrate is the earliest midwife and physician that we have a monument dedicated too she is not the only one. A marble funerary inscription from the first century AD is dedicated to Julia Pye, physician; Minucia Asste, was a freedwoman and physician, her funerary inscription also dates to the first century; so, does the columbarium inscription dedicated to Venuleia Sosis, physician. All three of these examples are from Rome, more exists in the wider Mediterranean world (Flemming 2000:385-391).

The commonly accepted interpretation of physicians and childbirth was that of a male who was only called for in emergencies. The midwife, and other female helpers would have assisted in childbirths. However, while the cases of pregnancy recorded in the Hippocratic corpus are on problematic deliveries, it does not exclude or imply the presence of a male physician. There was however not only male physicians, multiple steles and monuments exists that are dedicated to women with the title of *iatros*, a physician. The funerary stele of Phanostrate is the earliest record of a woman taking on the title of both *maia*, midwife and *iatros*.

The divide between the female midwife and the male physician is therefore more fluid. The strict morals that supposedly limited men from helping women might not have been that rigid

in practice. While gender does seem to have influenced the occupation of the physician it might be less than traditionally interpreted.

4.3 The Healing Sanctuary of Asklepios

Asklepios, Aesculapius to the Romans was the son of Apollo and a mortal woman named Koronis (Buxton 2004:91). Even after becoming pregnant by the god, Koronis preferred her human lover, and planned to marry him. When Apollo found out he sent his sister Artemis to kill her. Apollo saved the infant Asclepios from her body as it burned on the funeral pyre. Asclepios was then sent to the Centaur Chiron, where he was educated in the arts of medicine. Asklepios became a great healer, so skilled he was able to bring a corpse back to life (Buxton 2004:91; March 2009:79). I will examine the healing sanctuary of Asclepios at Epidaurus and reproduction related cases of temple healing Asklepios is credited for. I will argue that despite Asklepios' clear association with reproductive health, women might not have preferred temple healing to the help of a physician.

The cult of Asklepios arise early fifth century (Demand 1994:91). It is unsure if the first sanctuary was at Trikka, where Asklepios supposedly was born (Strabo *Geography* 14.39) or at Epidaurus. However, when various places in Greece wanted to import the cult to their community they went to Epidaurus for sacred objects (King 2001:101). Asklepios was worshipped all over Greece, most famously at Epidaurus in Peloponnese (See map in figure 5) and at Kos (Barringer 2014:283). In the fourth century there was around 200 temples dedicated to him (King 2001:101).

Adjacent to the theatre, about a quarter of a mile to the southeast lays the ruins of the sanctuary of Asklepios at Epidaurus (Buxton 2004:91; March 2009:79), that was constructed in the fourth century BC (Barringer 2014:285). Pausanias, famous Greek traveller, and geographer wrote in his descriptions of Greece about the sanctuary at Epidaurus. The sanctuary lies in an open valley, about six miles southwest of the ancient town with the same name. The sanctuary included a considerable area, as the theatre, with its distance, was within the grounds (Pausanias *Descriptions of Greece* 39.18).

The sanctuary had a Tholos, which was at Pausanias time, in the second century AD, still worth seeing (Pausanias *Descriptions of Greece* 39.18). Polykleitos is named as the architect of both the theatre and the tholos (Pausanias *Descriptions of Greece* 2.27). Largely made of limestone,

the tholos was a one room building, entered by a ramp on the east side. On the exterior it was ringed by a colonnade of twenty-six columns in Doric style. Corinthian columns, placed on a patterned black- and white floor held up the roof of the circular building (Barringer 2014:285).

Epidaurus, similarly, to other large sanctuaries, has shrines dedicated to multiple other gods than Asklepios. A small temple in the Doric style to the southeast of the temple of Asklepios was dedicated to Artemis. Pausanias also wonders if another building, what he call the 'small cella' could have been the temple of Themis (Pausanias *Descriptions of Greece* 39.18).

The worship of Asklepios was introduced to Athens in 420/429 BC, highly likely in part due to the plague in 429 and losses from wars (Barringer 2014:258; King 2001:101). The sanctuary of Asklepios lays on the south slope of the Athenian acropolis. In 293/291 BC, after a plague, the worship of Asklepios was brought to Rome too (King 2001:101; March 2009:79).

The ancients believed that dreams could potentially be important signs of the health of the body (King 2001:102). People would make offerings to the god, and in the hopes that he would heal them of illness they would spend the night at the sanctuary. Asklepios would come to them in their dreams to either directly heal or intervene in their health or to prescribe a regiment that would help (Barringer 2014:283-285; Oberhelman 2014:49). Contemporary Hippocratic writers concerned with the physical world of material substance and bodily fluids thought that dreams might not have been as dire as the patient feared. Despite this, Hippocratic medicine and Asklepios' 'temple healing' was not in opposition, nor was there any enmity. Rather, they co-operated as alternatives, with physicians even becoming priest of Asklepios (King 2001:102-105).

The healing of Asklepios took place within dreams, but it was not immune to trends of the physical world. Asklepios administered compound drugs when that was fashionable. He could pour drugs into the eyes of the blind and restore their sight. He could even perform surgery. However, being a God, he performed at a more advanced level than the physicians (King 2001:102-103).

Women travelled the long pilgrimage to Epidaurus from all over Greece, to get the help of the God (King 2001:105). In Pausanias' time six slabs with inscriptions remained standing within the sanctuary enclosure, however, he comments that there had been more (Pausanias

Descriptions of Greece 2.27). Two was steles was found at the shrine to Asklepios, forty-three cures was recorded on them (Demand 1994:92). They held the names of both women, and men, healed by Asklepios, or his father, Apollo; as well as what ailed them; and the cure they received (Pausanias *Descriptions of Greece* 2.27). Seven of the cures included pregnancy related situations, and four related to fertility (Demand 1994:92). The inscriptions tells of women spending the night at the sanctuary and later becoming pregnant and having multiple children (Lefkowitz and Fant 2016:367-369), in one case twins, in another five children. The latter of the two is possible the result of successive pregnancies (Demand 1994:92).

Asklepios seems to have a monopoly on unnaturally long pregnancies (King 2001:107). From the inscriptions we learn of Kleo, who had been pregnant for five years when she came and spent the night at the sanctuary (Demand 1994:93). Waking the next day, she walked outside the temple enclosure and gave birth to a son, who immediately washed himself in the spring and started walking around. Kleo was not the only woman to have a long pregnancy. Ithmonike of Pellene asked Asklepios to become pregnant with a girl, and when asked if she wanted anything else said no. She went on to go pregnant for three years since she had not made any request regarding giving birth. When she again went to Asklepios about childbirth, after spending another night at the sanctuary, she gave birth to a girl, (Demand 1994:93); Lefkowitz and Fant (2016:367-369) outside the grounds.

No birth or death was to take place inside the sanctuary's boundary marks. A portico, later restored by the Romans, was located just outside the grounds, as a place for the sick to die, and women to give birth (Pausanias *Descriptions of Greece* 2.27). This is likely due to the pollution associated with birth, death, and sex.

Caesarean section was limited to divine births, such as that of Dionysus (Demand 1994:92) who was recovered from his mother, mortal women Semele's burning body, stitched into a gash in his father Zeus thigh, where he grew until full-term (March 2009:103). Asklepios also performed a caesarean section. Sostrata of Pherai came to him, pregnant, and through a dream Asklepios delivered two washtubs of worms by surgery (Demand 1994:92).

Kerzog compares the five-year pregnancy of Kleo to the case of Gorgias wife in the Epidemics (Demand 1994:93). "*The menses of Gorgias' wife had stopped for four years, save for a very small amount. [...] She became pregnant and pregnant again (superfetation). The child was*

delivered in the ninth month; a live girl".(Hippocrates *Epidemics 5.11*) She then had a fever for ten days, swelled up in the face and in the legs, and she continued to bleed. On the fortieth day she gave birth to a stillborn foetus, "*simply flesh*", and she became healthy again (Hippocrates *Epidemics 5.11*). Gorgias daughter was born in the fourth year of pregnancy (Demand 1994:93).

The condition of both women could have been 'a molar pregnancy,' the Hippocratic authors believed that such a condition occurred when a large amount of menstrual fluid took up a small amount of semen, and a proper pregnancy did not occur despite the belly expanding as if the women were with child. The male foetus would create movement after three months, and the female after four. The disease could be recognized when the foetus did not move, and the breast did not produce milk. Such 'molar pregnancies' could persist for two, often three years (Hippocrates *Disease of women 1.71*).

Asklepios also had the ability to cure sterility. His talent with reproductive health related issues might have been a reason to choose his assistance and help, over a physician. A fifth century testimony explains how a sick girl the physician could not cure, prayed to Asklepios instead and was healed. This does not mean that people only switched from the help of physicians to 'temple healing' when the medicine was unsuccessful. The physicians did not encourage dedications to them, like it was common to give at the sanctuaries. It is highly likely that people switch healing alternative the other way around too (King 2001:105-107).

Twice as many cases recorded in the Hippocratic epidemics was male than female. Lesley Dean-Jones (1994:136) attributes this to women seeking traditional medicine over the help from Hippocratic physicians. She further adds that while the women would not have kept it secret that they received help from 'wise-women' or other healers, it is unlikely that the Hippocratics conducted any survey into the number of women that fell ill. Therefore, we do not know to what extent illness spread among women.

Helen King (King 2001:109) argues that another explanation for the sparse number of female cases in the epidemics could be due to the ancients view of the female body. If the epidemics are the notes of individual physicians, they might not have seen it as necessary to write down notes on their female cases. Men's bodies were seen as more complicated, than the

straightforward female body. Or that they did not find woman's illnesses interesting. However, that would then make the writers of the *diseases of women* exceptions unusual (King 2001:109).

Another possibility is that women would have treated themselves. Women performed self-examinations of their bodies, even when consulting a midwife, unless she was unable (Rousselle 1988:25-26). It was not uncommon to treat oneself, with garden plants and herbs or plants grown in the wild (Oberhelman 2014:48).

The temple inventories list from Brauron, found at Brauron as well as at the Acropolis in Athens, lists dedications made to the Goddess. One of them was made by the wife of Epeukhes, a man from a family of physicians that likely was one too. Being a part of a physician's families did not preclude women from approaching temple medicine, and the help of the Gods (Demand 1994:89-90).

In addition to Asklepios, other Gods and local heroes were associated with healing and had the promotion of health as one of their functions. One of them was Artemis, who was associated with the transition into womanhood (See chapter 3.1 in this thesis); women's decease; and difficult childbirths (King 2001:100; Oberhelman 2014:49). Nancy Demand (1994) argues that young women were comfortable and familiar with Artemis, as she played an important part of their childhood.

Artemis is not alone in her role as helper of the midwives, she is often identified with Eileithyia or Lochia (Demand 1994:88). The former of which, the Goddess of childbirth is the daughter of Zeus and Hera (March 2009:76, 84-85). Multiple epigrams in Loeb Classical Library's collection *The Greek Anthology*, tells of the Goddesses being appealed to, to ensure successful births. E.g., number 146 "*Once more, Ilithya, come at Lycaenis' call, easing thus the pangs of labour. This, my Queen, she bestows on thee for a girl, but may thy perfumed temple afterwards receive from her something else for a boy.*" (Anthology.146). This epigram also promises to give the Goddess another votive if the woman should bear a son next (Demand 1994:88).

It was customary to dedicate votives reliefs to the god to show gratitude. Votives could range from simple terracotta figurines to relief sculptures, showing that woman of all classes sought the help of the Gods. Most votives reliefs had simple dedicatory inscriptions with no

specifications, some thank the Goddess for a safe delivery or the birth of a son (Demand 1994:89).

The ancients believed that dreams could convey signs of the health of the body, and through dreams Asclepius was able to heal the pilgrims that came to his sanctuary. He was not removed from the world of the physicians, and the family of physicians was just as likely to make an offering and approach Asclepius for help as anyone else. If the help of a physician did not suffice, an option would be to travel to Asclepius for help. Asclepius seem to have had a talent for reproductive health, and a monopoly on unnaturally long pregnancies.

While this could be a reason for women choosing temple healing over a physician that might not have been the case. There are more male cases in the Hippocratic epidemics, but that might be because the Hippocratic physicians did not see the need to document the cases of their female patients rather than women preferring temple healing. Women might also have practised self-treatment to a higher degree than men. Further, while there are multiple recorded cases of females being healed by Asclepius, some even after having approached physicians, it should not be assumed that the switch only went in that direction. The physicians did not require dedications, and therefore such inscriptions does not exist.

Additionally, Asclepius was not the only God associated with health care. Artemis stands out as especially relevant with her association to childbirth, and the transition into womanhood. Women might therefore have gone to multiple different sources of assistance, and despite the obvious connection Asclepius have to reproductive health, his assistance might not have been more popular than the local physician.

Chapter Five - A Woman's Choice

“Mad dogs we knock on the head; the fierce and savage ox we slay; sickly sheep we put to the knife to keep them from infecting the flock; unnatural progeny we destroy; we drown even children who at birth are weakly and abnormal.”

(Seneca *De ira* 1.15:2)

Lucius Annaeus Seneca, commonly known as Seneca the younger, was a Roman rhetorician and philosopher active mid-first century AD. He was concerned with moral philosophy, practical ethics, and action (Griffin 2013:1-2). In his text *De ira*, in English *on anger*, in his discussion on anger he mentions drowning weakly and abnormal neonates (Seneca *De ira* 1.15:2). Despite what Seneca writes, not only the sickly and deformed neonates were disposed of.

Until now I have argued for how gender have affected gynaecology and obstetrics in situations where pregnancy was desirable, least by society. In this chapter I will examine options available in situations where pregnancy was not desirable or where miscarriage occurred. I will examine abortifacients, infant exposure, infanticide, and mortality rates.

5.1 Abortifacients

As the quote by Seneca the younger tells us, infanticide was practised in antiquity. And as I will examine in this chapter, not only in the cases, as Seneca describes them, of *weakly and abnormal* neonates (Seneca *De ira* 1.15:2) However, if having children were undesired the simplest way was to not get pregnant. Despite the focus on fertility, and the solution to female ailments often being intercourse and pregnancy, it seems exceptional with families with more than three or four children. The small number of children could be a result of the high infant mortality, infant exposure, and simply sexual abstinence (Blundell 1998:51). I will examine abortifacients and argue that gender affected the options and possesses to avoid having children.

I will be using the term contraceptives for hindering pregnancy. I will not take a standpoint in the modern debate on when a life becomes a life, or at what stage of pregnancy termination should no longer be available to women. I will therefore simply use the term abortifacients regarding any pregnancy termination after intercourse if the women had declared herself

pregnant and attempted or succeeded in terminating the pregnancy. I take no account of the religious and ethical doctrines that argue the line should be drawn at fertilization and I will simply draw the line at before and after intercourse.

There are no evidence of condoms in ancient Greece (Blundell 1998). Nor is there evidence for condoms in ancient Rome (Amy and Thiery 2015:288; 291). It seems like responsibility and initiative of contraceptives were the women's (Blundell 1998:51). Soranus in his *gynaecology* differentiate between contraceptives and abortifacients, as the first hinders contraception to take place, such as sea sponges soaked in vinegar, that the Roman women would insert into the vagina prior to intercourse (Smith 2013:21). And the latter ends pregnancy after conception. He further add a third option, that some would group with abortifacients which he calls an "expulsive". It differs from the other two as it does not include any drugs, but rather excessive movements end pregnancy (Soranus *Gynecology 1.60*).

The use of abortifacients were a private matter in ancient Greece and there was no laws against using abortifacients (Dasen 2013:26). However, it still brought with it controversy. The Hippocratic oath, slightly differently quoted by Soranus as "*I will give to no one an abortive,*" has been interpreted multiple ways. Even in antiquity there was disagreements about giving abortifacients. Soranus explains how despite the Hippocratic's prohibited abortifacients they recommended the "Lacedaemonian leap" as an expulsive. Soranus refers to the Hippocratic treatise *Nature of the child* and recounts the physician's story of his encounter with a young woman (Soranus *Gynecology 1.60*). When she came to him, he told her:

"spring up and down so as to kick her heels against her buttocks, and when she had sprung for the seventh time, the seed ran out on to the ground with a noise, and the girl on seeing it gazed at it and was amazed"

(Hippocrates *Nature of the child 2*).

As this method did not include any drugs it was not strictly understood as an abortifacient (Soranus *Gynecology 1.60*; Temkin 1991:119-120n163). Other physicians made decision on who to administer abortifacients to on a case-by-case basis. Soranus tells us of one who would refuse women who had become pregnant because of an affair or vanity of youthful beauty. But did give abortifacients if the uterus was too small, or he saw another reason the pregnancy would be dangerous (Soranus *Gynecology 1.60*).

Pomegranate peel or grind are a frequent ingredient in suppository recipes, both in ancient Indian, Classical Greece, as well as in medical and modern folk medicine. When tested in laboratory it seem to be some validity to its claim as an anti-fertility agent. Similarly, were many of the other ingredients, like Myrrha and Queen Anne's Lace, effective to some degree (Riddle 1992).

The most effective way to avoid children is to avoid conception, or to take an abortifacient to expel the embryo shortly after conception. Despite abortifacients being a private matter, the administration of such procedures was controversial. Some of the remedies might have been effective to some degree, but moral may have limited how often they were prescribed, at least by male Hippocratic physicians. Using extensive physical movements was a loophole, and was prescribed, at least to some young girls. As there are no evidence of condoms in ancient Greece nor Rome, it seems like the responsibility of contraceptives was on the woman.

5.2 Well G5:3 and Mortality Rates

Like maternal deaths we cannot know the actual extent of infant mortality. The first 28 days of the baby's life is the neonate stage, followed by infancy until age one (Becker 1995:25). Infant mortality rate is based on how many dies that first year, per 1000. I will argue that norms connected to gender, and female health, affected the infant mortality rate, as well as the attitude around infant exposure.

Estimations of the infant mortality rate have been made, and the early Roman empire could have had an infant mortality rate as high as 300 per 1000. Moreover, surviving past the infant stage did not equal likelihood of growing up. It has been estimated that 45 percent of children died before age 5 (Parkin 2013:47). Regardless of the percentage, the child mortality rate was high. The Epictetus quote Marcus Aurelius used in his Meditations show the reality of children dying.

“A man while fondly kissing his child, says Epictetus, should whisper in his heart: ‘Tomorrow peradventure thou wilt die.’ Ill-omened words these! Nay, said he, nothing is ill-omened that signifies a natural process. Or it is ill-omened also to talk of ears of corn being reaped.”

(Marcus Aurelius *Meditations* 11.34).

Marcus Aurelius also writes of how death is a more vivid reality when looking at children, referring to them as “*little souls bearing up corpses*”. It is a description also quoted from Epictetus, which he repeats multiple times (Marcus Aurelius *Meditations* 9.24; 4.41). Marcus Aurelius and his wife personally knew the hard reality. Out of their 13 or 14 children only their son Commodus lived until adulthood (Parkin 2013:40). Marcus Aurelius writes in the middle of the second century AD, and his references to Epictetus are from the middle of the first century.

Located outside the western boundary of the Athenian Agora, about 40 meters from the temple of Hephaestus is the remains of Well G5:3 (See map in figure 6). Construction likely dates to the classical period. It was connected to a water system, and a cistern meant for the artisans’ workshops. During the second century AD the shops were abandoned. Consequently, so was the well. It was excavated in 1937 and 1938 by an American team (Liston and Rotroff 2013:63-66). In Hesperia J. Lawrence Angel (1945) describes the well find as “[...] *bones of about 175 infants of which the overwhelming majority are newborn or full term foetuses, together with several older infants.*”. It was discovered in 1995 that the bone material was never finished sorted. The year after a recount was made that dramatically increased the number of infants to 449 (Little 1999:284). Therefore, the high infant mortality rates Marcus Aurelius writes of in the Roman period was present during the Hellenistic period, and likely the classical and other preceding periods too.

The American team dug down 21.45 meters, meeting the water table at 11 meters. 8 kilograms of bronze scraps were found at 16 meters to 18.45 meters. Their origin was most likely the nearby metal workshop. Associated with the industrial area were fragments of tools also discarded in the well. There have also been found limb bones from domesticated goats, sheep, cows, and pigs as well as fish bones, likely from a nearby butcher. The theory is that when the well was abandoned it became a convenient place to dump trash (Liston and Rotroff 2013:64-66; Snyder 1999:284). The infant bones were found in one mass together with the animal bones. Exact depths or stratigraphic differences was not recorded (Liston and Rotroff 2013:65).

Like other domestic dumps around the agora, the artifacts found in the well are as to be expected. However, some of them are quite relevant to point out, as they have special reference to infants. Along, possible grave gifts of eight almost intact oil bottles, unguentaria, the most

common grave gifts in the Hellenistic period were there with a baby feeder (See figure 7). , and basins (Liston and Rotroff 2013:65-66), that could have been to clean the child after birth.

Until 1992 when the infant cemetery at Kylindra on the island of Astypalaia was excavated, Well G5:3 was the largest infant burial known (Hillson 2009:137-239). 2770 infant had been discovered by 2013, mostly in individual inhumation graves, dating from the geometric period until the Roman era (Dasen 2013:33). Comparing the infants with modern day neonates and infants indicate that most of the infants were at the development stage expected for a full-term pregnancy (Hillson 2009:137-139).

It is quite uncommon to find neonate and infant bones (Hillson 2009:137-138), and for a long time it was believed that neonates and infantes were neglected until an older age. However, the cemetery at Kylindra indicate a possibility of anticipation associated with the arrival of a new family member (Dasen 2013:33). Pliny the elder writes that "*It is the universal custom of mankind not to cremate a person who dies before cutting his teeth.*" (Pliny *Natural History* 7.73). The infants at Astypalaia were placed inside a pot laid on its side, with a cut on the upper side. The neck was filled with a stone stopper or mortar. The pots show signs of use, some have lead repairs (Hillson 2009:139).

The neonates have been positioned in a foetal position, on their sides with the knees drawn up towards the chest, head in the direction of the pots neck. Hillson (2009) compares the pots to the womb, and their burial as symbolic representation of birth. 10 percent of the neonates were placed with their feet towards the pots neck, possibly representing breech births. The modern percentage of breech births is 2-5 percent, making the percentage, at least at Astypalaia double what it is today. Additionally, 1.9 percent of the pots contained two infants, possibly twins (Hillson 2009:142).

At 14.70 meter to 20.50 in Well G5:3 meters the infant bones were found, among broken pottery. Most of the pottery found in the well was contained to this layer. The feeding bottle is one of the pieces that were whole or nearly whole. 80 percent of the household pottery in the well can be associated with birth. Further, the basins, large bowls, and kraters seem to have gone into the well whole, and not after they broke as would have been expected if they were trash. The ones of the size enough that a neonate would fit in it, might have been used to carry the dead to the well (Liston and Rotroff 2013:65-67). In the Greek world burial of perinatal

infants are rare (Liston and Rotroff 2013:62). Perinatal infants are from the twenty-eight weeks in utero to the first week of life. The age of the infants in Well G5:3 range from twenty-six weeks in utero to six months old, with a peak at full term infants. The age has been estimated by measuring the bone length of the right femur (Liston and Rotroff 2013:69).

When Aristotle writes of human reproduction in *History of Animals* in book nine, one of the topics he describes are miscarriages and stillbirths. He explains how “*those that are born earlier than the seven months can in no case live.*”(Aristotle *History of Animals* 9.584b). Neonates born in the seventh month of pregnancy are weak, but they do put on weight, and some survive. However, as acknowledge above, the infant mortality rate was high. 40 percent of the infants in Well G5:3 died of natural causes. 15 percent likely died of complications with prematurity, as they died at twenty-four to thirty-four weeks in utero; sixth month to eight and a half month of the pregnancy (Liston and Rotroff 2013:70; 73)

Like Angel, Lisa M. Little (1999:284) does point out that while a few of the infants can by age estimation be categorized as older infants, and some as fetuses, the majority were neonates (Little 1999:284). As neonates were not a part of the family before *amphidromia* it is likely that any child that died before that time did not receive a formal burial. The *amphidromia*, are the first ritual meant to introduce the infant into the family. *Amphidromia* would have been followed by other rituals or events, before a larger celebration of the end of the pollution period associated with birth, held around fourteen days after birth (Garland 2013:208-209).

In their early training girls, while trying to imitate her mother’s actions so she would be able to duplicate her social role later in life, one of the aspects girls learned was moderation of intake of food and drink (Wolicki 2015:305-306). It was believed that girls and women needed less food than men.

The preferential feeding of men eventuated in malnutrition in the female population (Demand 1994:72). When a woman is undernourished during pregnancy it affects the foetus. For females that experience malnourishing through their mothers in the first two trimesters in utero grow up to have more difficulties and less favourable outcomes themselves when they become pregnant (Demand 1994:8).

Girls were married around the time or soon after menarche; between the age of twelve to fourteen, for girls from elite families. Young girls, especially if they were malnourished would have had underdeveloped pelvis. Eventuating in more pregnancy related mortality and significant injury among young mothers (Laskaris 2021:84-86). The less time that had passed after menarche before pregnancy took place the higher risk was the girl at. When ovulation first begins, and menarche occurs the reproductive system is not yet fully matured, consequently can issues that arise during early pregnancies result in permanent effect on the woman's childbearing capabilities. Even with the best of modern medicine are the maternal deaths rate higher with girls under the age of seventeen than in older women (Demand 1994:102).

Soranus in his *Gynecology* discusses Diocles the Carystean's text "on gynaecology" and writes that first time mothers and "*young women have difficult labor, whereas those who have often borne have easy labor.*" He goes on to explain that another reason for difficult labour is the large size of some foetuses. (Soranus *Gynecology* 4.1) These two statements fits well with underdeveloped young girls giving birth to babies too large for their pelvis.

There existed critics to early marriage, and consequently early pregnancy. Plato in his *Republic* writes "*For a woman, I said, she should start to produce children for the state in her twentieth year and go on to her fortieth*", in his *Laws* he bring the age down to sixteen to twenty (Plato *Laws* 6.785b). From the Hesiod lines quoted in chapter XX we know he advised that the women should have "*reached puberty four years earlier, and in the fifth she should marry.*" Furthermore, Plato student Aristotle warned against early pregnancy specifically, arguing that "*mating of the young is bad for child-bearing; [...] offspring of the young are more imperfect and likely to produce female children.*" He also comments on how among young women more die in childbirth (Aristotle *Politics* 1335a:10-20). However, in general Greek culture favoured early marriages (Demand 1994:102).

In 1975 twelve individuals, six adults and six children, were found inside a house in Pompeii. It is presumed that they are the owner of the house, a male in his sixties; his wife, a female in her fifties, their two children; their daughter's husband; and their servants. A young male of nine years old share the same minor, genetic spinal disorder as a sixteen-year-old female. Likely the children or grandchildren of the older couple. The bones of a full-term foetus was

found still laying in the abdomen of the young girl, making her nine months pregnant at the time of her death, in 79 AD (Beard 2009:8).

The girl, whose remains have the code Erc110, was not finished growing and had a pelvis that would have been too narrow for her baby to pass through (Laskaris 2021:86; Laurence 2005:89). The girl had a larger quantity of jewels, so it is highly likely she was of the upper classes (Beard 2009:8). Her status fits rather well with our knowledge of young brides. If she would not have died in the pyroclastic surge, she would have gone through long days of labour with no possibility of birthing the neonate, before dying from exhaustion (Laskaris 2021:86; Laurence 2005:89). The unfortunate girl from Pompeii was not alone with her fate. An epitaph from third century BC Rome is dedicated to the four daughters of Aristodicus, who all died in childbirth. Pliny the younger writes in his letters of another pair of sisters who died “*in the flower of their youth*” (Pliny the Younger *Letters* 4.21), in childbirth while their infants survived (Lefkowitz and Fant 2016:243).

Miscarriage and perinatal mortality was a real concern. Ancient medical writers believed that girls that were too young would produce weak children, or not be able to carry their baby to term at all. Women, therefore, kept an eye out for any sign of impending miscarriages. E.g., Bleeding, shrinking of the breasts, a cold feeling in the thighs or a heavy feeling in the small of their back (Rousselle 1988:47-48). Gender played a part in the mortality rates, as young girls became pregnant before their bodies were matured enough. This resulted in hard pregnancies, which could and often did lead to the death of both mother and child, or one of them.

5.3 Infant Exposure, and Infanticide

Like abortifacients, there were no laws against infant exposure. Not until the father recognized the child as his own about a week after birth did the neonate have any right to life (Dasen 2013:26). Additionally, Children were not considered as full members of society until the age of two and a half years to three years old (Lagia 2007:293). I will argue that the gender of the infant, and the situation of the mother affected the practice of infant exposure and infanticide. Further, I argue that these actions determined by gender norms that aided in the subordination of women, were performed by the women themselves.

Infant exposure differs from infanticide. Sparta is harshly known and associated with infant exposure. Plutarch writes the following:

“The elders of the tribes officially examined the infant, and if it was well-built and sturdy, they ordered the father to rear it,[...] but if it was ill-born and deformed, they sent it to the so-called Apothetae,[...] in the conviction that the life of that which nature had not well equipped at the very beginning for health and strength, was of no advantage either to itself or the state”

(Plutarch *Lycurgus* 16).

However, the practice of exposing infants was not only a spartan practice. It was practised in many places antiquity. There was a multitude of reasons a child was not wanted. Children born without fathers were especially at risk of exposure. This includes children born outside marriages, children conceived within a marriage, where the father passed away before birth, or simply children that were rejected by their father (Grubbs et al. 2013:83-85).

Abandonment of infants would happen at semi-public places, where the infant would have a chance at being taken in by someone else. Since the infant was yet a full member of society the family would by exposing it in public give the responsibility of that life to the society. If the infant was not taken in, it would have been considered rejected by society, and was not meant to grow up to become a part of it. The infant's death was consequently not on the parents' hands, and infant exposure was not considered murder or neglect (Boswell 1984:13).

The birth of a daughter into the family was not as well met as the birth of a son. As we have seen, where as a boy brought the promise of a stable future for the family, the *oikos*, a girl did not. While it is highly likely her family loved her as she grew up, she was still viewed as a temporary member of the household, waiting to be married off (Demand 1994:3). The value put on a son over a daughter may have led to more girls being exposed than boys (Rousselle 1988:67).

The quote by Plutarch has a similar attitude as the Seneca the younger quote at the beginning of this chapter (Seneca *De ira* 1.15:2). Exposure differs from infanticide, even though both may result in the death of a neonate. One infant found in Well G5:3 may have died of infanticide or because of child abuse. It was six months old when it died. Four to fourteen days before death it suffered an injury to the skull, that was a result of a sharp object (Liston and Rotroff 2013:71).

Close to a brothel in Ashkelon, in Israel, a sewer that contained almost 100 neonates were discovered. It dates to the late Roman and early Byzantine period (Hillson 2009:138). The remains of a woman from Pompeii had given birth to 4-5 children and had the same pelvic abnormalities that have been found in prostitutes in north America (Laurence 2005:89). She was likely also a prostitute, and children may have hindered her occupation, and she might have either exposed or committed infanticide to avoid having them grow up to be her responsibility. Many of the neonates in the Ashkelon sewer had teeth buds that was stained dark red or brown. This occurs when the hard tissues get iron oxide in them (Smith and Kahila 1992:668-673). The most common methods of infanticide was, and still is today drowning and suffocation. Both methods would have resulted in stained teeth buds in the neonates.

Even if pregnancy did occur unwanted the ancients had options. Infant exposure gave the child an opportunity to be taken in by someone else. Despite Plutarch explaining how the decision to expose or keep a child in Sparta depended on its health and strength, it is very likely that the social value put on sons resulted in more girls being exposed. In that way did gender play a role in the survival of children. Infanticide was more dramatic, but likely a method used by the prostitutes that did not want children. Women were the vulnerable in the exchange of prostitution, and as a result had to deal with the consequences of unwanted children. Infanticide was likely an option often used.

Chapter Six - Concluding Remarks

“Men say that we live a life free from danger at home while they fight with the spear. How wrong they are! I would rather stand three times with a shield in battle than give birth once.”

(Euripides *Medea* 245-255)

I began this thesis with this *Medea* quote, and the impression that childbirth was scary based on the fact that *Medea* would rather to partake in battle three times rather than give birth once. Further, as Ancient Greece and Rome were androcentric societies, and gynaecology and obstetrics by nature is gynocentric it is interesting to examine how these societies navigated female health care and reproductive health. My aim for the thesis was to examine how gender affected gynaecology and obstetrics in the Greco-Roman world.

The androcentrism of the Greco-Roman world eventuated in morals that to some degree limited women. Men were not supposed to touch or look at a woman's body, nor to use too crass language in her presence. How then was the male physicians to help their female patients. He seems to have been exempt from social morals, and a space where gender played less of a role occurred. However, the presence of women helpers might still have been preferred. Again, a space where social morals on appropriate women behaviour played less of a role occurs. Women who usually fulfilled the roles of wives and mothers, or maybe lower status vendors, gained the titles of *maia*, and *iatros*. Female physicians received formal education to execute the tasks of their occupation.

This break in gender roles, and societal expectation must have been quite significant. To explain why gynaecological practice was performed the way it was, and by whom, a myth was constructed. It depicted a world where women were not allowed to practice medicine. The proper women also followed the social morals on how to behave around men and did not allow them access to their bodies. The explanation of why midwives were allowed to practice medicine was explained by addressing the real-life issue of the high maternal death rate. In the myth then a women broke her gender role, and dressed as a man, but revealed her gender to her patients to be allowed to treat them. Over time the term for physician received a female version, indicating that women physicians became more and more normal, to the point where it affected the language.

The social morals on appropriate women behaviour was introduced at an early age. The transition into womanhood was rushed in comparison, to the transition into manhood. This transition is further affected by social morals. Men had limited access to women's bodies, and as the androcentrism of antiquity heighten the importance of the male experience their empirical knowledge also affected the medicine that was specifically female. By attaining the oral tradition of the midwives, and other women, the men tried to understand female physiology based on their knowledge of their own bodies, and logic. This resulted in some misunderstandings.

As males do not have a uterus, they did not know where it went, and it therefore gained the agency to wander around. Many, of not all female ailments were blamed on the uterus. This was however solvable, as the uterus could be kept content if the women was sexually active. The uterus want for sexual activity eventuated in the belief that young girls lost control of their sexual urges at the same time as menarche occurred. Further important was virginity, combined they created a social need for early marriages for young girls. To be ready for their new role when the time came girls had already gone through social puberty before physical puberty occurred.

Early marriages, the medical advice to have intercourse to become pregnant, along with the idea that a healthy woman was fertile eventuated in many early pregnancies. Despite the first menarche occurring, the female body is not yet fully developed. The ancients were aware of the dangers of early pregnancies. Still the gender norms, and social expectations must have been running too deep for this knowledge to have had too much of an affect.

In cases where the children were unwanted is the androcentrism of society more visible. As this is moving away from the very intimate childbirth the traditionally interpreted gender roles becomes more present. As women's health is synonymous with fertility, infertility is treated as a female issue, and contraceptives becomes a female responsibility. Moreover, women seem to have had more to do with infant exposure and infanticide. Their actions, however, are very much dedicated by society's androcentric value on male children. It is very likely that if an infant was born a girl, despite action taken before conception to ensure a boy, she would be exposed off in a public place. The more dramatic, but also practiced method of getting rid of neonates was infanticide, which the woman would have performed on her own.

When *Medea* states that she would rather fight in battle three times than give birth once it is a good comment on how gender norms affected gynaecology and obstetrics. Social norms did not aid in the difficulties of childbirth, rather, it may have aided in making it even more difficult and dangerous. Gynaecology and obstetrics in androcentric societies did however create a space open to the renegotiation of gender roles, where women gained agency of their own health. The women were still raised with the androcentric gender norms, and they too did follow them.

6.1 Conclusion

My aim for the thesis was to examine how gender affected gynaecology and obstetrics in the Greco-Roman world. Gender roles and norms that eventuated from the androcentrism of the ancient Greek and Roman societies affected gynaecological practice; it affected the knowledge the medicine was based on, and the people who practiced the medicine. In some ways gender created limitations, and dangerous situations, but it also created a space where the gender roles differed from the gender roles in the rest of society. The gynocentric nature of gynaecology and obstetrics affected the androcentrism of the ancient societies just like the androcentrism affected the practice. This created a new set of gender roles. I have examined some key situations and elements of ancient gynaecology and obstetrics and the affect gender had on such practises. This topic is quite large, and a different set of gender roles in this specific context alone would benefit from further research.

Figures



Figure 1, Part of the east frieze of the Parthenon, From the left, first is figures 31 and 32. Museums number 1816,0610.19. © The Trustees of the British Museum



Figure 2. Scribonia Attice's tomb, tomb 100 at Ostia. © Parco Archeologico di Ostia Antica



Figure 3 Scribonia Attice relief on tomb 100 at Ostia. © Parco Archeologico di Ostia Antica



Figure 4 Phanostrate's funerary stele. © 2020 National Archaeological Museum

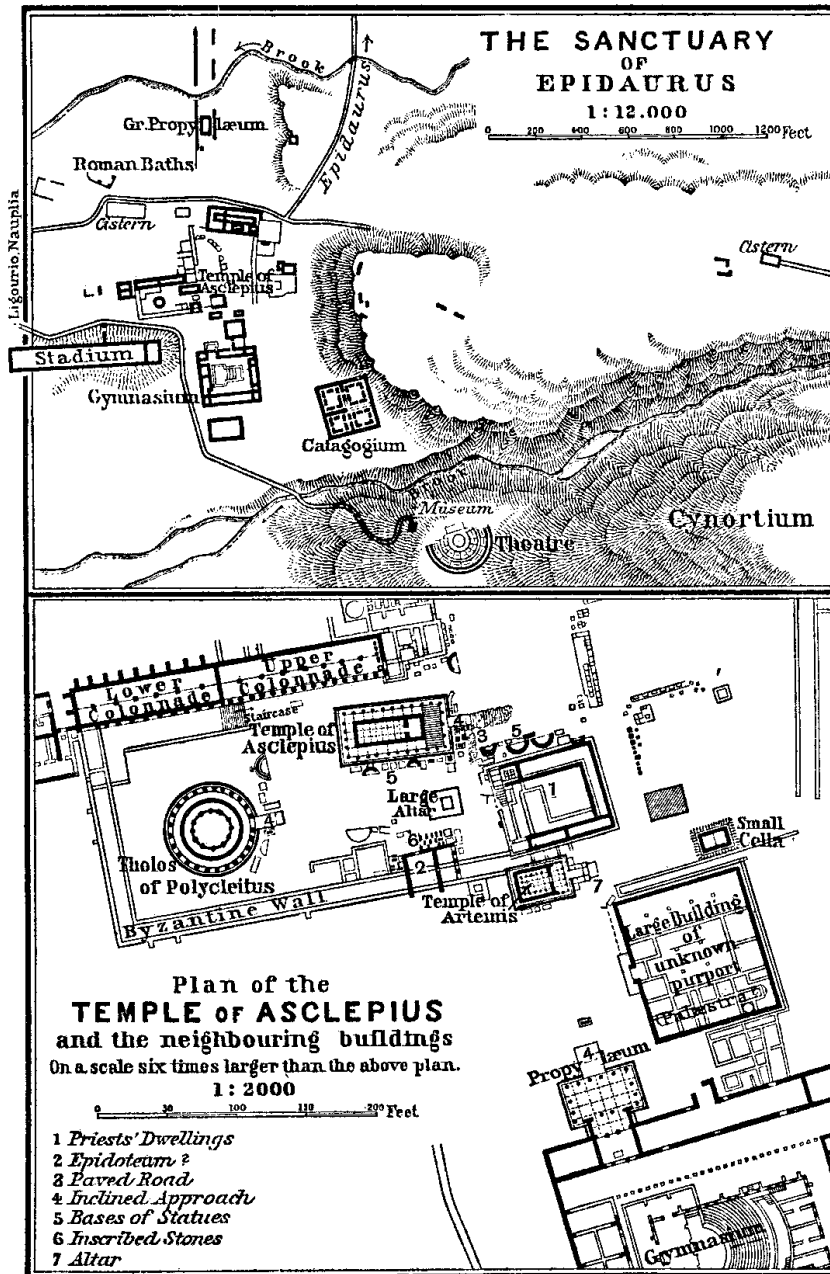


Figure 5 Maps of the healing sanctuary of Asklepios. Figure

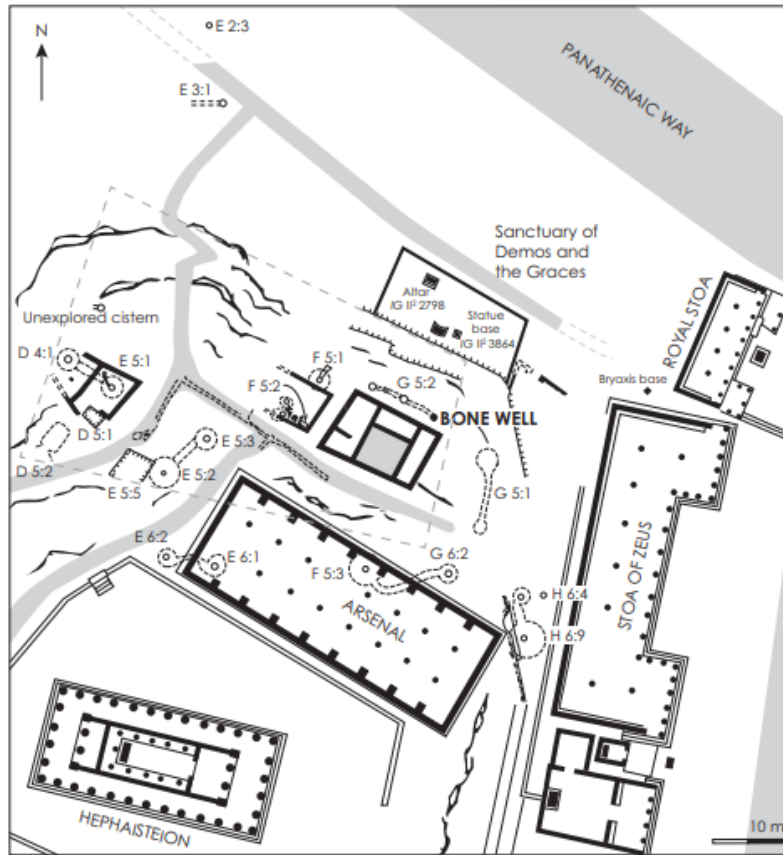


Figure 6 Reconstructed plan of the area outside north-west corner of the Agora in second century BC. Figure 1 in Liston et.al 2018, p. 2



Figure 7 Baby feeder, found in Well G5:3. Figure 26 in Liston et.al 2018,p. 76

Bibliography

Amadou, Christine

2017 *Hva er Antikken?* Universitetsforlaget, Oslo.

Amy, Jean-Jacques, and Michel Thiery

2015 The condom: A turbulent history. *The European Journal of Contraception & Reproductive Health Care* 20(5):387-402.

Angel, Lawrence J.

1945 Skeletal Material from Attica. *Hesperia* 14(4).

Anthology, The Greek

Volume I: Book 1: Christian Epigrams. Book 2: Christodorus of Thebes in Egypt. Book 3: The Cyzicene Epigrams. Book 4: The Proems of the Different Anthologies. Book 5: The Amatory Epigrams. Book 6: The Dedicatory Epigrams. Loeb Classical Library 67 ed. Translated by W. R. Paton. Cambridge, MA: Harvard University Press, 1916.

Aristophanes

Clouds. Wasps. Peace, edited by Jeffrey Henderson. Loeb Classical Library 488 ed. Translated by Jeffrey Henderson. Cambridge, MA: Harvard University Press, 1998.

Aristotle

History of Animals, Volume III: Books 7-10, edited by D. M. Balme. Loeb Classical Library 439 ed. Translated by D. M. Balme. Cambridge, MA: Harvard University Press, 1991.

Politics. Loeb Classical Library 264 ed. Translated by H. Rackham. Cambridge, MA: Harvard University Press, 1932.

Aurelius, Marcus

Marcus Aurelius, edited by C. R. Haines. Loeb Classical Library 58 ed. Translated by C. R. Haines. Cambridge, MA: Harvard University Press, 1916.

Bannert, Herbert

2015 Medicine. In *A companion to Ancient Education*, edited by W. Martin Bloomer. Wiley Blackwell.

Barringer, Judith M.

2014 *The Art and Archaeology of Ancient Greece*. Cambridge University Press.

Beard, Mary

2009 *Pompeii: The life of a Roman Town*. Profile Books.

Beaumont, Lesley A.

2012 *Childhood in Ancient Athens. Iconography and Social History*. Routledge.

2013 Shifting Gender: Age and Social Status as Modifiers of Childhood Gender in Ancient Athens. In *The Oxford Handbook of Childhood and Education in the Classical World*, edited by Judith Evans Grubbs, Tim Parkin, and Roslynne Bell. Oxford University Press.

- Becker, Marshall Joseph
1995 Infanticide, Child Sacrifice and Infant Mortality Rates: Direct Archaeological Evidence as Interpreted by Human Skeletal Analysis. *Old World Archaeology* 18(No.2).
- Belier, Wouter W.
1994 Arnold Van Gennep and the Rise of French Sociology of Religion. *Numen* 41(2):141-162.
- Bieber, Margarethe
1961 *The history of the Greek and Roman Theater*. Princeton University Press.
- Blok, Josine
2017 *Participation: Public Roles and Institutions*. Citizenship in Classical Athens. Cambridge University Press, Cambridge.
- Blundell, Sue
1995 *Women in Ancient Greece*. Harvard University Press, Cambridge, Massachusetts.

1998 *Women in Classical Athens*. Bristol Classical Press.
- Boswell, John Eastburn
1984 Expositio and Oblatio: The Abandonment of Children and the Ancient and Medieval Family. *The American Historical Review* 89(1).
- Buxton, Richard
2004 *The Complete World of Greek Mythology*. Thames and Hudson.
- Catullus
Catullus. Tibullus. Pervigilium Veneris, edited by G. P. Goold. Loeb Classical Library 6 ed. Translated by F. W. Cornish, J. P. Postgate, and J. W. Mackail. Cambridge, MA: Harvard University Press, 1913.
- Chamerlain, Prudence
2017 *The Feminist Fourth wave*. Palgrave macmillan.
- Cochrane, Kira
2013 *All the rebel women*. guardianshots.
- Conkey, Margaret W, and Janet D Spector
1984 Archaeology and the Study of Gender. *Advances in Archaeological Method and Theory* Vol.7:1-38.
- Cresswell, Jenny
2022 Maternal deaths <https://www-who-int.ezproxy.uio.no/data/gho/indicator-metadata-registry/imr-details/4622>, accessed.
- Criore, Raffaella
2015 School Structures, Apparatus, and Material. In *A Companion to Ancient Education*, edited by W. Martin Bloomer. Wiley Blackwell.
- Dasen, Véronique

- 2013 Becoming Human: From the Embryo to the Newborn Child. In *The Oxford Handbook of Childhood and Education in the Classical World*, edited by Judith Evans Grubbs, and Tim Parkin. Oxford University Press.
- Dean-Jones, Lesley Ann
1994 *Women's bodies in classical greek science*. Oxford university press, New York, United States.
- Demand, Nancy
1994 *Birth, Death, and Motherhood in Classical Greece*. The Johns Hopkins University Press.
- Dillon, Matthew P. J.
2013 Engendering the Scroll: Girls' and Women's Literacy in Classical Greece. In *The Oxford Handbook of Childhood and Education in the Classical World*, edited by Judith Evans Grubbs, and Tim Parkin. Oxford University Press.
- Dolansky, Fanny, and Stacie Raucci
2018 *Rome. A sourcebook on the ancient city*. Bloomsbury.
- Draycott, Jane
2019 *Roman Domestic Medical Practice in Central Italy: From the Middle Republic to the Early Empire*. Routledge.
- Euripides
Cyclops. Alcestis. Medea, edited by David Kovacs. Loeb Classical Library 12 ed.
Translated by David Kovacs. Cambridge, MA: Harvard University Press, 1994.

Medea, edited by David Kovacs. Translated by David.
- Flemming, R.
2013 The invention of infertility in the classical Greek world: medicine, divinity, and gender. *Bull Hist Med* 87(4):565-590.
- Flemming, Rebecca
2000 *Medicine and the making of Roman Women. Gender, Nature, and Authority from Celsus to Galen*. Oxford University Press.
- Fordyce, Christian James
1961 *Catullus. A commentary*. Oxford University Press.
- Garland, Robert
2013 Children in Athenian Religion. In *The Oxford Handbook of Childhood and Education in the Classical world*, edited by Judith Evans Grubbs, Tim Parkin, and Roslynne Bell. Oxford University Press.
- Gennep, Arnold van
1960 *The rites of Passage*. Translated by Monika B. Vizedom, and Gabrielle L. Caffee. The University Chicago Press.
- Gilchrist, Roberta
1999 *Gender and Archaeology. Contesting the past*. Routledge.

Glenn, Cheryl

1994 Sex, Lies, and Manuscript: Refiguring Aspasia in the History of Rhetoric *Collage Composition and Communication* 45.

Golden, Mark

1990 *Children and Childhood in Classical Athens*. John Hopkins University Press.

Graf, Fritz

2003 Initiation: a concept with a troubled history. In *Initiation in Ancient Greek Rituals and Narratives. New critical perspectives*, edited by David B. Dodd, and Christopher A. Faraone. Routledge.

Green, Monica H, and Ann Ellis Hanson

1994 Soranus of Ephesus: methodicorum princeps. *Aufstieg und Niedergang der romischen Welt, Teil II* 37.

Griffin, Miriam T.

2013 Introduction. In *Seneca on Society*. Oxford University Press, Oxford.

Griffith, Mark

2015 The Earliest Greek Systems of Education. In *A companion to ancient education*, edited by W. Martin Bloomer. Blackwell Companions to the Ancient World Wiley Blackwell.

Grubbs, Judith Evans, Tim Parkin, and Roslynne Bell (editors)

2013 *The Oxford Handbook of Childhood and Education in the Classical World*. Oxford University Press.

Hankinson, R. J.

2008 *The Cambridge Companion to Galen*. R. J. Hankinson. Cambridge University Press.

Hanson, Ann Ellis

1991 Continuity and Change

Three Case Studies in Hippocratic Gynecological Therapy and Theory. In *Women's History and Ancient History*, edited by Sarah B. Pomeroy, pp. 73-110. University of North Carolina Press.

Harlow, Mary, and Ray Laurence

2005 *Growing up and Growing old in Ancient Rome. A life course approach*. Routledge.

Hemelrijk, Emily A.

2015 The education of Women in Ancient Rome. In *A companion to ancient education*, edited by W. Martin Bloomer. Wiley Blackwell.

Henderson, Jeffrey

2000 Introduction. In *Birds. Lysistrata. Women at the Thesmophoria*, edited by Jeffrey Henderson. Loeb Classical Library 179 ed. Cambridge, MA: Harvard University Press.

Hesiod

Theogony. Works and Days. Testimonia, edited by Glenn W. Most. Loeb Classical Library 57 ed. Translated by Glenn W. Most. Cambridge, MA: Harvard University Press, 2018.

Hillson, Simon

2009 The World's Largest Infant Cemetery and Its Potential for Studying Growth and Development. *Hesperia Supplements* 43.

Hippocrates

Diseases of Women 1–2, edited by Paul Potter. Loeb Classical Library 538 ed. Translated by Paul Potter. Cambridge, MA: Harvard University Press, 2018.

Epidemics 2, 4-7, edited by Wesley D. Smith. Loeb Classical Library 477 ed. Translated by Wesley D. Smith. Cambridge, MA: Harvard University Press, 1994.

Generation. Nature of the Child. Diseases 4. Nature of Women and Barrenness., edited by Paul Potter. Loeb Classical Library 520 ed. Translated by Paul Potter. Cambridge, MA: Harvard University Press, 2012.

Nature of Man. Regimen in Health. Humours. Aphorisms. Regimen 1-3. Dreams. Heracleitus: On the Universe. Loeb Classical Library 150 ed. Translated by W. H. S. Jones. Cambridge, MA: Harvard University Press, 1931.

Places in Man. Glands. Fleshes. Prorrhetic 1-2. Physician. Use of Liquids. Ulcers. Haemorrhoids and Fistulas, edited by Paul Potter. Loeb Classical Library 482 ed. Translated by Paul Potter. Cambridge, MA: Harvard University Press, 1995.

Homer

Iliad, Volume I: Books 1-12, edited by William F. Wyatt. Loeb Classical Library 170 ed. Translated by A. T. Murray. Cambridge, MA: Harvard University Press, 1924.

Hoyert, Donna L.

2019 Maternal mortality rates in the United States. Report.

Hurd-Mead, Kate Campbell

1933 *An introduction to the History of Women in Medicine*. Annals of medical history.

Hyginus

Fabulae. Translated by R. Scott Smith, and Stephen M. Trzaskoma. Hackett Publishing Company Inc.

JACT, Joint Association of Classical Teachers

2017 *The World of Athens. An introduction to Classical Athenian culture*. Robin Osborne. Cambridge University Press.

Kalachanis, Konstantinos, and Ioannis E. Michailidis

2015 The Hippocratic View on Humors and Human Temperament. *European Journal of Social Behaviour* 2.

Kamm, Antony, and Abigail Graham

2015 *The Romans. An introduction*. Routledge.

King, Helen

1986 AGNODIKE AND THE PROFESSION OF MEDICINE. *Proceedings of the Cambridge Philological Society* (32 (212)):53-77.

2001 *Hippocrates' woman : reading the female body in ancient Greece*. Routledge, London ; New York.

2005 Women's health and recovery in the Hippocratic corpus. In *Health in Antiquity*, edited by Helen King. Routledge

Knight, Marian, and Derek Tuffnell

2018 A View From the UK: The UK and Ireland Confidential Enquiry into Maternal Deaths and Morbidity. *Clinical Obstetrics & Gynecology* 61(2):347-358.

Kosmopoulou, Angeliki

2001 'Working Women': Female Professionals on Classical Attic Gravestones. *The Annual of the British School at Athens* 96:281-319.

Kovacs, David

1994 Introduction. In *Euripides Cyclops. Alceste. Medea*, edited by David Kovacs. Loeb Classical Library 12. Harvard University press.

Laes, Christian

2010 *Hippocrates and Medical Education: Selected Papers Presented at the XIIIth International Hippocrates Colloquium, Universiteit Leiden, 24-26 August 2005* Manfred Horstmanshoff. The Educated Midwife In The Roman Empire. An Example Of Differential Equations. Brill.

2015 Masters and Apprentices. In *A Companion to Ancient Education*, edited by W. Martin Bloomer. Wiley Blackwell.

Lagia, Anna

2007 Notions of Childhood in the Classical Polis: Evidence from the Bioarchaeological Record. *Hesperia Supplements* 41.

Laskaris, Julie

2021 Chapter three: Disease. In *A Cultural History of Medicine in Antiquity*, Vol 1, edited by Laurence Totelin. A Cultural History of Medicine, Roger Cooter, general editor. 6 vols. Bloomsbury Academic.

Laurence, Ray

2005 Health and the life course at Herculaneum and Pompeii. In *Health in Antiquity*, edited by Helen King. Routledge.

Lefkowitz, Mary R., and Maureen B. Fant

2016 *Women in Greece and Rome. A source book in translation* John Hopkins University Press.

Lewontin, Richard C.

1982 Biological Determinism. Paper presented at the The Tanner Lectures on Human Values, The University of Utah.

Liston, Maria A, and Susan I. Rotroff

- 2013 Babies in the Well: Archaeological Evidence of Newborn Disposal in Hellenistic Greece. In *The Oxford Handbook of Childhood and Education in the Classical World*, edited by Judith Evans Grubbs, and Tim Parkin. Oxford University Press.
- Liston, Maria A., Susan I. Rotroff, Lynn M. Snyder, and Andrew Stewart
2018 The Agora Bone Well. *Hesperia Supplements* 50.
- Little, Lisa M.
1999 Babies in Well G5:3 Preliminary Results and Future Analysis. *American Journal of Archaeology* 103(No.2).
- MacDowell, Douglas M.
1989 The Oikos in Athenian Law. *The Classical Quarterly* 39(1):10-21.
- March, Jenny
2009 *The Penguin Book of Classical Myths*. Penguin Books.
- Marchat, E.C, and O.J Todd
2013 General introduction. In *Xenophon. Memorabilia. Oeconomicus. Symposium. Apology*, Vol 168, edited by Jeffrey Henderson, Vol. Loeb Classical Library. Harvard University Press.
- Millender, Ellen G.
2009 Athenian ideology and the empowered Spartan woman. In *Sparta: New Perspectives*, edited by Stephen Hodkinson, and Anton Powell. Classical Press of Wales.
- Miller, Eleanor M., and Carrie Yang Costello
2001 The Limits of Biological Determinism. *American Sociological Review* 66(4):592-598.
- Millett, Paul
1984 HESIOD AND HIS WORLD. *Proceedings of the Cambridge Philological Society* (30 (210)):84-115.
- Moen, Marianne
2019 Challenging Gender. A reconsideration of gender in the Viking Age using the mortuary landscape, Department of Archaeology, Conservation and History, University of Oslo.
- Neils, Jenifer
2012 Spartan Girls and the Athenian Gaze. In *A Companion to Women in the Ancient World*, edited by Sharon L. James, and Sheila Dillon. John Wiley & Sons, Inc
- Nutton, Vivian
2013 *Ancient Medicine*. second ed. Routledge.
- Oberhelman, Steven M.
2014 Anatomical Votive Reliefs as Evidence for Specialization at Healing Sanctuaries in the Ancient Mediterranean World. *Athens Journal of Health and Medical Sciences* 1(1).
- Panoussi, Vassiliki

2007 Sexuality and Ritual: Catullu's Wedding Poems. In *A Companion to Catullus*, edited by Marilyn B. Skinner. Blackwell Publishing Ltd.

Parker, Robert

2011 *On Greek Religion*. Cornell Studies in Classical Philology. Cornell Univeristy Press.

Parkin, Tim

2013 The Demography og Infancy and Early Childhodd in the Ancient World. In *The Oxford Handbook of Childhood and Education in the Classical World*, edited by Judith Evans Grubbs, Tim Parkin, and Roslynn Bell. Oxford University Press.

Pausanias

Description of Greece, Volume I: Books 1-2 (Attica and Corinth). Loeb Classical Library 93 ed. Translated by W. H. S. Jones. Cambridge, MA: Harvard University Press, 1918.

Petersen, Lauren Hackworth

2003 The Baker, His Tomb, His Wife, and Her Breadbasket: The Monument of Eurysaces in Rome. *The Art Bulletin* 85(2):230-257.

Plato

Laches. Protagoras. Meno. Euthydemus. Loeb Classical Library 165 ed. Translated by W. R. M. Lamb. Cambridge, MA: Harvard University Press, 1924.

Laws, Volume I: Books 1-6. Loeb Classical Library 187 ed. Translated by R. G. Bury. Cambridge, MA: Harvard University Press, 1926.

Republic, Volume I: Books 1-5, edited by Christopher Emlyn-Jones, and William Preddy. Loeb Classical Library 237 ed. Translated by Christopher Emlyn-Jones, and William Preddy. Cambridge, MA: Harvard University Press, 2013.

Timaeus. Critias. Cleitophon. Menexenus. Epistles. Loeb Classical Library 234 ed. Translated by R. G. Bury. Cambridge, MA: Harvard University Press, 1929.

Pliny

Natural History, Volume II: Books 3-7. Loeb Classical Library 352 ed. Translated by H. Rackham. Cambridge, MA: Harvard University Press, 1942.

Plutarch

Lives, Volume III: Pericles and Fabius Maximus. Nicias and Crassus. Loeb Classical Library 65 ed. Translated by Bernadotte Perrin. Cambridge, MA: Harvard University Press, 1916. .

Plutrach

Lives, Volume I: Theseus and Romulus. Lycurgus and Numa. Solon and Publicola. Loeb Classical Library 46 ed. Translated by Bernadotte Perrin. Cambridge, MA: Harvard University Press, 1914.

Pomeroy, Sarah B.

1978 Plato and the Female Physician (Republic 454d2). *The American Journal of Philology* 99(4):496-500.

2002 *Spartan Women*. Oxford University Press.

2015 *Goddesses, Whores, Wives & Slaves*. The Bodley Head.

Porta, Donatella della

2008 Comparative analysis: case-oriented versus variable-oriented research. In *Approaches and methodologies in the social sciences a pluralist perspective*, edited by Michael Keating Donatella della Porta. Cambridge University Press.

Porter, Amber J.

2016 Compassion in Soranus' Gynecology and Caelius Aurelianus' On Chronic Diseases. In *Homo Patiens - Approaches to the Patient in the Ancient World*, edited by Georgia Petridou, and Chiara Thumiger. Brill.

Riddle, John M.

1992 *Contraception and Abortion from the Ancient World to the Renaissance*. Harvard University Press, England.

Rotroff, Susan I

1977 The Parthenon frieze and the sacrifice to Athena. *American Journal of Archaeology* 81(3):379-382.

Rousselle, Aline

1988 *Porneia: On Desire and the Body in Antiquity*. Translated by Felicia Pheasant. Wipf & Stock, United States.

Sappho

Greek Lyric, Volume I: Sappho and Alcaeus, edited by David A. Campbell. Loeb Classical Library 142 ed. Translated by David A. Campbell. Cambridge, MA: Harvard University Press, 1982.

Scott, Joan Wallach

1996 Gender: A Useful Category of Historical Analysis. In *Feminism & History*. Oxford University Press.

Sebesta, Judith Lynn

1997 Women's Costume and Feminine Civic Morality in Augustan Rome. *Gender & History* vol 9(No.3):529-541.

Seneca

Moral Essays, Volume I: De Providentia. De Constantia. De Ira. De Clementia. Loeb Classical Library 214 ed. Translated by John W. Basore. Cambridge, MA: Harvard University Press, 1928.

Sissa, Giulia

1990 *Greek Virginity*. Translated by Arthur Goldhammer. Harvard University Press, England.

Smith, Gertrude

1919 Athenian Casualty Lists. *Classical Philology* 14(4):351-364.

Smith, Lesley

- 2013 The history of contraception. In *Contraception: A Casebook from Menarche to Menopause*, edited by Gabor Kovacs, and Paula Briggs, pp. 18-25. Cambridge University Press, Cambridge.
- Smith, Patricia, and Gila Kahila
1992 Identification of Infanticide in Archaeological Sites: A Case Study from the Late Roman-Early Byzantine Periods at Ashkelon, Isreal. *Journal of Archaeological Science* 19.
- Smith, R. Scott, and Stephen M. Trzaskoma
2007 *Apollodorus' Library and Hyginus' Fabulae. Two handbooks of greek mythology.* Hacket Publishing Company Inc.
- Snyder, Lynn M.
1999 The Animal Bones from Well G5:3: Domestic Debris, Industrial Debris, and Possible Evidence for the Sacrifice of Domestic Dogs in Late Hellenistic Athens. *American Journal of Archaeology* 103(2).
- Soranus
Gynecology. Translated by Owsei Temkin. John Hopkins University Press.
- Strabo
Geography, Volume I: Books 1-2. Loeb Classical Library 49 ed. Translated by Horace Leonard Jones. Cambridge, MA: Harvard University Press, 1917.
- Temkin, Owsei
1991 Introduction. In *Soranus Gynecology*, edited by Owsei Temkin, and Nicholson J. Eastman.
- Totelin, Laurence
2020 Do no harm: Phanostrate's midwifery practice. *Journal of Ancient Science and Technology*

2021 Introduction. In *A Cultural History of Medicine In Antiquity*, edited by Laurence Totelin. Bloomsbury Academic.
- Trigger, Bruce G.
2006 *A History of Archaeological Thought. 2. Edition* ed. Cambridge Univeristy Press, United Kingdom.
- Voegelin, Eric
2000 *Plato.* University of Missouri Press.
- Walker, Rebecca
1992 Becoming the third wave *Ms. Magazine*.
- Wallace-Hadrill, Andrew
1988 The social structure of the Roman House. *Papers of the British School at Rome* 56:43-97.
- Wolicki, Alexander

2015 The Education of Women in Ancient Greece. In *A Companion to Ancient Education*, edited by W. Martin Bloomer. Wiley Blackwell.

Wyatt, William F.

1924 Introduction. In *Homer. Ilias, Volum I: Books 1-12*, edited by William F. Wyatt. Harvard University Press.

Wylie, Alison

2011 Women in Philosophy: The Costs of Exclusion- Editor's Introduction. *Hypatia* 26(2).

Xenophon

Memorabilia. Oeconomicus. Symposium. Apology, edited by Jeffrey Henderson. Loeb Classical Library 168 ed. Translated by E. C. Marchant, and O. J. Todd. Cambridge, MA: Harvard University Press, 2013.

Younger, Pliny the

Letters, Volume I: Books 1-7. Loeb Classical Library 55 ed. Translated by Betty Radice. Cambridge, MA: Harvard University Press, 1969.