

Beth and I originally published the following three-part series of articles in the spring of 2000, in the short-lived newsletter, *At Home in the Coastal Bend*. However, we believe it worthwhile to see midwifery from the Biblical point of view, and so we are making these articles available on both our web sites.

MIDWIFERY AND THE BIBLE

Part I: Genesis 35:16-18

by Beth & Larry Overton

As most of you may already know, in addition to being the editor and publisher of this newsletter, I am also a midwife, documented by the Texas Department of Health under the Licensure Bureau. A little more than three years ago, I wrote a research paper entitled “The History of Midwifery in America.” However, aside from a few brief references on the very first page of my paper, I do not explore what the Bible has to say about midwifery. (My research paper is available at the Corpus Christi Home Birth Page, [The History of Midwifery in America](#).)

The research that I did for that paper sparked an interest (for both my husband and I) in what the Bible says about midwifery. Larry is passionate about studying and teaching the Scriptures. Because of both his Biblical knowledge and writing skills, I am thrilled to have him as my partner in writing this series of articles on Midwifery and the Bible.

Mention in the Bible

As I searched the Bible for references to midwives, my first discovery was that there are relatively few references to midwifery in the Scriptures. All of the references are found in the Hebrew Scriptures (the Old Testament). The Hebrew term translated “the midwife” (*ham’yaledeth* [הַמְיָלֶדֶת]) may literally be translated “the childbirth assisting woman.” This term occurs in the singular (“midwife”) just three times: in Genesis 35:17, Genesis 38:28 and in Exodus 1:16. The plural form (“midwives”) occurs just seven times, and all in the first chapter of the book of Exodus: in verses 15, 17, 18, 19 (twice), 20 and 21. And that’s it. There are just ten explicit references to midwives in the Scriptures.

Genesis 35:16-18¹

¹⁶And they moved on from Bethel, and there was still a distance of land before they came to Ephrathah. And Rachel began to give birth, and had it hard in her childbearing. ¹⁷And so it was, as she had a very hard time in her childbearing, that the midwife was saying to her, “Don’t be afraid, because this one also is a son for you.” ¹⁸As her soul departed—for she died—she named her son Ben-Oni. But his father named him Benjamin.

¹ The translation used in each of the Scripture references in this article is my own. LGO.

How Old is Midwifery?

The passage above is the first reference in the Scriptures to a “midwife” (verse 17). One of the questions I had about midwifery concerned its antiquity. The events recorded in Genesis 35 took place nearly 1900 years before Christ. It is important to note that although this is the first reference to midwifery in the Bible, nothing in the passage identifies it as the beginning of such a practice. The presence of a midwife is mentioned as a matter of fact, without introduction or explanation. In other words, midwifery as a practice was already in existence at the time of this incident recorded in Genesis. That would mean that the practice of midwifery was already in existence approximately 4,000 years ago.

Commanding Focus

After becoming a midwife, when I reread this account of Rachel giving birth, I could not help but see the story through the eyes of the midwife. Although her role is mentioned very briefly, I tried to imagine myself in her place and visualize what was happening.

First of all, I tried to imagine the possible cause of Rachel’s death. There are really very few scenarios that take a mother’s life in labor and delivery. In such a situation, blood loss is most likely the cause of death. Because Rachel had been traveling, and also had a difficult delivery, I imagine she was exhausted from the delivery of her baby. Maternal exhaustion after a difficult birth is a possible cause of uterine atony (the uterus becoming soft and not contracted). Uterine contractions control bleeding after the birth of a baby. Elizabeth Davis, a highly respected midwife and author, addresses this very subject.

Uterine atony can result in considerable bleeding following the delivery of the placenta. There are several causes: one is a long, drawn out labor which leaves the uterus too exhausted to clamp down efficiently...²

Midwives are trained in various ways to control bleeding. Of course, we are familiar with drugs that can help (pitocin and methergine, which are man-made oxytocins). There are also various herbs that have similar effects. We also use massage to encourage the uterus to contract. We encourage nursing because when a mother nurses, the pituitary gland in her brain releases the hormone oxytocin, which causes the uterus to contract.

But there is one other very important thing I do at all births. I make sure the mother is focused on her beautiful new baby. The natural bonding that takes place in a normal delivery plays a big part in the body completing the task of birth. So much is going on hormonally at that time, for both the mother and the child. In a drug free birth, when mother and child meet for the first time, hormones are working in full force. The excitement of the bonding event can keep even an exhausted mother alert. I witnessed this with the birth of my own grandson. After a difficult 36-hour labor with little or no sleep, my daughter was totally excited, alert and weeping for joy as she bonded with her firstborn. And by the way, she had practically no bleeding.

Back to Rachel’s midwife. When I read the words of the midwife in this story, “Don’t be afraid, because this one also is a son for you,” it was easy for me to picture an exhausted mom who is bleeding too much and drifting or fading out. The midwife’s command was to not be afraid. She

² Davis, Elizabeth, *Heart & Hands: A Midwife's Guide to Pregnancy & Birth*. (Second Edition), p. 116.

also called for Rachel to focus on her second son, in words no doubt designed to remind her of her own petition after the birth of her firstborn son, Yoseph. “And she called his name Yoseph, saying, ‘May Yahweh add [Hebrew, *yoseph*] to me another son.’” (Genesis 30:24)

Of course, in such a circumstance as this, I would be administering herbs and massaging her uterus, but I also would be commanding her attention. I would tell her to focus on her baby. I would tell her to talk to her baby. If she were panicky, I would try to calm her down and again tell her to focus on her beautiful new baby. And all of this would be for the purpose of controlling a hemorrhage. Consider again the words of Elizabeth Davis as she speaks of hemorrhaging and about commanding the mother to focus.

One cardinal rule in dealing with a woman who is hemorrhaging is to keep her attention focused on the here and now. This means commanding her to stay with you, to look you or her mate in the eyes, or to touch and speak to her baby. In essence, this means the mustering of her vital force and participation, especially critical if she is drifting or fading out.³

Every midwife I trained under taught me the importance of focus and bonding. These principles have been passed down from midwife to midwife for a long time. And if I am right that this is what Rachel's midwife was trying to do, then these principles have been passed on for a really long time. I do practice both speaking commands to focus and giving a mother encouragement to bond with her baby. I do this because it works!

Conclusion

Well, for what it's worth, you now have a midwife's perspective on this passage of Scripture. Next month, in Part II we will take a look at the second passage in the Hebrew Scriptures that refers to midwifery: Genesis 38:27-30. This passage has been used to disprove a belief in the inspiration of the Scriptures, so it should be an interesting study.

³ *Ibid.*

MIDWIFERY AND THE BIBLE

Part II: Genesis 38: 27-30

by Beth & Larry Overton

Genesis 38: 27-30¹

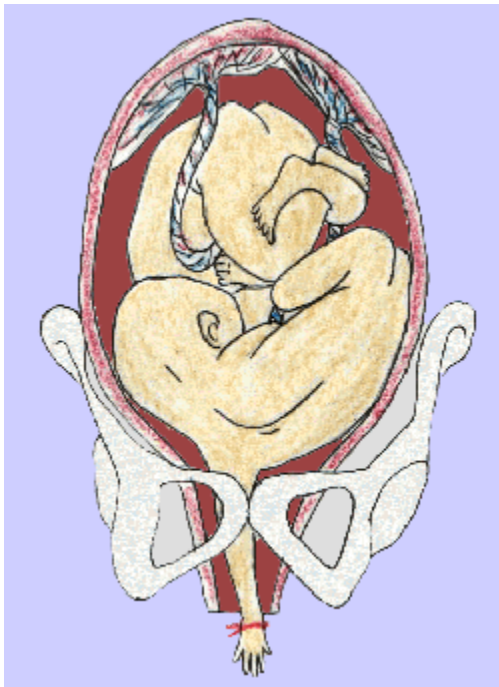
²⁷ And it happened in the time of her giving birth, that, behold, twins *were* in her womb.

²⁸ And so it was, while she was giving birth, *one* put out *a* hand. And the midwife, taking hold of it, tied a scarlet *thread* upon his hand, saying, “This *one* came out first.”

²⁹ And it happened, as he withdrew his hand, that, behold, his brother came out. And so she said, “How you have broken through! *This* breach *is* upon you!” So his name was called Perez.

³⁰ And afterwards came out his brother, who had upon his hand the scarlet *thread*. And his name was called Zarach.

This biblical account of a birth is not particularly one I like to imagine myself attending. There are few birth scenarios that a midwife, doctor or any birth attendant would have nightmares about. Suddenly having a hand presenting out the vaginal opening is one such scenario.



This situation is called a “transverse lie” or an “oblique lie.” This means the baby is lying with his shoulder in the bottom of the uterus and his body transverse or sideways to the mother. (See illustration.) This rarely occurs at the time of delivery. It happens only .5% of the time. A transverse lie is considered the most hazardous malpresentation that can occur during labor. If labor continues with the baby wedged in this position, he will most likely become impacted and die. Then the uterus will rupture, taking the mother's life as well. A transverse lie is most often diagnosed before the onset of labor, and a cesarean is scheduled if efforts to reposition the baby fail. If a transverse lie is discovered at the time labor begins, the immediate course of action is a cesarean.

A twin pregnancy is considered of higher risk than a single pregnancy. There are several reasons for this. (1) There is a higher chance that one of the infants will be in the transverse position. (2) The twins’ cords may become entangled. (3) The twins themselves may become entangled and “locked” with one another, causing the birth to be quite complicated, or even impossible. Our story in Genesis is an illustration of both transverse lie and locked twins.

¹ The translation used in each of the Scripture references in this article is my own. LGO.

When the midwife encountered the presentation of the hand, she marked it with a piece of colored thread. This is interesting for a couple of reasons. First, it clearly indicates the importance attached to the firstborn in this ancient culture. The midwife clearly expected this child to be the firstborn, the one that “came out first,” to use her words. The fact that she chose to identify the one she expected to come out first in this fashion speaks to the cultural significance of “primogeniture,” the exclusive right of inheritance belonging to the eldest son. This act on the part of the midwife was also interesting because she most likely knew that this child would not be able to come out this way. He would have to draw his arm back before either one of the twins could be born.

In verse 29 the Scripture says, “...**as** he withdrew his hand, that, behold, his brother came out.” (Emphasis mine.) I draw at least two conclusions from this statement. First, Tamar was fully dilated. We know that because Perez came out quickly after Zarach got out of the way. Second, Perez must have been in an ideal position ready to be born. But it would have been impossible as long as Zarach was lying in his way. In other words, they were locked together, hindering one another from being born.

The midwife’s response to Perez having “broken through” is an indication that she was surprised and also wondering how these babies would finally be born. It must have been a very difficult and tense birth for both the mother and midwife.

Once Perez was born, the midwife could easily turn Zarach into a better position if he had not already changed his position himself. Turning the second twin is a procedure often done by midwives delivering twins. The first twin must be in a good position for birth, but the second can be moved if he is not in a proper position for birth.

Since I first began studying midwifery, I have found this story to be an intriguing one. However, it wasn’t until I began this article that I found myself seeing its most significant message to me as midwife and mother. As I said before, this is the sort of birth that can give a midwife nightmares. However, these babies entered this world safely. Without the benefits of our great technological advances in modern medicine, without the availability of a cesarean section, these babies were born and survived. This fact gives me peace and comfort as both a mother and a midwife.

I am reminded of how many times I have clearly seen God’s hand at the moment of birth. I have seen babies born with true knots in their umbilical cords and marveled at how God protected them in the womb and during birth. One of these babies was my own granddaughter. I have prayed for and received guidance in moments of difficult deliveries. I have witnessed exhausted women in labor revitalized with amazing strength when asking the Lord for His help.

I have often heard childbirth described as a “miracle.” I certainly understand that sentiment. Witnessing a birth is an awesome, or awe inspiring, event. Actually, though, childbirth is a very normal part of life. However, when the abnormal occasionally happens in childbirth, as in the case of Tamar and her twins, God certainly can and does do miraculous things to safeguard both mother and child. What peace it brings to know God is there with us at every birth and ultimately it is He who brings us life.

MIDWIFERY AND THE BIBLE

Part III: Exodus 1:15-21

by Larry Overton

Exodus 1:15-21¹

¹⁵ Now the king of Egypt spoke to *the* midwives of the Hebrews, one of whom was called Shiphrah and the other called Puah. ¹⁶ And he said, “When you assist the Hebrew women in childbirth, and see *them* upon the birthstool [literally, the two stones], if *it is* a son, then you shall kill him. But if *it is* a daughter, then she shall live.” ¹⁷ But the midwives feared the God, and did not do as the king of Egypt had commanded them. Instead, they spared the lives of the male children. ¹⁸ So the king of Egypt called for the midwives and said to them, “Why have you done this thing, and spared the lives of the male children?” ¹⁹ And the midwives said to the Pharaoh, “Because, unlike Egyptian women, Hebrew women *are* lively. Before the midwife goes in to them, they have given birth.” ²⁰ So God was good to the midwives, and the people multiplied and became very numerous. ²¹ And so it was, because the midwives feared the God, that He made for them families.

Beth is too busy this month being a midwife to write about it in this newsletter, and so she asked me to write this final installment in the “Midwifery and the Bible” series. The passage under consideration in this installment ([Exodus 1:15-21](#)) records no specific birth stories. This makes it possible for one who is lacking in midwifery expertise (in other words, *me*) to comment on what this passage reveals concerning the history of midwifery. Even so, rest assured that the editor and publisher of this newsletter (in other words, *Beth*) will examine and approve the final form of this article.

The first chapter of the book of Exodus summarizes the growth and subsequent oppression of the Israelites in Egypt. Pharaoh’s oppression of the people of Israel was motivated primarily by a fear of their population growth ([verses 7-14](#)). The account we are considering (see [verses 15-21](#) above) records the second phase of this Egyptian ruler’s plan of subjugation and oppression. In order to deal with the perceived threat of Israel’s growing population, the Pharaoh resorts to a plan to murder Hebrew babies, specifically the male babies.

The Hebrew Midwives

And that’s where the midwives come in. The king of Egypt addressed two Hebrew midwives, Shiphrah and Puah by name, and ordered them to implement his murderous plan by killing all of the newborn sons of the Hebrews. Although it’s not clear why, the Pharaoh obviously expected their full cooperation. In an attempt to account for this expectation on the part of the king, some commentators try to make these women out to be Egyptians rather than Hebrews. This position is justified by appealing to the phrase “midwives of the Hebrews,” which can also be translated

¹ The translation used in each of the Scripture references in this article is my own. LGO.

“midwives to the Hebrews.” I suppose the thought here is that if these women were Egyptian, it would better explain the Pharaoh’s expectation of complicity.

However, since the names Shiphrah (“Fair”) and Puah (“Fragrant”) are Semitic and not Egyptian, this is not likely. Other statements from this passage also point to the midwives being Hebrew rather than Egyptian. **Verses 17 and 21** tell us that they “feared God.” Actually, in both of these verses, the text of the Hebrew Bible literally reads “the midwives feared **the God**” (emphasis mine; Hebrew, *hā’elohīm* [הָאֱלֹהִים]), that is, the God of the Hebrews, the one true God. Furthermore, the fact that God established families (literally, “made houses”) for the people of Israel is directly tied to the fact that the midwives feared God rather than the Pharaoh (**verses 20-21**). The idea that God blessed His people with numeric growth is paralleled to His blessing these midwives. All things considered, viewing these two midwives as Israelite or Hebrew women makes the most sense.

But if these midwives were Israelites and not Egyptians, then why did Pharaoh expect them to carry out his orders? My guess is that it just didn’t occur to the king of Egypt that these lowly midwives would disobey him. I believe that he just assumed that the very act of his summoning and giving orders to them would frighten them into complying with his wishes. At any rate, the Pharaoh summoned and addressed the midwives, giving them orders to kill all of the newborn sons of the Hebrews.

Midwifery: A Widespread & Respected Profession

Another interesting aspect of this passage is the picture of the Pharaoh interacting with midwives, and Hebrew midwives at that. This passage shows us, among other things, how widespread the practice of midwifery was, and how respected. Notice, for example, the Pharaoh of Egypt’s familiarity with the equipment that these midwives would use, namely, the “birthstool” (more on that particular item in a moment). Remember that he was addressing “Hebrew midwives.” This is a significant point. The Hebrews were detestable to the Egyptians, so much so that eating with and living near them was considered a loathsome thing, a cultural taboo (see **Genesis 43:32; 46:34; Exodus 8:26**). This is evidenced by the fact that the Israelites lived in Goshen, a region in the eastern part of the Nile delta. They were segregated from the Egyptians.

Why bring all this up? The fact of the segregation of the Israelites from the Egyptians makes the Pharaoh’s acquaintance with the Hebrew midwives and their equipment and practices all the more significant. I doubt that the Pharaoh went to Goshen to witness firsthand the births of Hebrew children. How, then, was he able to speak knowledgeably about how midwives performed their duties? Midwifery must have been standardized to such a degree that Pharaoh could refer to practices common to Egyptian and Hebrew midwives.

Which brings me back to that “birthstool.” The standardized practices of Egyptian midwifery are well documented, both in archaeological and historical sources. On ancient Egyptian vases with figure paintings and wall paintings of the palace of Luxor in Upper Egypt, the mother is represented as being placed upon a stool, while two midwives supporting her by the arms, and the baby is caught by a third. Less than 200 years ago, English traveler and author Edward

William Lane (1801-1876), wrote of Egyptian midwifery practices in his own day in his *An Account of the Manners and Customs of the Modern Egyptians* (1836).

Two or three days before the expected time of delivery, the *Layeh* (midwife) conveys to the house the *kursi elwiladeh*, a chair of peculiar form, upon which the patient is to be seated during the birth.

So the Pharaoh, in referring to the birthstool, was speaking of a birthing technique and its accompanying equipment, and this technique was well known. Even in more recent times, the procedures and equipment had changed little. And by the way, this reference indicates the typical birth position favored by women in Biblical times. They labored and gave birth in a seated or squatting position. See also [1 Samuel 4:19](#), which refers to a woman kneeling down or squatting down and giving birth. This position is a good one for the mother, certainly a more advantageous one than the semi-supine position that women are typically subjected to in the modern hospital setting.

Before leaving this discussion of the Pharaoh and midwifery, it is important to notice also that he believed that involving midwives in his genocidal scheme would be effective. He assumed two things in this scheme. First, as I mentioned above, he assumed that the midwives would comply because of his authority as Pharaoh. Secondly, he assumed that the practice of midwifery was widespread enough that involving them in his plot was the most effective means to his ends.

One might ask, “If midwifery was as widespread as you say, then why are there only two midwives mentioned?” The key word to this question is “mentioned.” The fact that only two midwives are named in this text is no proof that only two midwives practiced among the Israelites. As I just said, the fact that the Pharaoh considered the involvement of midwives to be an effective means of eliminating Israelites would indicate that more women were involved than just a couple of midwives and their apprentices and assistants.

Furthermore, the Israelite population at the time of the exodus was reported to be “about six hundred thousand men on foot, besides women and children.” (See [Exodus 12:37](#).) Scholars estimate that the total population of Israel in Egypt was around two million. The idea, therefore, that these two midwives could handle the amount of births of such a population is just unbelievable.

The role that these two women filled was most likely that of a supervisory nature. Under such a scenario, Shiphrah and Puah would be in charge of a midwifery “guild,” and they would be the ones accountable to the authorities. This view has wide support, both ancient and modern, including the twelfth century Jewish Bible commentator Abraham Ibn Ezra. And actually, if that was the case, then there is something of a correspondence between these guilds and modern day midwifery “associations.”

Midwifery & Ethics

There’s just one more point that I want to bring up. Much has been made of the midwives’ lying to Pharaoh. Some commentators have even used this to call into question the ethics and integrity of these two midwives. Before jumping to such a conclusion, however, consider this: they are described in Scripture as God-fearing ([verses 17 and 21](#)) and blessed. The Bible’s assessment of

their spiritual status is indeed a favorable assessment. From a Scriptural point of view, Shiphrah and Puah were counted as fearing the God of Israel, with the consequence of God causing good to come to them.

“But didn't they lie to Pharaoh?” you may ask. That is a good question. Did they totally fabricate that line about the Hebrew women being “lively”? Probably not. That statement was most likely true. Remember, the Israelites were being enslaved and forced into all kinds of servitude (v. 14). Women accustomed to an active lifestyle typically have less trouble in childbirth than women with a more sedentary and (dare I say it?) pampered lifestyle.

Admittedly, though, there is little doubt that the midwives told Pharaoh this as an excuse, for they had already determined not to obey his edict. So in essence, they spoke true words, but still with intent to deceive. So Shiphrah and Puah were not perfect. Their being blessed by God, therefore, was based, not upon their living perfect lives, but upon God's grace. He used these women to accomplish His purposes and then blessed them. God dealt with these midwives in the same way that He dealt with Abraham and Isaac (who were both guilty of telling lies): by examining their hearts and blessing them for their obedience.

Summary

This passage demonstrates for us that midwifery practice in Biblical times was extensive and well respected. We also get a glimpse of the preferred birthing posture, as well as some indication of equipment used. But what moral lessons can we learn from this passage?

The key thought here from a practical and moral standpoint is that of fearing God, even in the face of seemingly dire temporal consequences. I know that “fearing” God is a foreign, even abhorrent concept to many religious people today. It is true that this word for “fear” (the Hebrew term *yārē* [אָרַע]) can have the connotation of reverence, awe or honor. However, its basic meaning is that of “fearing,” of being “afraid.”

And that primary meaning of “fear” certainly applies in the case of these two midwives. Remember that Shiphrah and Puah were faced with fearing Pharaoh by obeying his horrible decree or fearing God by showing reverence for Him and doing the right thing. They certainly must have been afraid for their lives. And yet they knew that their obedience to such an evil edict would affect far more lives than just their own. They must have known that their actions would affect their relationship to God even beyond this life. And so they feared God.

And so must we, irrespective of the consequences. Granted, we are not likely to find ourselves in a situation where our very lives are on the line. Still, as the apostle Peter put it some 1,500 years after these midwives took their stand, “We must obey God rather than men.” (Acts 5:29)