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Filippini, Nadia Maria. *Generare, partorire, nascere. Una storia dall'antichità alla provetta*. Roma: Viella, 2017. Pp. 352, 16 tav. col., ISBN: 9788867286737. € 29,00 (paperback).

Nadia Maria Filippini's *Generare, partorire, nascere* (Viella, 2017) delves into the issue of maternity from a historical perspective, focusing on the European landscape, while also providing insights on American society. Filippini draws her information from historical, sociological, and anthropological sources, and she analyzes centuries of cultural representations of motherhood, from ancient Greek times up to the feminist movements of the Seventies, and even the latest shifts in recent times introduced by scientific progress. Typically studied from the perspective of the history of medicine and of midwifery, maternity has also been analyzed by historians in the light of scientific and technical discoveries. However, as Filippini shows in her study, the idea of motherhood is mainly based on a combination of complex cultural, religious, and political factors. The author manages to combine these disciplinary perspectives, using them as a privileged site from which to analyze women's history itself. *Generare, partorire, nascere* is a journey through time, one that shows our fluctuating conceptions of an issue we are used to thinking of as immutable. The study joins thirty years of Filippini's research to the noteworthy work the author did on primary and secondary sources, both of which are available in a richly annotated bibliography. In addition, Filippini combines scientific rigor and analytical depth with a very effective writing style that makes the study accessible and enjoyable to both academics and the broader public.

While contemporary historiography provides numerous studies on the representation of death, very little has been written about delivery and birth. One could even talk about a symbolic void, a taboo. Only during the 1980s did some pioneers (Claudia Pancino in Italy and Jacques Gélis in France—to name a few) began to consider the history of birth as a field of research. Why has such an important theme in women's life not been investigated in depth? Filippini engages with this question in her introduction: for centuries, being a woman coincided with being a mother. Gender representations have therefore been built on the fertile feminine body, and gender difference culturally structured on that very same body. Since ancient Greece, the idea of womanhood has been connected to that of the fertile land, as much as man has been to seed, the *arké genéseos*. This conception reached its peak in the nineteenth century, when the dichotomies between mind and body, nature and culture, men and women shaped medical choices as much as civil and penal laws. Filippini aptly suggests that the shame that always surrounded women's bodies, and everything connected to them, could have been a sort of excuse to ostracize women themselves from historical analysis and, consequently, from the public scene.

Using the three moments presented in the title (to generate, to deliver, to be born) to guide the reader through the text, Filippini dedicates the first part of her study to the cultural representation of the generative process and to sexual bodies' differences, as described in the myth and philosophy of the ancient world, as well as in Hippocratic and Galenic medicine. Some concepts, born in the ancient Greek and Roman periods, had such an impact on society that they survived until the scientific discoveries of the 1600s, others even longer. For instance, from the Judeo-Christian tradition derives the idea that connects delivery with pain: an unavoidable destiny for any woman, who pays for Eve's original sin, and therefore does not deserve any help in mitigating the pain (37). To underline how entrenched this archetype was, the author reports that doctors began to embrace new methods for relieving labor pains, such as anesthesia, only by the second half of the nineteenth century. As Filippini points out, nowadays, in most of Western society, delivery seeks to help women feel as little pain as possible. Among many other changes, this one helps us consider the enormous shift in mentality that occurred during the twentieth century.

In a section of the study dedicated to the act of delivery (chapter 6), Filippini deals extensively with the role of midwives. Until 1700, described as a critical turning point, they were the only people allowed to participate in the process of delivery, to touch women's bodies, and to help them during labor because of their specialized knowledge and experience. For centuries, midwives also represented the connection between the natural and social birth: since the mother, being thought impure, could not participate in the baptism ceremony, she would step next to the father during the ritual, bringing the newborn to the Sacred Fountain for the cleansing of the soul, when they had already purified the children's bodies right after their delivery. Starting from the end of 1600's and the beginning of 1700's, the hospitalization of women and the consequent emergence of men on the birth scene brought about the progressive expropriation of midwives' skills and knowledge. Through such examples, Filippini aptly demonstrates her main point: the history of motherhood is also the history of power clashes. To give an example: in the exact moment when science recognized women's active role in the reproductive process (in the eighteenth century), physicians started to work to remove midwives from the birth scene, while the State took over fetuses, considering them as "unborn citizens" (240), thus confining women to be "children factories." After centuries of being disconnected from the birth scene, in less than one hundred years men managed to gain control of the entire maternity process, from conception to delivery.

Throughout the study, Filippini highlights some key issues that help us understand the shift in mentality across the ages, as well as political and geographical contexts in which they took place. One of these is eugenics. Using treatises and etiquette manuals, Filippini shows that from the ancient world until the early modern age one can speak of a popular form of eugenics, a widespread common mentality, to which physicians used to add further input and contributions by suggesting the ideal eating, dressing, and sex life's practices for "mak[ing] the perfect baby" (63). From the XVII seventeenth century on, the eugenics perspective became one of the primary components in states' politics: politicians began to look at the child as a public, economic, and military resource. Describing this period, and especially the XVIII eighteenth century, Filippini outlines a history of great debates and ethical clashes throughout European history, focusing on crucial issues such as caesarean sections and mothers' lives. When a new meaning was given to the fetus, the new point of view also reflected the history of pregnancy and delivery. For instance, with Giovanni Battista Bianchi's (1741) and Samuel Thomas Soemmering's (1799) works on embryology, both in secular and religious context a question arose: who do we need to save? The mother or the child? Until the Counter-Reformation, the Catholic Church and collective mentality had no doubt about the fact that the life to be saved was the mother's. Conversely, a debate about caesarean sections on living women arises throughout the eighteenth century, a practice that will be regularly performed during the nineteenth century in most hospitals around Europe, causing a carnage of women (between 67% and 90% of women died) (246).

Another key issue in *Generare, partorire, nascere* is war. The author appropriately uses the metaphor of delivery as women's war as a *fil rouge* through the entire study: to give birth was the test of valor for a woman as much as being a soldier was for a man. From Euripides' *Medea* to Mussolini's statements, the history of motherhood can be perfectly described as a war that women fought every single day, all around the world. It was a war with no *epos*, one not even worth inscribing in public memory. Silent heroines, victims of a hecatomb which, through the centuries, has likely caused a number of deaths greater than that of children brought into the world to save the State and die on the battlefields. Paradoxically, with the creation of labor clinics, the number of deaths continued to rise until the discovery of antiseptics in the eighteenth century. Yet it was between the end of the eighteenth and the beginning of the nineteenth century that the female body was most disciplined, both by the Church and the State (suffice it to think about the politics on eugenic issues and Pope Pius XI's *casti connubii*). The Catholic Church, the Protestant Church,

public authorities, and physicians were the main actors. Families and citizens spoke their minds, too, together with philosophers and scientists. Women alone had no right to express themselves, Filippini demonstrates, until the end of the nineteenth century and, more radically, during the Seventies with the feminist movement in Italy. Filippini reminds us how slogans such as “I am mine,” “the uterus is mine and I’ll handle it,” as well as self-help experiences and non-hospitalized deliveries found acknowledgment both in medical institutions and public authorities, leading women to gain crucial victories on legislative and institutional levels. Nevertheless, what Filippini manages to prove throughout the whole essay is that the history of maternity is everything but a progressive history. For any step that society was able to take forward across the centuries, it took several steps backwards too, underscoring the fragility of the achievements that have been made to this day. What Filippini opportunely suggests, is that it is of fundamental importance today, every citizen (women as well as men) fight to keep these achievements in place for future generations.

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