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5.1 INTRODUCTION

Perceptions of the female role in society were altered during the Industrial era (1750-1950) although women were still viewed as caretakers within the informal educational milieu of the home and to an extent, in the formal one of the school or private tuition of wealthy children. However, these perceptions were negative. Society continued to marginalise natural and nurtured biopsychosocial female identity as nurturers as in previous eras. Moreover, it undermined the new non-traditional roles women were expected to assume. This enhanced negation of femininity would have added to female stress vulnerability in a period that witnessed specific gender-related and time-bound stressors in the lives of the female participants in the primary and secondary educational milieus (Branca 1978: 4-16; Crow 1971: 14-15).

The following discussion regarding stress experienced by female participants in the Westernized industrial primary and secondary milieus will refer to examples taken from mainly British (but occasionally Anglo-American) history during the Georgian era (1750 –1850), Victorian period (1837-1901) and the first fifty years of the 20th century including the period of the World Wars.

Many females led the life of pre-industrial society until the mid-nineteenth century, when the Industrial Era began to impact the lives of women and girls (Branca 1978: 10-11; Kramer 1998: 40). Industrialization after 1750 may have been particularly stressful for them resulting in particular manifestations of distress (Guy 1997: 19; Branca 1978: 15,150). Branca (1978: 15) mentions that:

Broken health, the tragedies of infant and maternal mortality, absent husbands tore at the hearts of the women who enjoyed the good life as well as those who did not

During the Industrial Era, women and girls may have used both traditional and new stress coping mechanisms. Some of these have been as extreme as the technological changes of the time. The following analysis will attempt to describe the stressors, manifestations and stress management strategies of female participants in the primary and secondary educational milieus of a fast changing world.

5.2 CAUSES OF STRESS IN THE FEMALE PARTICIPANTS IN THE INDUSTRIAL ERA PRIMARY AND SECONDARY EDUCATION MILIEUS

The fact that the era under review was a rapidly changing life-world would have been a stressor in itself (Toffler 1970: 3). Life's traditional structures would have been modified for many girls and women teaching and learning in a new world where life often no longer centred on the rural family unit. However, even though girls and women would have faced new time-related stressors at macro, meso and micro-level particular to the era 1750-1950, the basic gender related biopsychosocial stress mediators as experienced by their ancestors would have underpinned their experience as well, especially that of being negatively appraised in their (albeit modified) femaleness.

5.2.1 Stressors at macro-level in society and culture

Women and girls who were teaching, learning, caretaking or growing up in accordance with their natural and nurtured psychobiosocial identity in the Western world during the industrial would have had to face stressors particular to society and culture. These were often grounded in society's perception of females as second class citizens. This was the case even in Britain ruled by a tyrannical queen during the greater part of the 19th century. Queen Victoria, colluded in female oppression and opposed female suffrage. Even female work status granted during the 19th century was abusive rather than status building and restricted mainly to textile factory work and domestic service. Although middle class women did not work outside the home, their role as wife and household supervisor became abusively demanding in an era that sought technological perfection and innovation. Thus, time-related conditions at macro-level such as: urban centers; the suffragette movement; changes to law; technology; war; famine; travel and transport and medical ignorance made life difficult for females who were possibly already vulnerable to stress because of mediating biopsychosocial factors. The following paragraphs explain these stressors in society and culture (Kramer 1998: 8-15).

5.2.1.1 Effect of urban centers on females

Working class female caregivers would have struggled to meet the expectations of their biopsychosocial role. They had to nurture the young in overcrowded and polluted industrial centers that lacked sanitation. For those who had known life in rural eras, the new urban life meant stressful change and struggle for survival, as the gulf between the poor, rich, the working and middle class widened with the latter often exploiting the former (Branca 1978: 23; Guy 1997: 2-9; Kramer 1998; 16-23; 30-31).

Although now women had more surviving children as diet, living conditions and medicine improved, ironically this added to the stressor of overpopulation for female caregivers in the primary educational milieu in particular (Kramer 1998: 42). Population growth caused anxiety and distress as expressed by many individuals in the western world including, Annie Besant and Charles Bradlaugh in England and Margaret Sanger in New York. Although the practice of birth control was becoming more widespread, distribution of contraception information was not legal and Besant and Bradlaugh were put on trial in 1878 and Sanger in 1917 (Jacobs 1996: 33-34, 46-50, 185). Birth control seemed to be a solution to some to the overcrowding throughout England, houses of the poor remained cramped and unhealthy. Sometimes a whole family had to live in one or two roomed cottages, with no drainage or running water and little heating (Kramer 1998:9). Families in towns were often faced with eviction and starvation. This led to social unrest and an uneasy atmosphere for females struggling to bring up children in urban centers (Guy 1997: 9).

To stem social crimes and unrest that reached epic proportions in France, the British introduced extremely severe penal systems, which included transportation of criminals to other places such as Australia and the death penalty for petty crimes, even if children committed them. Many prisons were built and high crime resulted in stressful penal systems for all members of society who committed the slightest transgression of law (Guy 1997: 26-27). This situation would have affected female caregivers in particular.

Unsatisfactory sanitary condition in towns and lack of personal hygiene often led to 'outbreaks of disease'. This must have been a cause of intense stress and anxiety, especially in mothers and female child minders, who feared for those in their care (Guy 1997: 4, 16). Flushing toilets were rare in Georgian times and for most Victorians. The poor had to use outside communal toilets and chamber pots indoors, which were emptied into open drains (Kramer 1998: 9). Vile odours and vapours from factories and rubble, health risks, inadequate sewerage and drainage systems water and air pollution (stench and fumes from factories)' caused 'so-called filth diseases e.g. typhoid, cholera, diphtheria and chronic respiratory problems' Even middle-class homes were dusty, owing to a lack of time and effective appliances for cleaning. In addition, smoky lamps and fireplaces polluted the interior as well as the air outside. Although medical knowledge improved during the Industrial Era, treatment was primitive and progress was slow (Guy 1997: 18-19; Kramer 1998: 30-31; Porter 1998: 1-2, 149-50; Chadwick 1965: 369-372, 1-443). Diseases such as influenza epidemics, TB and whooping cough spread quickly because of overcrowding in cities. There was chronic poisoning due to unhygienic food and illness due to

work conditions that were a negative spin-off of the Industrial Revolution. These affected miners, milliners and dressmakers in the form of lung disease and physical injury due to long hours of standing or sitting in one place and often in an awkward position (Porter 2001: 1).

Chadwick (in Porter 2001) shows figures indicating that 'in 1839 for every person who died of old age or violence, eight died of specific diseases'. Moreover, one in three children died before the age of five, if not in childbirth then later from, most probably, 'filth' diseases. In 1841, the Registrar General reported life expectancies of forty-five, thirty-seven and twenty-six in Surrey, London and Liverpool (Porter 2001: 1). For women, early death and/or widowhood were common. Queen Victoria lost her consort to typhoid fever in 1861 (Kramer 1998: 9).

Working class women and girls were especially affected by poverty and hunger in urban areas caused by famine in Ireland and France during the 18 and 19th century. Workhouses were introduced for the abject in 1834 in England where daily food and lodging were given in return for work (Guy 1997: 2-7; 8-9; 22-23; Kramer 1998: 16-17; 22-23; 30-31; 42; Alexander 1994: 112; Boulding 1976: 585-587; 619)

In general, urbanisation meant stress for working class females in particular. This applied not only to their roles as caregivers, but also as a result of overloaded work roles and as victims of hunger and violence, the latter exacerbated by alcohol (Boulding 1976: 62). In addition, society did little to protect its vulnerable female victims of crime that included caregivers and those being cared for. Although in 1750 a police office was opened in Bow Street by London magistrate Henry Fielding, it may not have been much of a deterrent for rape and other violent crimes against females (Guy 1997: 26-27).

5.2.1.2 Suffragette movement

The industrial era encouraged innovation. This inspired many females to fight for change to their age-old second-class status. Yet most women and girls may have been alarmed by the efforts of suffragettes who during the second half of the 1800s and early 1900s began to agitate for equal franchise. Some even resorted to violence to achieve their goals (Caine 1982: 537-550).

Although the suffragettes were attempting to discourage female collusion in their own oppression, at times their methods were excessive such as burning down churches, vandalizing streets, holding hunger strikes in prison and chaining themselves to the gates of Buckingham

Palace. In particular, Emily Wilding Davison, who had managed to become an Oxford graduate in a male-dominated society, threw herself under the royal horse at the June 1913 Derby and died a few days later. Other suffragettes blew up the politician, Lloyd George's house (Stanley & Morley 1988; Borda 2002: 25-53).

Society balked at these drastic measures that probably caused further tension and oppression for women and girls (Caine 1982: 537-550). Radical feminism emanated from the upper and upper middle class who had time and resources for this form of self-expression. However, it was probably viewed as simply irritating social unrest for working class women who did not even understand the issues of, for example protection of married women's property because they did not have any (Branca 1978: 152-162).

5.2.1.3 Discriminatory legal system

Changes in family law benefiting mothers, daughters, and female caregivers in the primary and secondary educational milieus of the Industrial Era may simply have been too little. Some legal rights were accorded to females but restrictions remained. For example, from a situation around 1800 when married women were virtual nonentities before the law, whether under English common law or the new New French Napoleonic code, a wave of legislation expanded women's rights in areas ranging from property rights to divorce and custody rights. But inequity continued to exist. The same trend followed in the gradual granting of the franchise in the twentieth century and formal schooling regulations (Branca 1978: 161-171).

5.2.1.4 Repercussions of technology on females

The Industrial Era led to an innovations, inventions, customs, and fashions, which came and went. Females took full advantage of technology, in particular feminine ways, whether dress or household appliances. However, these innovations may have become a burden and stressor (Kramer 1998: 29, 40; Guy 1997: 3)

Industrialisation brought further pressure for women and girls. Branca (1978: 107) suggests that technological progress led to consumerism and the obligation to buy household appliances such as sewing machines and stoves in the latter half the 19th century invented for mainly middle-class Westernised women. This may have 'put great strain on domestic finances, as rising prices and ... inflationary economics became constant concerns for middle-class housewives' (Branca 1978:107). Female caregivers in the middle class primary educational milieu felt pressure to supply the best domestic environment for their families in the form of housing,

furnishings food and clothing. Financial problems that including buying on credit added to their stress and affected their health as a popular English manual, *The Mother's Companion* reported in 1888 (Branca 1978: 107). Moreover, mechanisation sometimes created work as in the case of washing machines that encouraged more washing than necessary.

Criticism of new methods by traditionalists caused tension for middle-class women and girls who experienced self-doubt owing to changing roles and the pressure to be a perfect wife and mother and even worker, especially in England. Moreover, infant-rearing techniques such as bottle-feeding led to physical and emotional problems for mother and child. (Branca 1978: 131-141). The rapid role changes that precluded higher-class females were a possible source of inner conflict and tension. Women and girls were still second class citizens despite their attempts to perfect their efforts in line with development of transport, trade, urbanization, inventions, employment and travel that opened up a new world of self-fulfillment and esteem to men but not to women and girls (Kramer 1998: 12-15).

5.2.1.5 Role of females during wartime

War may have affected the female participants of the primary and secondary Western educational milieus in a particularly stressful way during the First and Second World Wars (1914-1918; 1939-1945) and earlier during the previous centuries' revolutions and wars in Europe and America. Females contributed energy or person power and replaced male skilled and semi-skilled workers inside and outside the home. They also showed a male-dominated society that they could do more than raise children and tend a home. But this led to limited equity at best or to further suppression and oppression as victims of male prejudice and harassment. Moreover, they relinquished their jobs to male workers after the war. (Alexander 1994: 86; Marwick 1977: 1-176, Boulding 1976: 585-591, 619; Kramer 1998: 38-39; Guy 1997: 24-25).

5.2.1.6 Effect of famine on females

Shortage of food would have been another stressor at macro-level that affected women and girls engaged in both informal and formal teaching and learning during the era. The Great Finnish Famine of the 1860s and the Great Irish Famine of the 1840s are examples. In times of famine there would have been gender discrimination regarding the distribution of food (Ó Gráda 2002: 1).

5.2.1.7 Travel and transport as a stressor for females

Although an era of great progress in transport especially in Europe, the Industrial Era was a time of gangs of robbers who terrorised travellers, raped females and committed armed assault and murder. This was a cause of great anxiety for female travellers in particular even though trains, buses, and ships developed rapidly during the period. The arrival of the railways made the biggest impact. Moreover, the crowded conditions of railway stations and ship harbours may have been very stressful, confusing and dangerous despite the excitement and convenience of travel made easy for the first time in history (Guy 1997: 26-27; Kramer 1998: 12-13).

5.2.1.8 Medical ignorance especially medical practices concerning female health

Since doctors still knew very little about the causes of disease, health was a cause of anxiety to all, especially female caregivers who were responsible for the health of their charges. If illness did not cause death, the so-called therapies did. Moreover, germs flourished owing to unwashed utensils, beds and bodies. Some therapies were totally ineffective. For instance, during the first part of the 19th century, individuals believed that frequent bathing removed protective oils from skin. They maintained that sunlight, fresh air and exercise would exacerbate illness as disease travelled through the air, water and earth often transmitted by *miasma* (a noxious vapour) that entered the body through the nose. Doctors carried scented sticks to keep the miasma away. Other treatments used by 19th century doctors were bleeding and bloodletting (phlebotomy), blistering, plastering, amputation of limbs and teeth pulling without anaesthetics or antiseptics, purging, vomiting, and sweating. For females these medical inadequacies must have been particularly stressful (Guy 1997:11, 19; Kramer 1998: 30-31).

5.2.2 Stressors at meso-level in the family, peer group and school

As in previous eras at macro/ meso/ micro-levels, stressors at meso-level for female participants in the industrial era primary and secondary educational milieus of the home and school were probably rooted in the ever-present gender-related stressors of female social suppression linked to female neurological, psychological and reproductive biology. However, as at macro-level, it is possible that there were time-bound stressors such as: domestic responsibility; work outside the home; child labour; orphans; criminal children; infant mortality; pressure to be married and to have children; servants; death in the family; absence from children and exclusion of females from the secondary educational milieu.

5.2.2.1 Domestic responsibilities

More was perhaps expected of mothers, daughters and other female participants in the primary educational milieu at this time than earlier eras, yet power was still in the hands of male household members. Furthermore, the burden was borne by young wives and mothers who married by the age of 21. They usually bore children throughout the twenties but not beyond thirty. Unknown in previous eras, there was, particularly in the middle class, in addition to other stressors, a pressure to induce in children obedience as the male's role diminished in the sphere of discipline although not in terms of family power (Branca 1978: 107-131).

Adolescent middle class girls remained dependent on parents longer than their ancestors. Unlike working class mothers, middle class matriarchs did not send their teenage children out to work. Moreover, daughters of all classes were homebound until marriage in their early twenties. Sons, who were educated, trained for work and were allowed to socialise outside home. Tension may have arisen in mothers and daughters because of this extended period of dependence on parental care. Teenage girls were frustrated in their desire for freedom and mothers felt accountable for proper upbringing of daughters (Branca 1978: 125-128). In an age of innovation and exploration, females were still expected to be submissive. This meant that adolescent girls were confined to home, chaperoned on outings and not informed about sexual issues. This led to their involvement in sexual relationships and intercourse without realising the consequences of their actions. In many cases, these unmarried girls fell pregnant and suffered psychosociobiologically stressful consequences. Some suffered physically in attempting abortions; others endured the social stigma of being unwed mothers and the subsequent psychological stress (Branca 1978: 107-111).

The life of working class females was burdensome as they had large families that remained in the home environment owing to late 19th century laws that limited children labour and required school attendance. Ironically improved child labour laws aggravated female strain. Moreover, Industrial Era appliances or child-rearing advice literature available to middle-class females did not help all women and girls, as many working class females remained illiterate. Moreover, the availability of employment in factories and domestic service meant that many working-class women and girls worked as well as having domestic responsibilities (Branca 1978: 131-141).

Earlier marriages for industrial era middle-class and working girls led to emotional strain and material problems resulting from lack of training in motherhood for the former and domestic education for the latter. In working class families, children were often ignored and little attention was paid to teaching daughters domestic skills. They lacked skills of financial

management, which would have eased the stress of poverty. The latter was a burden mostly borne by the wife who often went without essentials for the sake of the family. Her strain was increased by the extra workload of, for example, extra washing and ironing and lodgers to augment monetary income. Moreover, financial problems led to middle-class and working class female self-doubt. Women as the hub of the domestic structure felt responsible for infant illness and mortality, a reality in an era of inferior medical care and frequent childbirth (Branca 1978: 131-141).

Victorian women were housekeepers, cooks, chemists, seamstresses, psychologists, nursemaids, accountants, bakers and hostesses. Life was demanding for middle-class housewives with servants. Without the amenities of later times and despite advice given by books and magazines on etiquette, raising children and home maintenance, many Victorian women may have felt guilty if they could not meet the expectations of the era. Women faced physical and emotional exhaustion at the end of a day that began before dawn. Victorian stereotypes of the perfect homemaker followed women for decades, even into the 1950s when technological conveniences were abundant (Corelli, M. 1906: 255; Kramer 1998: 22-23).

5.2.2.2 Work outside the home

Because of the use of the scientific and technical discoveries made in the 18th century, the textile and printing industries of the 19th century became mechanized. This meant that textiles were produced in massive quantities and led to ever-changing female fashions. This not only led to the stress of cumbersome and uncomfortable female dress codes, but also led to a great increase in the number of women employed in the manufacture of textiles and clothes for the new clothing industry'. These girls and women generally had to laboured worked in overcrowded and confined factories and workshops for many hours and a small salary (Rowland-Warne 1992: 38-39).

Many working class women and girls worked 12-14 hours a day, six days a week in Georgian England. Factory owners preferred to employ women and children for all but the heaviest jobs because they were paid much lower wages than men for the same work. Yet considered the property of husband or other male household head, women were compelled to hand over earnings (Guy 1997: 22-23).

They often operated machines in dismal textile factories. Moreover, girls and boys were employed to do many of the most dangerous jobs in factories. They had to crawl under machines to clean them or re-tie broken threads, often while the machines were still running.

The stress of possible accidents and death must have weighed heavily on the minds of the children and their mothers, who may have been working in the same factory (Guy 1997: 22-23; Kramer 1998: 11).

Many mothers, female caregivers and daughters who participated in the primary educational situation of the home, may have been under great stress because of their demanding work life. Those who did not work in factories would have been one of the 'army of domestic servants' that worked for upper class families. In these families women did not work outside the home, but faced stressors of a different sort including extreme pressure to conform to social ideals of being a perfect wife and mother (Guy 1997: 23).

During the Edwardian Era (1901-1910) in the USA, many poor women and girls immigrated from Ireland and elsewhere. They became the 'backbone of the garment-making sweatshops of New York that provided the textiles and clothes for the fashion industry that served the wealthy upper class females (Rowland-Warne 1992: 48).

5.2.2.3 Consequences of child labour on female stress levels

Before legislation controlled child labour, female learners in the primary educational milieu of the home would have suffered stress owing to long hours of hard manual work. In 1840, only approximately 20% of children in London had any type of schooling and the rest were working. Children, as young as three or five years worked in iron or coal mines, nail and match factories, construction, shipyards, gas works, and chimney sweeping. Long hours of tedious and physical labor as well as abuse and accidents deformed and diseased children and contributed to the unbroken cycle of poverty and illiteracy. Whereas some boys became apprentices in a trade such as building and worked up to 64 hours, others including girls worked perhaps 16 hours a day in abhorrent conditions. If girls were lucky, they worked as domestic servants. By the mid-1800s, there were over 120 000 domestic servants in London alone. These young girls worked 80 hours a week for pay of half pence per hour. The worst off were the thousands of prostitutes who at that time were between the ages of 15 and 22. Although in 1802 and 1819, parliamentary acts regulated child labor in factories and cotton mills to 12 hours per day, the laws were ineffective. In 1833 an act lightened the load for textile workers only. Twelve hour days were permitted for children ages 11-18; children 9-11 were allowed to work eight hour days; and children under nine were no longer allowed to work. However, for many children life was still probably unbearable. Many female participants in the primary educational milieu were victims of child labour and on average did not live longer than 25 years (Del Col 2003: 1; *Victorian Lace* 2002: 12; Kramer 1998: 16).

5.2.2.4 Female orphans

For many girls the primary educational milieu was the street, as many children did not have family homes. Most of the 19th century orphanages could not cope with housing all homeless children. In England these were called *ragged schools* that tried to teach poor children in reading, writing and arithmetic with some attempts to teach girls to cook and boys to do woodwork. But, these schools involved abusive Victorian discipline and many children ran away (Kramer 1998: 24-25).

Female and male street children carried with them whatever possessions they owned, which might have been nothing more than a blanket for warmth, an umbrella to help keep dry, or a doll to cuddle. They attempted to survive by shining shoes, selling newspapers and matches, prostitution, begging or stealing. If children were caught begging for food, they were sent to the almshouses (places founded by charity for the care of the poor). They would stay there waiting for someone to offer them jobs as apprentices or servants. Typically, boys were taken to work in mines, on farms, or in factories and mills; girls were sent to do domestic work for families and even mines. In either case, the children would be expected to work long, tedious, difficult hours for next to nothing in pay. In fact, their hard work might only pay for their boarding. Even children in orphanages were eventually sent into frequently abusive situations as apprentices or servants. Moreover, adoptions were often only an excuse for child labour and child abuse. Most of these children were under the age of thirteen (Del Col 2003: 1; Kramer 1998: 31).

5.2.3.5 Effect of having criminal children

Life in the primary situation of street children was fraught with the stressors of crime and punishment by the law. The common Victorian juvenile crime of picking pockets was even punishable by death until 1808. Although adults trained and led mostly street boys into crime, girls were also involved. Eventually many sentences were reduced to transportation in England in particular. Transportation to Australia had begun in 1787, and ended in 1867. However, the emigration of delinquent children continued for some years. Eventually due to various acts (Factory Act 1840, Forster's Education Act 1870 and Mundella's Education Act 1880), reformatories and industrial schools were built. They provided a primary or secondary educational milieu for many orphaned and delinquent children. Often referred to as *ragged schools* they offered a partial solution to the problem (*Victorian Lace* 2002: 11; Kramer 1998: 24-25).

5.2.2.6 Distress due to infant mortality

A stressor facing many female caregivers during the industrial era was the high the rate of infant and child mortality. Many children died before they were five years old and often before one year due to diseases such as measles, mumps, rickets (a disease that causes softening of the bones due to a deficiency of vitamin D), polio, scarlet fever, small pox, diphtheria, and tuberculosis. Often it was not the disease itself, which killed the child, but rather the remedy and the lack of knowledge and understanding of medicine and bacteria (Huck 1995: 528-550; *Victorian Lace* 2002: 12).

Even when, by the mid-19th century, medical experts began to make the connection between germs and illness, they did not know how to treat infections and disease or prevent their spread, especially in children. Many treatments that parents used resulted in fatalities. Moreover, female caregivers often kept a barrage of medicines in the house. For example, when a baby was teething, parents sometimes cut open the gums to allow the new teeth to come through. Alternatively they put leeches behind the baby's ears, believing this would relieve the symptoms of teething. A leading cause of infant and child mortality during the 19th century was the custom of sedating them with substances such as opium morphine, alcohol and laudanum (a mixture of alcohol and opium derivatives), common items found in 19th century medicine cabinets. Several pharmaceutical businesses freely sold inexpensive medicinal potions under brand names such as: *Godrey's Cordial*; *Mother's Helper*; *Infant's Quietness*; *Atkinson's Preservative and Soothing Syrup*. Often overdosed, children became addicted to these mixtures administered by stressed mothers and other caregivers (nannies, nursemaids, governesses) trying to cope with large families. The working class, where 16-hour (or longer) workdays were common, often used sedatives owing to the cost of feeding children. Infants were often dosed at midday, as their mothers could not leave work to breastfeed them and then again when their exhausted parents arrived home after work. For wealthier families, sedation ensured quiet children as required by parental or caregivers' needs. Thus, infants frequently died from overdose or starvation, because of sleeping through feedings or rejection of feedings (Braddon 1862: 39; Ellis 1839: 78; *Victorian Lace* 2002: 12; Huck 1995: 528-550).

5.2.2.7 Pressure to be married and to have children

Fear of not marrying bore down heavily on young Victorian women and girls during the Edwardian period and later. There was a stigma attached to being female and single at 30. A woman was thus termed *an old maid* (Cambridge 1913: 73; *Victorian Lace*: 2002: 10).

Working-class, middle and upper class women, mothers and daughters alike were under pressure to marry and had pre-marital sexual relationships, hoping to thus find a husband. Moreover, the average age for marriage decreased from 27 in pre-industrial times to about 24 in mid 19th century. It decreased further to 20 years in the 20th century. In France, where agriculture predominated, there was only a drop from between 28 and 30 in 17th and 18th century and to 25 and 27 years in the 19th century (Branca 1978: 131-141).

Females were under pressure to remain married. Even though legally women could leave their husbands after 1891 in England, many women remained in unhappy marriages because they were financially dependent and divorce was stigmatised (*Women in 1900*: 2). Many female participants in the primary educational milieu including wives were considered the property of the male head of the household. They had to hand over personal property and earnings and submit to beatings or imprisonment in the family home (Guy 1997: 22-23).

However grim some marital unions proved to be, romantic flirtations as a prelude to marriage prevailed in Georgian and Victorian eras. However, these rituals became so elaborate that they may have also been stressors. Special etiquette existed for calling and courting. Upper class women and older girls when engaged in various social activities used a 'language' of fans and parasols. The way they moved and carried these objects had special meanings that were understood by both sender and receiver of these messages. Wealthy families in Europe and America held formal balls to present their daughters at about 16 years of age to society and potential husbands (*Victorian Lace* 2002: 10 18, 19; Guy 1997: 20-21).

Women and girls had to rely on even unhappy marriages in pre-industrial and industrial era Europe for their sense of identity and economic survival unless they could depend on male relatives or a religious community. In the words of Branca (1978: 84):

Marriage ...remained the best possible state, but it was chancy and fraught with risks and hardship.

For middle class females, marriage in the Industrial Era began to be motivated by pressure to find emotional and sexual satisfaction (Branca 1978: 80-89, 94-95). Even though Jane Austen wrote in a letter of March 13 1816 to her niece, Fanny Knight, that 'single women have a dreadful propensity for being poor, which is one very strong argument in favour of matrimony', women did begin to regard marriage as an important emotional commitment (Branca 1978: 127; Bradbourne 2002: 1). This conscious need may have been added pressure to be a model wife

and mother. This included being a decision maker, homemaker, household budgeter, servant manager and ideal sexual partner. This may have strained mainly middle class females in the urban environment despite inventions such as the washing machine and baby care products, which sometimes increased the pressure to meet expectations (Branca 1978: 98-128).

Since earliest times, childbirth and childcare were considered to be the most important role for women. During the Industrial Era, it included the emotional strain of excessive expectations in the case of middle-class females and the physical strain of overworking for working class females, although many were not expected to work outside the home once they had children (Branca 1978: 80-84). Moreover, families were large (35% of married women in Britain had eight or more children at the middle of the 19th century). Better nutrition and slightly improved medical care meant that not only did girls and women give birth more frequently and at a younger age, there was a slight decline in infant and child mortality. Thus, there were many children to care for at once at home, a cause of possible stress for female participants in the primary educational milieu. Furthermore, birth control was socially unacceptable despite activists such as Annie Besant, Richard Carlile, Charles Bradlaugh, Marie Stopes, Dora Russell, Maynard Keynes and others who campaigned in various ways from writing letters to establishing clinics (Jacobs 1996: 33-34, 46-50, 185); Bourdelais & Demonet 1997: 95-108; Rollet 1997: 213-225).

Marriage led to abuse for many female participants in the primary educational milieu. Many other females were victims of male violence regardless of being married or not (Guy 1997: 22-23). Yet, helpless in their situation, women had generally no other choice but to remain in their domestic situation (Branca 1978:72-75, 84).

5.2.2.8 Female servants

Life was burdensome for servants hired by wealthier families. Mostly female, these domestic workers often had quarters located either on the top floor or basement where the kitchen and scullery were situated. These rooms were small and dark with scant furniture. Work involved long hours for very low wages with no time off except to go to church. This was the situation for almost all servants until the 1880s, when conditions improved a little. Life was hard for servants during most of the industrial era. There was no running hot water and all housework had to be done by hand, although early inventions of household technology did appear during the latter half of the 19th century. However, these appliances were not effective. For example

early vacuum cleaners blew dust away rather than sucked it up (*Victorian Lace* 2002: 10; Kramer 1998: 22-23).

5.2.2.9 Effects of death in the family on females

Death was a frequent stressor that may have affected females in a particular way. They feared their own death during childbirth, the death of their children and other members of the family that they cared for. They feared for the death of the male head of the household – so essential for their identity and survival. During the 19th century when infant/ child mortality was still high, many women died during childbirth, young adults frequently died from minor ailments, and male relatives lost their lives in war and other violent conflicts. Moreover, while mourning customs may have been a coping mechanism, they may have been stressful in their excessive demands as well. In fact, when Albert, the consort of Queen Victoria died from typhoid in 1861, Victoria went into mourning for eleven years and wore black for the rest of her life (*Victorian Lace* 2002: 11; Kramer 1998: 9).

5.2.2.10 Absence from children as a stressor

Although industrial era middle class and working class females felt pressure to emotionally invest in those that they nurtured, work overload plus a contradictory prevailing view of children being seen and not heard meant that they were thwarted in their nurturing instincts. The pressure of work outside the home for women and children of the working class and the nursery system of the wealthy classes led to the phenomenon of absentee parenthood. Moreover, amongst the upper classes during much of the era, children had to be kept out of sight. They spent most of their days in the care of a nanny and in a nursery (*Victorian Lace* 2002; 10; Kramer 1998: 20).

5.2.2.11 Exclusion of females from the secondary educational milieu

The fact that rich children were educated, literate, had toys and could read the profusion of children's books of the era may have caused intense feelings of stressful frustration in the poor (and especially female) participants of the primary educational milieu (Guy 1997: 22-23).

During much of the era in Western Europe and America there were no state run schools providing free education, so only the wealthy could afford to send their children to school. A few textile mill owners in England provided meals, accommodation and some schooling but mainly for boy workers in the beginning. Later education was provided for poor children of

both genders as many schools developed from church-run schools. However, many children stayed away from school because of the harsh discipline as well as an obligation to work or look after younger children. This included female children especially. It was only in 1880 that the English government made school compulsory for all children aged 5 to ten years old (*Victorian Lace* 2002: 12; Kramer 1998: 24-25)

When access to schooling did become a reality, most teachers of the time were men. Female teachers had to be single. Once they married, they could no longer teach. In Britain, some women who had done domestic work before the Wars found work as teachers, but had to leave the profession when married (Harris 2000: 1-128; Cassin-Scot 1980: 1-40)

Since women did not usually have careers and were not involved in politics, the need for their academic education was little perceived. Most writers on the subject of *female education* at the time preferred that women receive only a practical (and religious) training for their domestic role. Accomplishments in music, drawing, dance and modern languages were customary in the genteel classes (*Women and University Education* 2002: 1-5).

Women and girls who aspired after a professional qualification that required a university degree may have felt extremely frustrated during the era. Up to the beginning of the twentieth century women and girls were discouraged from attending universities particularly in Britain. However, colleges for women were established like Newham College in 1880 at Cambridge University. Moreover, although over a thousand female students attended lectures at various universities by 1910, they were not allowed to obtain degrees. By 1900, about 200 British women had managed to obtain medical degrees, but only by accessing European degrees. Women accountants and bankers only appeared after 1910 and female lawyers much later in the twentieth century. During the late 1800s and early 1900s, various women such as Josephine Butler, Emily Davies, Teresa Billington Greig, Selina Cooper, Mary Hamilton and the South African, Olive Schreiner, vented their frustration by writing books, pamphlets and articles or forming councils, co-operatives and colleges (*Women and University Education* 2002: 1-5). For example, Billington Greig expressed her stressful feelings of female disempowerment in her 1907 article *Women's Liberty and Man's Fear* (in *Women and University Education* 2002: 3):

On the ground that she is less able than man she is ... denied the opportunity, which she most needs ... If women really were incapable the arbitrary and artificial ring-fence which men have erected, and which they so carefully preserve, would not be needed.

5.2.3 Stressors at micro-level in the individual female self

As in the case of macro and meso-level stressors described above, those facing female participants in the primary and secondary educational industrial era milieus at micro-level may have been era specific and also rooted in eternal psychobiosocial factors including female biological and psychological vulnerability to stress as well as the social marginalisation as society's caretakers. Examples of stressor with the inner self of women and girls of the industrial era include work strain; frequent childbirth and pregnancy; dress and low self esteem

5.2.3.1 Work related physical and emotional strain

During most of the era working class females had to raise children and care for domestic issues as well as formally working for a living. Many women and girls experienced a typically pre-industrial life that involved long hours of physically strenuous domestic or agricultural work without the status of the agricultural labour of men and boys. Domestic manufacturing, such as spinning, became common for women who needed to supplement the family income, especially after the rise in population after 1750 in France and England (Branca 1978: 11,19,26, 30). However, by the second half of the nineteenth century, 'first in the cotton industry, and then in the wool and linen trade' the factory system replaced domestic manufacturing leading to an even more strenuous existence (Branca 1978: 31).

The English Census of 1851, which probably excluded many illegally employed workers, stated that 2.8 million women and girls over the age of ten out of a female population of 10.1 million were employed. This made up 30.2 per cent of the labour force. In 1901 they composed 29.1 percent and in 1931 29.8 percent of the labour force. Domestic service in 1851 employed 905,000 females, not including 145,000 washerwomen and 55,000 charwomen (Burnett 2001: 48-49). Working in factories was particularly stressful owing to poor ventilation, light, sanitation and safety conditions, long hours and dangerous machines. Sexual molestation was also common (Branca 1978: 42-50).

Starvation due to low wages, poverty, unemployment and gender discriminatory food distribution in Europe affected some women and girls to such an extent that they resorted to prostitution. There may have been as many as 20 000 to 80 000 prostitutes in urban centers 'like London and Paris' in the middle of the 19th century (Boulding 1976: 19-20).

Although women were involved with domestic, retail work and clerical employment from 1860 and from 1920s and there were more teachers, nurses and even other professionals, work was

most often seen as a means to an end (Branca 1978:54). Thus, perceived as stressful, women refused to make their primary identification with work that they considered part of the ‘family economy’ (Branca 1978: 68; Beck, Rush, Shaw & Emery 1979: 47; Louw & Edwards 1993: 696; Bloomfield & McWilliams 1996: 120; BehaveNet 2002b, s.v. “stress diathesis”).

Society offered little in the way of career choice during the Industrial Era. This may have contributed to female negative perceptions of work outside home. In 1900 in Britain, there were 1,740,800 female domestic servants, 68,000 female nurses, 212 female doctors and 2 female architects. Although there were 124, 000 teachers, they were in junior or nursery schools as high schools were staffed by male teachers (*Women in 1900* 2002: 10). Women were always recognized as mainly teachers of the very young and allowed to accompany only very young evacuated children during World War Two (Cassin-Scot 1980: 1-40).

5.2.3.2 Frequent childbirth and pregnancy

Better nutrition meant women gave birth more frequently and became fertile younger. Furthermore, life would have been particularly strenuous for those who had to work in fields or factories (Branca 1978: 80,85). The terms, *confinement* and *lying in* were examples of 19th century euphemistic denial of the female stressor of *pregnancy*. It was sometimes referred to as *feeling delicate* or the understatements, *that way*, *invalid’s way* or *in the family way*. Yet, pregnancy and childbirth were the most dangerous times in the life of a 19th century woman in Western Europe and America. Throughout the entire century, childbirth was the main cause of death among women. In many cases, puerperal fever mysteriously occurred following birth and often brought about rapid death. It was not until the late 1800s that doctors made a connection between non-sterile conditions of childbirth with infection and death. In fact, it was only in 1850 that the French chemist, Louis Pasteur (1822-1895), scientifically proved that bacteria caused disease. In 1867, Joseph Lister (1827-1912), used a carbolic spray as an antiseptic, spraying it on wounds and instruments to kill bacteria (*Victorian Lace* 2002: 7, 16; Kramer 1998: 31).

Both middle and working class females may have felt pressure because of expectations regarding their roles as mothers. Childbirth and childcare were considered the most important roles for women as in the past but with added demands in this era. Even though pregnancy and childbirth meant physical agony and even death, and contraception and abortion were tempting alternatives to which many females resorted, many females felt (and succumbed to) the pressure to be fertile and bear children (Branca 1978: 80-84; *Victorian Lace* 2002: 10; *Women in 1900*: 2002: 2).

Women and girls were often frightened at the thought of pregnancy, but there was little they could do to avoid it. Contraception was unreliable and many women were often ignorant, afraid of or repulsed by it. Women and girls, who practised the simple and socially acceptable birth control method of *coitus interruptus*, were warned by physicians that this was harmful to male health. Although surgical or chemical abortion was very commonly practised, and generally accepted by society during the early months of pregnancy, it was, however, still a cause of great shame for women. Few talked openly about it and it often ended tragically when methods included the use of abortifacients, rolling on the floor, jumping off furniture or stairs, or the use of blunt instruments (Lee 1888: 119; *Victorian Lace* 2002: 7, 16).

5.2.3.3 Cumbersome dress

Female fashion during the Victorian and other periods of the industrial era was intricate and stressful to wear. This almost seems a deliberate attempt at self-abuse disguised as a way of gaining social acceptance for being perfectly dressed. Victorian older girls and women, no matter what their social status, wore many layers of heavy and cumbersome clothing. Not only did they wear rigid corsets, which made it difficult for them to move or bend, several items were worn in addition to the corset. These included stockings, garters, boots with rows of tiny buttons, open-crotched drawers that ended just below the knee, a chemise with extra trimming over or under the bust line. Once the corset was on and tightly laced, a corset cover was put on over it to help hide the ridges of the corset's bones from showing through the dress. During some periods of the Victorian Era, a lady would have also put on a hoop, also called a *crinoline*, worn with a single petticoat over it to smooth the ridges of the hoop's wires. Some hoops measured over 140 inches around their base (Rowland-Warne 1992; 30, 42-43, 54-55).

The crinoline was one of the first fashions available to all classes. Later a bustle was worn with several petticoats to give the female body extra shape. Most Victorian undergarments were elaborately embellished as were hairstyles requiring the use of many pins, *hair rats* (wire forms that were placed under folds of hair), and switches (heavy strands of hair that were added to hair). For most of the 19th century and early 20th century, a skirt was worn which buttoned or fastened at the waist with hooks and eyes. A matching but separate bodice was worn which often buttoned up the back or wrapped around the torso in a maze of hooks and eyes. Most Victorian skirts were quite heavy, always fully lined with muslin or silk and stiffened at the hem to help hold the skirt away from the body. Because they were so heavy, it was necessary to have hooks at the waistband, which were attached to the bodice to keep the skirt in its place. The bodice was also lined and might have contained padding and boning. Whenever a woman

left her house, it was considered essential that she wear a hat or bonnet and gloves. Other essential accessories included a parasol and shawl, cape or coat. Often, women and girls changed their clothing several times during the day. While the uncomfortable and time-consuming task of dressing up may have been a dreaded chore for Victorian ladies, the inconvenience was a small price to pay for the social reward of being considered physically attractive and feminine. The same inspiration drove females at various other periods during the era 1750-1950 to suffer for the sake of beauty and fashion (*Victorian Lace* 2002: 10; Rowland-Warne 1992: 49, 50-51, 54-55, Cf. paragraph 5.4.6).

Corsets, the most stressful of clothing were worn at a young age. Often young girls of six or seven were fitted with a training corset. Then, at about 14, they advanced to adult corsets that were intended not only to reshape the figure, but also to alter the character. Society considered a small waist desirable in older women because it implied self-sacrifice associated with acceptable femininity. When a girl or woman wore a 17-inch corset, she would have actually had a waist measuring anywhere from 19 to 22 inches. Corsets were worn right until the exaggerated feminine curves of the Victorian lady were replaced by the new, nearly waistless (male) figure of the 1920s *Flapper* (Rowland-Warne 1992: 53; *Victorian Lace* 2002: 10).

5.2.3.4 Low self-esteem

The possible constantly conscious negative self-concept of industrial era females may have been both a stress and a stressor from within the individual. Women had a low social status and lived in dire illiteracy, poverty, filth, disease, overcrowding, danger, violence, struggle and continuous change especially during the late eighteenth and nineteenth centuries. This stressor at micro-level was a direct result of society's negative perception of female identity. Low cognitive appraisal prevailed from earlier times. This made female life particularly difficult during an era that presented many new challenges for women and girls in the primary and secondary educational milieus of the time (*Women and University Education* 2002: 3; *Were men and women equal* 2002: 1; Guy 1997: 2-9; Branca 1978: 23, 152-171; Kramer 1998: 10-11; 16-23; 29-31, 40, 42; *Woman in 1900* 2002: 1-2). In fact, a Victorian female writer, Flora Anne Steel (1898: 125) sums up the situation of women and girls of the era 1750-1950. She refers to the female status that::

... sells the soul of many a good woman into something worse than slavery,--into the loss of her own self-esteem, into a sense of perpetual degradation: the assertion, briefly, that the duties of wifehood and motherhood are in themselves debasing?

5.3 MANIFESTATIONS OF STRESS

During the eighteenth and nineteenth centuries medical thinkers described syndromes recognised today as manifestations of stress. Physicians like Esquirol (1782-1840) and Pinel (1745-1826) in France, Lombroso (1836-1909) of Italy, Griesinger (1817-1868) of Germany, Bleuler (1857-1939) of Switzerland systematically classified and explained mental illnesses that are considered stress disorders in contemporary Westernized society. Thus, a scientific approach replaced theories such as those of spirit possession and the theory of humours that had prevailed since ancient times. Many patients were diagnosed as mentally ill and asylums were established during the Industrial Era for their care but were, in fact, abusive (Brizer 1993: 32-50). In particular, Philippe Pinel observed and described stress disorders that he categorized into *mania*, *melancholy*, *idiocy* and *dementia*. Moreover, he ‘looked to the environment and heredity as causative factors in mental disease’. The researcher believed the latter may be factors for female stress throughout history (Brizer 1993: 38; 48-50). Yet, despite these eternal factors, there were particular manifestations of stress during the era as described in the following paragraphs.

5.3.1 Suicide

In Victorian times, female suicide was a frequent phenomenon of newsworthy interest in particular. Victorians feared suicide more than murder and it was a source of anxiety, disgrace and despair for observers. Stock explanations about female suicide in particular were often given. It was attributed to loneliness, heartbreak, insanity, financial ruin, emotional burnout, poverty and despair. Official inquests frequently settled on lack of intelligence, melancholy or madness (Gates 1988: 38-69; 125-149). According to Gates (1988: 125), Victorians in particular believed that suicide like madness was ‘a female malady’ and as more females were imprisoned for insanity so they were more prone to suicide. Broughton, a Victorian female writer speaks of her contemplation of suicide when she is alone at home without male companionship that she describes as ‘a very dreary thing’ (Broughton 1867: 245). She envisages a ‘picturesque form of suicide’ whereby she that would ‘drown” herself ‘in the garden pool, and be found with ... long red hair inextricably entangled among the duckweed’. She also ruminates on a ‘sequestered spot in which to "snip my carotid," and be discovered beautiful but gory, with an explanatory billet in my lily hand’ (Broughton 1867: 251).

5.3.2 Use of the term *distress*

The term *distress* appears often in descriptions of school life, marriage and other situations in the life of the women of these times and in the work of many Victorian writers in particular such as Sarah Stickney Ellis (1812-1872). She wrote copiously about *The Women of England, Their Social Duties, and Domestic Habits* in 1839. In particular she describes the general female condition of the era as one of *distress* and yet manageable because of female caring support:

... in the days of darkness and distress, when sickness clouds the brow, and grief sits heavily upon the heart. It is then that we pine for the faithful hand ... sisters who are kindly affectioned one towards another are not slow to answer this appeal of nature.

(Ellis 1839: 233)

Braddon, another female Victorian writer spoke of 'mental distress' that 'is ... associated in our minds with loose, disordered garments, and dishevelled hair' (, and an appearance in every way the reverse of my lady's (Braddon 1862: 214). Other female writers of the era mentioned distress in female participants in the primary and secondary educational milieus including: Sara Stickey Ellis (1839: 67) and Caroline Norton in her poems (1840:3). Other writers even mentioned the term *stress* in reference to the pressures of life such as Marie Corelli (1906: 242) and Mona Caird (1894: 13).

5.3.3 Hysteria

The condition termed *hysteria* existed in epidemic proportions during the Victorian period when thousands of European women suffered from various manifestations also termed *neurosis*. Symptoms such as hallucinations, lapses of consciousness, coughing, squinting, paralysis, deafness and fainting clustered together in a particular young Victorian woman, Anna O, who was one of the many hysterics examined and treated by Sigmund Freud (Brizer 1993: 71; Sadun 2002: 1). Other manifestations of hysteria included social withdrawal and a desire for freedom, seizures, including fainting and foaming at the mouth, delusional actions, fits of laughter, choking, sobbing, violent heart beats, swollen neck, flushed cheeks; impaired hearing and sight (Showalter 1985: 130, 134, 150, 154).

Hysterics were almost always women (although Freud later reported that men could suffer from hysteria). Unfortunately, theories of flawed female anatomy (in this case ovarian pressure) were still highly favoured at the time and were used to justify unnecessary surgical procedures on female patients. This was a stressor related both to the technological tendencies of the era as well as negative and uncaring perceptions of female anatomy (Brizer 1993: 71).

Mental health specialists today consider contemporary affective disorders as the same as those of yesteryear, but with different names (Interview 12). Contemporary literature on stress often lists the same symptoms of stress as, like the many ‘unrelated complaints’ and ‘bizarre ailments’ that ‘construct a classic profile of a single common Victorian syndrome: hysteria’ (Sadun 2002: 1). Examples of these physical, behavioural and emotional symptoms are coughs, fever, aches, trembling numbness, panic attacks, fainting and loss of speech (*Bullying, stress* 2002: 1). An article explaining statements regarding stress made by Dr Peter Graham, Head of Health Directorate, UK Health & Safety Executive, 24 September 1998, lists symptoms that include many attributed to hysteria during the Industrial Era (*Bullying, stress* 2002: 1).

Today the term *conversion reaction* is given to what Freud and Joseph Breuer described in their *Studies on Hysteria* (1895), where ‘painful memories are converted into paralysis or numbness’ and other mainly physical symptoms of hysteria. Moreover, Freud believed that sexual difficulty or trauma lay behind the symptoms, including repressed childhood sexual experiences. Freud connected stressful feelings of inner conflict in a society that denied them their sexuality, control and identity to manifestations of physical symptoms. However, Freud had success in treating hysteria via talk therapy that helped his mostly female patients to understand causes of their inner stress. During the 1980s in the US, similar treatment given to Cambodian refugees with hysterical blindness was equally effective. In this case, psychoanalysis of stressful memories cured both symptoms (Brizer 1993: 74; Sadun 2002: 3-4).

According to a contemporary theory of mass hysteria as a cultural response, Showalter (1997: 17) identifies clusters of post-modern syndromes such as chronic fatigue syndrome, recovered memory, Gulf War syndrome, multiple personality syndrome, satanic ritual abuse, and alien abduction. Showalter claims these are contemporary twentieth century manifestations of the hysteria of nineteenth century Western culture.

Hysteria was as widespread in Victorian society as depression is today. The latter is considered a stress-related disorder, widespread in female participants in the primary and secondary educational milieus, which presents somatic symptoms such as insomnia, loss of appetite, apathy, unsociability and overwhelming sadness. Perhaps revealing the underlying cause of depression, as Freudian psychoanalysis did with hysteria, could be as effective a treatment with depression as it was with hysteria during the 19th century (Sadun 2002: 3-5).

The term *hysteria* derives from Greek *hysterikos*, *hystera* womb and the Greek notion that hysteria was peculiar to women and caused by disturbances of the uterus. The term (dated 1801 in one particular dictionary) denotes ‘a psychoneurosis marked by emotional excitability and disturbances of the psychic, sensory, vasomotor, and visceral functions; behavior exhibiting overwhelming or unmanageable fear or emotional excess (Merriam-Webster’s Collegiate Dictionary 2002, s.v. “*hysteria*”).

The concept underpinned and was restricted to diagnoses of female affective disorders especially during the period 1870 to World War One (Showalter 1985: 130). The French theorist, Jean-Martin Charcot, in the late 1800s claimed that although men could suffer from *hysteria*, the nervous disorder was mainly a female disease (Showalter 1985: 148). Other theorists linked hysteria to attempts on the part of certain females to go beyond the boundaries of their stereotypical and socially accepted passive and nurturing nature. In the opinion of certain thinkers of the time, these females sought equality with men in education and elsewhere instead of being content as a wife and mother. Some physicians even believed that hysterics were acting deliberately owing to immoral and attention-seeking impulses, although Charcot understood the problem as emotional and subconscious (Showalter 1985: 122-123; 133, 137).

Treatment was sometimes equally gruesome and varied and included solitary confinement, hypnosis, confessions of being evil, dousing the head with water, slapping with wet cloths, suffocation and pressing on a tender bodily area (Showalter 1985: 137-138).

Although female hysteria was typically Victorian, changes in the Westernised world at the start of the 20th century brought diagnoses of affective disorders such as neurasthenia and anorexia nervosa. However, the early 1900's became known as an age of hysteria, as the number of diagnosed hysteria cases reached its peak during this time. Showalter claims that hysteria and other nervous conditions were a female coping strategy in a changing world where female roles were still oppressive in a patriarchal system. (Ward 2002: 1)

5.3.4. Melancholia

According to Sadun (2002:1), melancholia is the equivalent to contemporary society’s depression. The term has been used for centuries in the Westernised world since Galen to describe many mental disorders and covered what is today classified as depression, manic-

depression and mania. Women and girls were often admitted to psychiatric institutions in the nineteenth century with melancholia (Austin 1998: 54-65).

Melancholia did not reach epidemic proportions like hysteria of the Industrial Era and contemporary post-modern depression. However, it was often aligned with mourning and grief at the loss of a loved one in a society that ‘organized customary scenes of dramatic and hysterical mourning ritual’. These traditions did not deal with grief effectively and possibly led to continuing stress disorders like melancholia. Many writers of the era wrote about melancholia and its manifestation as excessive mourning (Jackson 1932: 382-429; Heinroth 1975: 214-215; Bucknill & Tuke 1968: 520; Diefendorf 1915: 349-353; Jackson 1986: 270-271; Freud 1959: 155).

Melancholy is more than the contemporary connotation of sadness. To the Victorian (1837-1901) mind, it was a complex emotion that many attributed to the changes that were taking place in society (Rogers 2002: 1). Queen Victoria appeared to manifest melancholy, which had depression type symptoms after her consort, Albert, died from typhoid in 1861. She then retired from public life and wore black for the rest of her life. She even mentioned her childhood as being ‘rather melancholy’ (Guy 1997: 8-9).

The author of *The Yellow Wallpaper* (1887), Charlotte Perkins Gilman, claimed that experiences in her own life of *melancholia* had prompted her to write the short story as a means to save other people from a similar fate. She wrote about her personal experience of *The Breakdown* or ‘nervous prostration’ that she described as ‘a growing melancholia’ and constant weeping that consisted of:

every painful mental sensation, shame, fear, remorse, a blind oppressive confusion, utter weakness, a steady brain ache that fills the conscious mind with crowding images of distress...absolute incapacity ... absolute misery.

(Geller & Harris 1994: 163-168)

The main character of *The Yellow Wallpaper* comes to recognise society’s inhumane treatment of women. In her awakening to this, she visualises her torment in the faded yellow wallpaper that hangs in her chambers, her jail. Gilman attempts to describe the basic reason for female stress disorders that is grounded in society’s negative perception of female identity. The story encapsulates female collusion in their own oppression by accepting the status quo in order to win social acceptance that they crave (Ward 2002: 1; Perkins Gilman 1973: 1-23).

5.3.5 Neurasthenia

Neurasthenia, considered the third disorder of the industrial era, was a more 'prestigious' form of female nervousness than hysteria, although it shared so many of hysteria's symptoms. Like hysteria, neurasthenia encompassed a wide range of symptoms: blushing; vertigo; headaches; neuralgia; insomnia; depression; uterine irritability; paralysis; anorexia (like women and girls in Rossetti's paintings). However, medical specialists of the day distinguished between the hysteric's supposed moral corruption with the neurasthenic's 'refined and unselfish nature' (Showalter 1985: 134-137)

Originally, neurasthenia was considered 'American nervousness' by the neurologist, George Miller Beard, in the late 1860s. Beard made a link between social organisation and nervous illness. He perceived as the latter to be a deficiency in nervous energy due to technocratic industrialised urban societies. American neurasthenic patients were mostly educated urban middle-class females. In such essays as *Neurasthenia and Its Relation to Disease of Women*" (1886), Dr. Margaret Cleaves described her own experience that she attributed to overwork and frustrated intellectual, social and financial ambition due to inherited psychosociobiological ill-preparedness for roles that 'men for generations have had'. English medical specialists viewed neurasthenia as a new name for what had long been called neuralgic disease or nervous weakness. They supported the notion of inherited female predisposition to stress disorders (Showalter 1985: 134-137)

5.3.6 Emotional overreaction

The emotion of love taken to excess might be interpreted as a manifestation of stress as described by Christina Rossetti in her poems. The latter speak of the distress of love such as *A Better Resurrection* (30 June 1857) and *Love Is Strong as Death* (before 1882) (*Victorian Poems of Faith and Doubt* 2002: 1).

5.3.7 Sexual promiscuity

Chapter one listed sexual promiscuity as a contemporary manifestation of stress. This may have been a symptom of stress during the Industrial Era as well, or even a stressor in itself at micro-level. Nevertheless, during various stages in the era, girls gave evidence of sexual promiscuity either because of a liberal attitude, especially in Georgian society (1750-1850) or

because society encouraged girls to look for prospective husbands in this way throughout much of the era. The age of sexual consent was 14 for boys and 12 for girls. While most people did not marry until their early twenties, teenagers were often quite promiscuous. Rather than face the consequences of having an illegitimate baby, many girls concealed their pregnancies and abandoned or murdered their babies at birth. There was also a high incidence of venereal disease usually treated by ingesting mercury, which is poisonous. Single girls who fell pregnant were often made to marry or face being ostracized. Moreover, Georgian attitude towards sex was reflected in female clothes that included 1780s dresses with grotesquely enlarged busts and bustles, using frames and padding, and 1790s transparent bodies on dresses that were the dominant style in high society. Later during the Victorian (1837-1901) and Edwardian eras (1901-1910) female clothing tended to emphasise enlarged hips and buttocks (Guy 1997: 14-15; 20-21).

5.4 COPING MECHANISMS FOR STRESS RELIEF

Female coping mechanisms for stress during the Industrial Era may have often been contrived attempts to find control in an ever-changing world in keeping with the technocratic and man-made trends of the time. Stress coping strategies may have sometimes restored dignity and buffered stress. However, unnatural stress management methods led to further long-term stress in the female participants in the primary and secondary education milieus who remained oppressed and left a legacy of biopsychosocial stress diathesis to the post-modern era (Guy 1997: 1-31; Kramer 1998:1-45; Northrup 1998:710-11).

5.4.1 Substance abuse

Some women and girls when under stress used alcohol and drugs, such as opiates. Moreover, these were freely purchasable in pharmacies until the early 1900s (Branca 1978: 107-131; *Confessions of a young laudanum drinker* 2002: 1). According to Anisman & Merali (1999:241), 'stressful events may profoundly influence the use of alcohol or other drugs'. Moreover, certain remedies, which could be purchased without prescription were sold as therapy for female physical and mental problems. These prescriptions were unlikely to cure and probably had negative long and short-term side effects. An example is Lydia E. Pinkham's Vegetable Compound sold by druggists in America and Canada that 'claimed to cure almost any and all Women's problems' (*Victorian Lace* 2002: 7):

Ovarian troubles, Inflammation and Ulceration ... and is particularly adapted to the Change of Life. It removes Faintness and FlatulencyCures Bloating, Headaches, Nervous Prostration, General Debility, Sleeplessness, Depression and Indigestion.

5.4.2 Contraceptives and abortion

Primitive vaginal devices, abortion and other means of birth control may have lessened the fear of pregnancy that was a very stressful reality. Unfortunately, many led to social, physical and psychological complications for the females who used them. Home abortions, indiscriminate dosages of Seneca snakeroot or juniper berries, deliberate trauma or falls, caustic douches and strong purgatives as methods of ending pregnancy were some of these dangerous measures (Branca 1978:107-131).

5.4.3 Extended family support

Working class females coped with stress via the physical, social and emotional support of female relatives and friends compared to isolated middle class women, although older female relatives often exacerbated feelings of conflict between the old and new ways of life that faced the industrial era (Branca 1978: 141-144).

5.4.4 Social reform

Certain women were active in the demand for equality. They may have been role models and a source of relief to the millions of oppressed females in Westernized society at the time. Many leading novelists of the era were women and Florence Nightingale, Elizabeth Blackwell and Elizabeth Garrett Anderson made important breakthroughs in the field of medicine. During the second half of the 1800s women began to demand and fight for the vote. Efforts of women like Lydia Becker and Emmeline Pankhurst may have inspired others to seek control of their lives during the era. However, many suffragettes went to extremes and frightened the majority of females as well as alienating society further against equity (*Were men and women equal* 2002: 2).

5.4.5 Rest cures

The standard treatment for neurasthenia was the neurologist, Silas Weir Mitchell's rest cure, developed after the America Civil War in 1873. This therapy used isolation, massage, electricity, immobility and diet. When his neurasthenic patients that included famous American

female intellectuals became ‘thin, tense, fretful, and depressed’, Mitchell prescribed the ‘cure’. This therapy had many negative consequences especially the isolation of the patient and resulting dependence on physicians that led to further collusion in female oppression (Showalter 1985: 138-139)

5.4.6 Beauty and fashion devices

Although a cause of strain and linked to a possible masochistic self-image, the time-consuming and physically uncomfortable constructions of beauty and fashion devised during the industrial era gave females a sense of power in realizing the ideals of perfect womanhood, however unnatural. The 1891 book, *Polite Life and Etiquette*, states:

How to be beautiful, and consequently powerful, is a question of far greater importance to the feminine mind than predestination or any abstract subject. If women are to govern, control, manage, influence, and retain the adoration of husbands, fathers, brothers, lovers, or even cousins, they must look their prettiest at all times.

(*Victorian Lace* 2002: 10)

Female fashion varied during the 18th, 19th and early twentieth centuries but was mainly cumbersome. The first 18th century style was the *mantua*, a dress that was fitted at the waist at the back and worn open in the front to show petticoats that were often padded. This style developed into the *polonaise* with overskirts ‘draped up into three swags to show a decorative underskirt’ supported at the hip by a *panier* a wire basket type of undergarment (Rowland-Warne 1992: 30; Guy 1997: 15).

The style of women’s garments during the Industrial Era often reflected an attempt to find self-esteem in an exaggeration and even enlargement of the female bodily shape in all directions. After 1760, women began to expand vertically as well, raising their hair with pads and pomade to a height that only a man on stilts could hope to emulate. After 1780, a fashion for Rousseauesque naturalism took over and women adopted more so-called natural looking fashions. These still took up a considerable amount of space, but emphasised the natural sexual characteristics of the female figure with padded busts and bottoms and riots of cascading hair. The 1790’s saw women’s dress lose its artificially supported dignity in favor of comfort and naturalism that tended to expose the real body in a wave of a general licentious society. In the late 18th century women transferred the emphasis on the exaggerated female form and

discarded not only their false behinds but their underwear as well. This was due to the influence of the French Revolution (1789-1899) whose message of freedom 'spread 'far and wide (Rowland-Warne 1992: 38).

The woman of 1800 proudly displayed the strength of her natural physical femininity with as much force as her mid-century predecessor. However, this style was to be replaced by the unnatural female dress code of most of the 19th and parts of the 20th centuries (Rowland-Warne 1992: 38-39; *Women's Clothing in the Victorian Era* 2003: 1). Nonetheless, from second decade of the 20th century onwards, the women's liberation movement led to the emancipation of many women not only politically but also from constraining clothing. In particular, the agonizing gradually disappeared and skirts became looser and less restrictive. In fact, after World War 1 (1914-1918), the whalebone corset was completely discarded. In the western world, the 1920s and 1930s was an era of generally soft and simple clothing for women and girls (Rowland-Warne 1992: 50-53). Unfortunately, the strict and constraining psychological and economic atmosphere of World War II (1939-1945) led to a partial return to restrictive female dress styles as the era drew to a close in 1950. During the war, the scarcity of clothing material, led to the wearing of coarse and heavy fabrics. After the war, the *New Look* of fashion involved a return to 'tightly fitting bodices and long, full skirts, often worn with narrow high heels' (Rowland-Warne 1992: 56).

5.4.7 Elaborate rituals

Convoluting rituals may have been an attempt to cope with the strains of courting, marriage, childbirth and other life events during the Industrial Era. For example marriage involved an elaborate proposal procedure and the exchange of rings plus the protocol of arranging the day. Rules of etiquette meant sending invitations only two weeks before and no earlier, an expensive bridal trousseau and an expensive and elaborate wedding feast. Superstition played a role and events leading up to the wedding were steeped in ancient traditions and superstitions, including which day of the week and which month, the bride should select.

The belief that brides were believed to be particularly vulnerable to evil spirits reveals the awareness of the stressful nature of marriage in the lives of females of the Industrial Era. Therefore, many customs and traditions associated with weddings were originally meant to provide some type of protection or assurance of good luck. The Victorian penchant for dressing all the women in the wedding party nearly identically to the bride was derived from such an

ancient belief. The hope was to confuse evil spirits. In fact, the bridal wedding veil was there to ward off evil spirits (*Victorian Lace* 2002: 10; Rowland-Warne 1992: 44-45).

To cope with frequent death, elaborate mourning rituals prevailed especially during the Victorian era. For the wealthy, there would be a lavish and contrived funeral. Females, in particular Queen Victoria who was only 42 years old when her consort died, remained in mourning for the remainder of their life and wore black, following many strict rules of etiquette regarding mourning dress and behavior during this period of time. Women, unlike men, were expected to go into total mourning for at least a year after the death of a husband and were allowed to leave the house only to go to church or to visit very close relatives. Two years after the death of a husband, the widow could include visiting close *friends*, as well as relatives. Then, during the third year of mourning, females could start wearing the ‘half-mourning’ colors of gray, white, and purple. Women also coped with death by braiding the deceased individual’s hair into a brooch and other jewelry or into a wreath. This was painstaking work that may have been an attempt to cope by occupying their thoughts and their time with doing something intricate, which involved a tangible part of a loved one. Another mechanism was the wearing of special often inherited mourning jewelry made from jet black onyx, black glass (called *French jet*), black enamel, or hardened black rubber, called *vulcanite* (*Victorian lace* 2002: 11-12).

During the Victorian era, there was etiquette for even parlour games, a relaxation coping mechanism. By the 1850s entire books were written on the subject of entertainment for the parlor. For the most part, these books focused on participatory games such as charades, twenty questions, tableaux, musical chairs, blind man's bluff, and I spy. However, they also gave advice about quieter activities such as piecing together jigsaw puzzles, solving riddles, or reading aloud (*Victorian Lace* 2002: 10; Kramer 1998: 20-21).

5.4.8 Hypnotism and early psychoanalysis

The industrial era saw the advent of psychotherapeutic efforts to cope with stress disorders. The Austrian, Franz Anton Mesmer (1734-1815) cured patients by means of the laying of hands and convincing patients that the flow of animal magnetism in them was thereby corrected. The English surgeon, James Braid, Jean Martin Charcot (1825-1893), director of the Salpêtrière mental home in Paris, and others adapted Mesmer’s technique into *hypnotism* that healed by suggestion. Pierre Janet (1859 – 1947) found that painful experiences once forgotten (repressed) could cause neurotic symptoms. More importantly he found that uncovering these traumatic memories (catharsis) with hypnosis could lead to cure. Sigmund Freud (1856-1939) had patients ‘free associate’, that is, express whatever comes to mind. Freud contributed to

early understanding of stress disorders especially in his female patients (Brizer 1993: 51; 69-90, 74).

5.4.9 Religious practices

Many females may have found solace for stress by joining the religious revival of non-conformist movements such as the English Methodist church formed by Charles Wesley in 1738. His brother, John Wesley (1703-1791) often preached to thousands in the open air. Like the artist and poet, William Blake (1757-1827), many rejected the traditional church in face of the stressors of the Industrial Revolution. For example, many individuals could not reconcile a belief in a benevolent God and the Christian church with the dire poverty and abuse of human rights that came with urbanisation and the factory system including child and female abuse. On the other hand, many middle and upper class females may have observed traditional religious practices to numb their awareness of the appalling poverty that surrounded them in England (Guy 1997: 30-31; *Victorian Lace* 2002: 16).

5.4.10 Magazines and books that offered advice to females

During Victorian and Edwardian times an abundance of prescriptive literature, advice books and journals gave guidance to its mainly female readers especially on issues of romance and marriage which were important to women at that time (*Victorian Lace* 2002: 10). A microfilm collection from the Bodleian Library, Oxford lists over 352 titles of prescriptive literature and journals from the Victorian and Edwardian era, from 1837 to 1910. This collection documents the nature of society at that time, especially of women. Topics published included: cookery; domestic life; gardening education and etiquette; entertainment; fashion; society and beauty; language and literature; letter writing; divorce; mothers and daughters; religion and morality; travel; women and the law; women and work; women's health; women's rights and status (*Women and Victorian values* 2002: 1).

5.4.11 Music

Almost every middle and upper class girl and woman of the Industrial Era was taught to play the piano. This may have bestowed a sense of comfort not only from the actual music and control of an instrument, but also from the esteem bestowed by society for her skill in playing popular and classical music. This was a time when sheet music was available and a new song published for each significant event. Music was a most popular form of entertainment during the Victorian Era. Most Victorian homes had a piano in the parlor, but mansions of the era

actually had a music room. Here families and guests gathered for performances that included singing. For girls, knowledge of music and musical instruments enhanced chances of obtaining a husband. Music boxes were also a source of comfort in stress for industrial era females (*Victorian Lace* 2002: 10; Guy 1997: 12; Kramer 1998: 21).

5.4.12 Relaxation

Rest from stress may have been afforded to working class females of the industrial era by means of simple pleasures in their few hours' break from work such as dancing, going to fairs, cockfighting, (even though a stressfully cruel sport), theatre, musical revues and comedies (Guy 1997: 12-13).

The rich enjoyed themselves to the point of extravagance, gambling, hunting, attending balls and dinners and after dinner musical evenings and *taking the waters* at spas such as Bath in England, Newport Beach, Saratoga Springs and Niagara Falls in US and Baden Baden in Europe. They also spent many hours in the drawing room at home where they played music, read, played games and conversed. Very young Victorian children would spend almost all their lives in a nursery in the care of a nanny. Girl's in particular spent their days playing with dolls, dolls' house and reading books (Guy 1997: 12-13; *Victorian Lace* 2002: 18; Kramer 1998: 20-21).

5.4.13 Female role models

Industrial era girls and women may have coped with conforming to society's image of the ideal female by modeling themselves on role models, such as those provided by the media. Examples are the illustrator, Charles Dana Gibson's drawings of the *Gibson Girl* in 1890 in *Life* magazine. The American ideal, she was beautiful, tall, slim, high-class and elegant, representing a new look for women as someone in control. Moreover, she was comfortable, even in a corset. In fact the corsets of the early 1900s were really constricting. They forced the bust forward and thrust the hips back. The general effect was of a large bust, small waist and a large bottom. The look was known as the "S" shape (*Victorian Lace* 2002: 2; Rowland-Warne 1992: 48-49)

5.4.12 Better nutrition

Diet improved for females especially during the Industrial Era. This led particularly to a decline in perinatal mortality as a 'historical indicator of female health status'. The higher 'nutritional

status' of child bearers in the era may have been a slight panacea against stress despite increased fertility and accompanying stressors (Hart 1998: 215-219).

5.4.13 Education and literacy

Although at the beginning of the twentieth century, less than a quarter of all British girls aged between 12 and 18 attended any kind of school, access to formal education improved during the Industrial Era, especially for British girls. Moreover, by 1920 the numbers had risen. Yet, lack of interest in female education continued until as late as the beginning of the First World War. Nevertheless, increasing numbers of middle-class British girls attended school from the start of the century. This was owing to the growing preference of women to teach in schools rather than in private families. Although girls studied a curriculum similar to that in boys' schools with an emphasis on academic attainment and sport rather than domestic crafts, their biopsychosocially circumscribed aim was still perceived to be a wife and mother. However, the aim was to an educated *companion* to her husband and better able to mother her children. Furthermore, schoolgirls' lives revolved around their school experiences, a world without boys and adults, reinforced by a society, which treated middle-class girls as children until they left school at 17 or 18 years. Thus, the separate culture afforded by the girls' school system gave Industrial Era females a sense of power within the female secondary educational milieu, but not beyond it in the real world where they were still second-class humans (*Victorian Lace* 2002: 11)

5.4.16 Adolescent female literature

As in the case of all girls' schools, girls' literature became a (marginalized) coping mechanism for stress for females in England. Fiction provided them with a common imaginary world where girls were esteemed and defined via literature. Stories were set in girls' schools, where girls' feelings, interests, language and values were reflected along with the schoolgirl image in the latter part of the nineteenth century and first quarter of the twentieth century. During this time the genre of girls' school stories became established and was the most popular form of reading for British girls. The literature focused, not on their lives as daughters and future wives and mothers, but on heroic activities in an all-female world, which could lead to university and a career in a patriarchal society. Fiction and girls' schools provided a community of girls and women, free from patriarchy (Gosling 2001: 1). Margaret Simey, who was born in 1906 and became a pupil at St Paul's girls' public school in London, recalls that:

Our brothers had gone to school, that kind of school, but women hadn't... I remember what it was like not to have a vote. And in that atmosphere, where the boys were everything, you went to this school where it was an entire world of women. And these books, Angela Brazil and that were all about our private world, it was *our* world.

(archived interview, 1990 in Gosling 2001: 1)

5.4.15 Use of perfumes

Females used perfumes based on a belief in their therapeutic value. This had been firmly established during the 17th and 18th century when doctors promoted the use of perfumes to combat infection. They had frequently referred to the therapeutic use of fragrances by eminent physicians of the Ancient world such as Hippocrates, who had burned scented stakes to combat the plague of Athens, Galen and Crito (whose healing methods were based almost entirely on the use of aromatics). In the 17th, 18th and 19th century, perfumes were widely used as remedies for almost any physical or mental disorder - including hysteria, amenorrhea, melancholia, hypochondria, headaches and the common cold - despite growing scepticism about their efficacy among some scientists. By the early 19th century, skeptical scientists, in favor of chemical medicaments, had largely discredited the use of aromatics for medicinal purposes. Many traditional practices persisted, including the addition of perfumes to pharmaceutical preparations. The influence of 'aroma phobic' scientists, philosophers and moralists was widespread (*The Smell Report* 2002: 1; Guy 1997: 14-15).

Until the late 18th century, the most popular fragrances for aesthetic rather than medical purposes were the powerful, heavy perfumes derived from animals - musk, civet and ambergris. These voluptuous perfumes fell from grace in the late 18th century. In this period, advances in bodily hygiene encouraged a fashion for more subtle and delicate fragrances since strong perfumes such as musk cast doubt upon the wearer's cleanliness. Moreover, their associations with animal reproductive instincts became distasteful to the newly modest and fastidious trendsetters who perceived female biology in the same light. The psychologist Havelock Ellis, highlights the discrediting of musk as a significant turning point in the history of sexuality. Until the late 18th century, he claims, women used perfume as a means of emphasising rather than masking their natural body odour. Thereafter, natural functions became socially unacceptable and, in particular, sexual repression reigned supreme. Prior to the Industrial Era, animal perfumes such as musk had the same function as the corset during the era. They were both used to accentuate and exaggerate the female form to appeal to men in a male-dominated society (*The Smell Report* 2002: 1; Guy 1997: 14-17).

5.4.16 Shopping

The late 19th-century transformation of London West End, especially Oxford Street and its environs, into a retail centre made urban shopping a major leisure activity for women. The rise of shopping opened the city streets to respectable women and played a significant role in both the rise of self-esteem and freedom in females and consumer culture. With the rise of public transport (especially the central Underground Line of 1900), it became easy for women to get to the West End, and to spend extended periods of time shopping that enticed them more than lectures or art. Women's magazines, especially *Queen*, stimulated an appetite for consumer goods. Journalists described the London shops as an art form in themselves. Increasing wealth and an torrent of consumer goods led to an increase in advertising and department stores abounds. Dickens and Jones and Harrods were among the first in London. In 1893, Marks and Spencer opened its first shop in Manchester. Women began to find satisfaction and solace from the stress of domestic and other areas of life in shopping and taking afternoon tea in teashops that befitted an era of technology and consumerism (Rappaport 2001: 323; Rowland-Warne 1992: 40; Kramer 1998: 18).

5.5. Summary

Female participants in the Western primary and secondary educational milieus during the second half of the eighteenth century, the nineteenth century and the first half of the twentieth century may have been faced with stressors unique to the epoch. This era included the time of the Industrial Revolution, the Georgian era (1750–1850), Victorian period (1837-1901) and the first fifty years of the 20th century including the period of the World Wars. Examples of these time-related stressors at macro, meso and micro-level are: urbanization; the suffragette movement; particular war and famine conditions; technological change including that regarding to travel and transport, work outside the home; child labour; criminal children and work related physical and emotional strain (Cf. paragraphs 5.2.1.1, 5.2.1.2, 5.2.1.3, 5.2.1.4, 5.2.1.5, 5.2.1.6, 5.2.1.7; 5.2.2.2, 5.2.2.3, 5.2.3.5, 5.2.3.1). Many of the time related stressors were basically a result of the era being one of great change. However, females may have been vulnerable to stress because of the interplay of these temporal factors with the eternal factor of society's negative perception of hormonally based female psychobiosocial natural and nurtured heritage as nurturers and caretakers of the young and old. Examples of these stressors were a discriminatory legal system, medical ignorance regarding female health, female orphans, pressure to be married and to have children, female servants, exclusion of females from the

secondary educational milieu and a low self-esteem (Cf. paragraphs 5.2.1.3, 5.2.1.8, 5.2.2.7, 5.2.2.8, 5.2.2.11, 5.2.3.4). Other stressors were often part of a dismal female reality of being burdened with domestic responsibilities, of experiencing infant mortality and the death of family members, of being absent from children, of feeling work-related strain, of frequent pregnancy and childbirth and wearing burdensome clothing during most of the era (Cf. paragraphs 5.2.2.1, 5.2.2.2, 5.2.2.6, 5.2.2.9, 5.2.3.1, 5.2.3.2, 5.2.3.3).

The research reveals that women and girls during the era reviewed in this chapter did succumb to the stressors that confronted them. The use of the term *distress* at the time points to the probability of stress being experienced by females (Cf. paragraph 5.3.2.). Examples of behavioural manifestations of stress are suicide, emotional overreaction and sexual promiscuity (Cf. paragraphs 5.3.1, 5.3.2, 5.3.6, 5.3.7). Emotional disorders such as hysteria, melancholia and neurasthenia were observed and treated at the time (Cf. paragraphs 5.3.3, 5.3.4, 5.3.5).

Although they may have manifested stress, women and girls during these times may have been able to cope by means of strategies that may have been as new as other aspects of the changing world in which they lived. Yet, many new strategies may have led to further stress since they may have been as unnatural and synthetic as other aspects of the industrial era. These maladaptive mechanisms were artificial and overdone as well as becoming stressors in themselves. Examples of these strategies were substance abuse, contraceptives and abortion, rest cures, beauty and fashion devices, elaborate rituals, hypnotism and early psychoanalysis, certain religious practices and shopping (Cf. paragraphs 5.4.1, 5.4.2, 5.4.5 –5.4.8, 5.4.18). On the other hand, some stress coping mechanisms may have been adaptive and even similar to those used by female ancestors of earlier epochs such as extended family support (Cf. paragraph 5.4.3). Furthermore, coping strategies built into the new society may have raised female self-esteem such as social reform, female literature, female role models, female education and literacy (Cf. 5.4.4, 5.4.10, 5.4.13, 5.3.15). An awareness of the need to improve nutrition may have been one of the most effective stress coping strategies underpinning female stress management at all levels, psychologically, biologically and socially (Cf. 5.4.14). Other measures would have provided stress relief in the form of music to pacify feelings of distress, relaxation practices and the use of perfumes to calm emotions and even promote feelings of self-esteem (Cf. paragraph 5.2.11, 5.2.12, 5.4.17).

Despite various attempts to manage stress, stress may have remained unresolved in many women and girls during the period in history (1750-1950). This may have continued genetically into future generations of Westernized women and girls involved in the informal and formal learning situation of the home and school. Female vulnerability to stress may have, therefore,

been psychobiologically inherited and continued in future Westernised eras. Likewise negative social perceptions of female identity may have continued in later times despite apparently some different time-related stressors.

The following chapter will investigate the contemporary era with the aim of understanding the stress experienced by its female participants in the primary and secondary educational milieus to suggest a solution to the problem. If stress is indeed a universal and eternal phenomenon, then an attempt to uproot eternally grounding factors regarding stress by means of the act of education may empower contemporary females to deal more successfully with the challenges that face them.