





The feminist appropriation of pregnancy testing in 1970s **Britain**

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ABSTRACT

This article restores pregnancy testing to its significant position in the history of the women's liberation movement in 1970s Britain. It shows how feminists appropriated the pregnancy test kit, a medical technology which then resembled a small chemistry set, and used it as a political tool for demystifying medicine, empowering women and providing a more accessible, less judgmental alternative to the N.H.S. While the majority of testees were young women hoping for a negative result, many others were older, menopausal women as well as those anxious to conceive. By following the practice of pregnancy testing, I show that, at the grassroots level, local women's centres were in the vanguard of not only access to contraception and abortion rights, but also awareness about infertility and menopause.

Sue Jones was on her way to be interviewed for the Bolton Women's Liberation Group Oral History Project when, passing the back of the town's historic Market Hall, she thought to herself, "I must tell them about the pregnancy testing" because we started off,' she later explained at the interview:

opposite there, and I think it's a nightclub now, or part of a nightclub. A Holiday Inn! That's what it is. It used to be the old Co-op funeral parlour, and that's where we used to do the testing. We were given the use of the premises free I think, and it was a dump, but that's where we did it—it was very central, it was very good and we did it every Saturday morning, we did it for quite a long time.

By the time of the interview, some thirty-seven years after she had joined the group as a young mother in 1972, Jones did not remember where they 'got the kit from,' but she did remember that 'you had to do one or two things with the kit; it wasn't like the ones you get from Boots now where you just wee on a stick!' 'We did pregnancy testing,' she told the interviewer, 'and it was very important to us in those days.'1

Histories of the British women's liberation movement occasionally mention free pregnancy testing and 'post-test counselling' in passing, typically in connection to women's health centres, but little is known about the practices or politics of this 'vital service'.² Directly inspired by the American women's health movement and its self-help manual Our Bodies, Ourselves (1971), British feminists launched their own critique of medical sexism.³ From the First National Women and Health Conference in Sheffield in 1974 to Sue O'Sullivan's regular health column in the magazine Spare Rib (1972-1993), a newly frank emphasis on the female body and women's health ran through the British movement.4 Free access to health care and the 'iconic status' of the N.H.S., however, meant that (socialist) feminists generally aimed at reforming the 'much-valued' system from within.⁵ Whereas most attempts to set up feminist alternatives to the N.H.S. failed, more limited local services such as pregnancy testing flourished.⁶ Alongside the more canonical activities of cervical self-examination and menstrual extraction, pregnancy testing was, on both sides of the Atlantic, part of a broader 'strategy of empowering women with information and access to technology.'7

In Britain, the grassroots pregnancy testing offered by women's groups in the 1970s built on a longer tradition of feminist activism and the involvement of women's voluntary organisations in always-controversial services around fertility control. These went back at least to 1921, when Marie Stopes and her husband opened the first Mothers' Clinic in working-class Holloway, North London.⁸ Following Stopes, the National Birth Control Council, later the Family Planning Association (F.P.A.), established an extensive network of clinics that was absorbed into the N.H.S. in 1974, when contraception became freely available to unmarried women.⁹ From the late 1960s, Brook Advisory Centres provided contraception to minors, and the London-based Pregnancy Advisory Service (P.A.S.) as well as the Birmingham Pregnancy Advisory Service (B.P.A.S.) managed a network of non-profit abortion clinics. 10 Dependent on alliances between laywomen and sympathetic doctors, these organisations filled gaps in N.H.S. provision and existed in a relationship of both tension and collaboration with the medical establishment and welfare state.

Projects such as Sisterhood and After and the digitisation of Spare Rib have recently provided fresh resources with which to enrich the history of the women's liberation movement.¹¹ In this article I marshal a range of previously unused materials to show how British feminists managed to appropriate the pregnancy test, which then resembled a small chemistry set. As with the plastic speculum and 'Del-em' menstrual extraction device, they used the test kit as a political tool for demystifying medicine and empowering women, bringing the medical technology into the domestic sphere and realigning it with the feminist politics of the day. 12 As in America, where pregnancy testing was similarly widespread in 1970s, women's groups in cities around Britain established local services as a means of facilitating access to abortion, contraception and information.¹³ They expected to serve mainly young women dreading pregnancy. But as the testers soon found out, while a negative result came as a relief to most testees, including not only girls and young women, but also older, menopausal women, it disappointed numerous others who were trying to conceive. The 'many faces' of pregnancy testing surprised some activists, who later saw themselves as having been in the vanguard of not only access to contraception and abortion rights, but also awareness about infertility and menopause. I argue that, while infertility and menopause never achieved the status of abortion or contraception at the level of national campaigning, at the grassroots level, feminists engaged with these other aspects of women's reproductive lives more than histories of either the liberation movement or infertility generally acknowledge.



Pregnancy 'diagnosis', abortion, and the N.H.S.

Women have long relied on bodily signs such as a missed menstrual period or morning sickness to self-diagnose pregnancy. By the early twentieth century, some working-class women continued to offer their urine for visual inspection to the 'water doctor', but the medical encounter was increasingly mediated by the laboratory, including for pregnancy testing. Between the late 1920s and the mid 1960s, laboratory workers injected women's urine into living animals—first mice and rabbits, then frogs and toads—to 'diagnose' pregnancy. If present in sufficiently high concentration in the patient's urine sample, the 'pregnancy hormone' today known as hCG (human chorionic gonadotrophin, the same molecule later detected by home tests) triggered physiological changes in the animals, which reliably constituted a 'positive' result. Crucially, pregnancy testing was, in this period, a diagnostic service for medical professionals only; the only way a woman could obtain the result of a laboratory test was from her doctor. A few specialised centres and most hospitals, but not doctors' surgeries, were equipped for pregnancy testing. G.P.s would post a patient's urine sample to a lab and it could take a week or more for the result to come back. 16

From the late 1940s, pregnancy testing was made freely available on the N.H.S., but only for medical reasons; doctors rejected demand from so-called curiosity cases: healthy married women likely to have an uneventful pregnancy. Doctors' requests for all kinds of laboratory investigations, including pregnancy tests, doubled from around 22 million in 1961 to 45 million in 1971, straining a health system that was facing a major financial crisis by the mid 1970s. The widely publicised birth defects caused by thalidomide and rubella in the early 1960s as well as the somewhat later campaigns around smoking in pregnancy and fetal alcohol syndrome incentivised women, including those hoping to conceive, to get tested earlier and in greater numbers than any previous generation. Previous generation.

The meticulously kept records of a rural G.P. interviewed by feminist sociologist Ann Oakley in the early 1980s show that he ordered pregnancy tests for only 1.3% of his female patients in the late 1940s and 38.8% in the late 1970s, a thirty-fold increase in three decades. Many G.P.s, however, disapproved of 'social' pregnancy testing as an abuse of the already overstretched service. From the mid 1960s, by which time mass-produced immunological test kits had supplanted living animals, commercial labs served women directly, not as 'patients', but as 'clients'. So too did pharmacists as well as branches of the F.P.A., Brook, B.P.A.S. and P.A.S. The thriving non-medical market for pregnancy testing paved the way for Britain's first do-it-yourself test kit, Predictor, in 1971. By then, some two-thirds of all women had heard of the once taboo subject of pregnancy testing. 22

Predictor was available through the 1970s from most pharmacies except Boots, Britain's largest and historically conservative chain, but self-testing was not universally embraced overnight. In 1974, the consumers' watchdog *Which*? advised going to one's G.P. in the first instance and warned that 'clumsy' users could end up wasting 'almost £2' on the 'do-it-yourself' kit. It also reviewed free testing from B.P.A.S. branches alongside commercial labs and family planning clinics, which charged between £1.50 and £3 (perhaps ten times as much in today's money). Today this might not seem like much, but for a young student in Leeds in the late 1960s, a commercial pregnancy test cost as much as a week's

rent.²⁵ Nevertheless, in the early 1970s, pregnancy testing was available from a variety of sources in a variety of forms.²⁶ To this mix was added free or at-cost pregnancy testing by women's liberation groups around the country.

Feminist pregnancy testing was closely connected to grassroots activism and national campaigns for access to contraception and abortion. Before the landmark conference at Ruskin College in Oxford launched the women's liberation movement on 27 February 1970, two pieces of legislation from 1967 had already liberalised access to contraception and abortion: the National Health Services (Family Planning) Act and the Abortion Act, the latter coming into force in England, Wales and Scotland on 27 April 1968. From the formation of the Society for the Protection of the Unborn Child (S.P.U.C.) in 1967 and splinter group LIFE in 1970, the anti-abortion movement redirected feminist campaigns towards reproductive rights under the N.H.S.²⁷ 'Free contraception and abortion on demand' was one of the four demands adopted in 1970 in preparation for the Women's Day march on 8 March 1971—alongside 'equal pay now', 'equal education and job opportunities', and 'free 24-hour childcare'. Abortion became 'almost the definitive issue' of the British women's movement in the 1970s, with massive demonstrations against the anti-abortion bills of James White (1975) and John Corrie (1979), among others.²⁸

Meanwhile, the relationship between pregnancy testing and abortion came under scrutiny when Sir Keith Joseph, the Conservative Secretary of State known for his contentiously Malthusian views, established a committee of enquiry into the working of the Act in 1971.²⁹ Chaired by Justice Elizabeth Lane, England's first female high court judge, the committee's three-volume report, published in April 1974, stated that 'the safest time for termination is before the twelfth week of pregnancy' and stressed the importance of 'expeditious diagnosis of pregnancy [...] both from the woman's point of view and that of her medical care.' The report, which strongly upheld the Act, further found that:

the most satisfactory method of obtaining a test is through a general practitioner, although it is a disadvantage that, if he [sic] sends the sample to a NHS laboratory for testing, it may be several days before the result can be communicated to the patient.³¹

The report recommended 'that NHS laboratories should make arrangements, where they do not already exist, for pregnancy testing on all referrals from doctors and for prompt communication of the results', and 'that the Health Departments should consider the feasibility of providing pregnancy testing facilities in addition to those services already provided at NHS hospitals.'32

In 1972, the Women's National Commission, an umbrella body for women's organisations set up by the government in 1969, made headlines when its report to the Lane Committee urged a ban on 'unreliable' self-testing kits, a suggestion echoed by B.P.A.S. in 1974, and recommended 'that private pregnancy testing services should be licensed'.³³ The Women's Abortion and Contraceptive Campaign (W.A.C.C.), formed in 1971 by feminists to oppose efforts to restrict the Act as well as to shift decision-making power from doctors to women,³⁴ also weighed in on pregnancy testing, but from a different standpoint. As part of evidence presented to the Lane Committee—including women's abortion narratives and a manifesto demanding free contraception, no forced sterilisation, and abortion on demand—W.A.C.C., later subsumed under the National Abortion Campaign

(N.A.C.),³⁵ pledged to 'provide community pregnancy testing and pregnancy advisory centres' to enable women to 'find out quickly and easily when they are pregnant' and 'talk to others face to face or over the telephone about pregnancy, abortion and contraception and the many other related areas.' Grassroots pregnancy testing thus emerged as the campaign's first step towards demonstrating the sort of N.H.S. services that women 'really need rather than having to accept the services the medical profession and government thinks we need.'36

Such services rapidly proliferated in the early 1970s. Ealing feminists, as Ann Oakley later recalled, 'acquired the easy skill of pregnancy-testing,' which they 'offered gratuitously for a short while to the women of Acton'. In her account, pregnancy testing was one of several activities alongside cervical self-examination, organising jumble sales, writing "where we are at" papers' and producing copies of Shrew, 'the aptly named women's liberation paper'. 37 Local groups in Bolton, Bradford and Merseyside were soon offering free pregnancy tests. 38 The health group set up by the Essex Road Women's Centre in Islington 'did pregnancy testing', provided 'a woman doctor for advice sessions', kept tabs on local doctors' 'treatment of women' and provided 'information on abortion facilities' (Figure 1).³⁹ By the time the Lane Committee's report was published in April 1974, a disapproving 'feminist view' in Spare Rib could dispute its proposal to consider pregnancy testing services for licencing on the grounds that women's groups in 'many cities' were already:

doing pregnancy testing the way we want it done: with easy access, immediate results, and either free or for the cost of the test alone. The tests are done by women who understand and are sympathetic to the feelings and needs of the women using the services, and WACC activists are cynical about the ability of the NHS, as it is presently structured, to provide a similar service. 40

Getting started

Biographical evidence of women's centres is 'fragmentary' and their history 'underdeveloped', 41 but archival records are plentiful and newsletters, mission statements and oralhistory interviews make it possible to follow the practice of activist pregnancy testing in the early 1970s. The Cambridge Pregnancy Advisory Group (C.P.A.G.), for which particularly informative documentation exists, was started by women returning from the first national W.A.C.C. conference in Liverpool in January 1973 as well as women and men who were working on a survey of contraceptive use by Cambridge students. Membership fluctuated between eight and sixteen people, mostly women, and turnover was high with testers regularly leaving Cambridge or moving their energies elsewhere in the movement. Clients, including students, came from all around the city and surrounding villages, sometimes accompanied by a mother or partner. New recruits, including grateful testees such as Lucy King, joined on a regular basis. Mary Bernard, a native of Montreal who came to England in 1964, decided to get involved because of her 'gruesome' experience of illegal abortion in the Canadian maritime province of New Brunswick.⁴²

C.P.A.G. started off with a loan of £25 from the local Women's Liberation Group, which was still outstanding two years later. They held sessions twice a week, on Wednesday evenings and Saturday mornings, to accommodate increasingly typical patterns of women's work, study and childcare, in the corner of a shabby room in a centrally

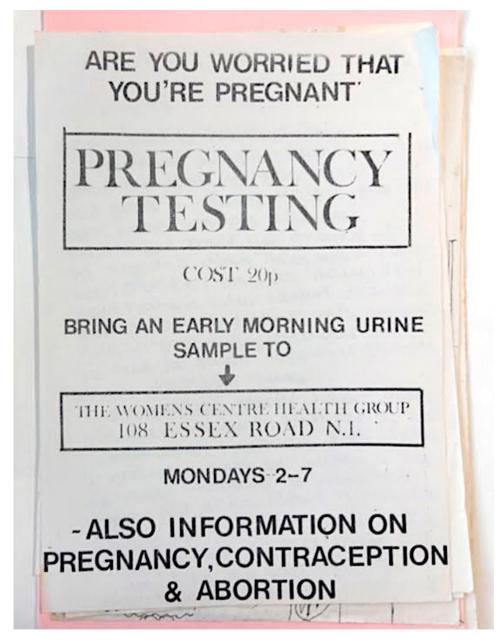


Figure 1. Leaflet produced by the Essex Road Women's Centre, c.1973. Records of Essex Road Women's Centre, Women's Library @ LSE, London (5ERC/5/1).

located residential house rented by the women's group, at 48 Eden Street. Crucially, they also had access to 'running water, a toilet and a fridge to store the chemicals in.' Women did not 'seem to mind being tested by men,' and C.P.A.G. encouraged the presence of (supportive) male partners 'because contraception involves them as well as women.' This policy eventually became 'out of synch with the rest of the women's movement' and led to a stand-off with separatist feminists who blockaded the women's centre,

which by then had moved to Adam and Eve Street. C.P.A.G. promptly relocated again, this time for good, to Centre 33, a nearby Brook clinic.⁴⁴

Compared with other activities, pregnancy testing did not cost much, but it still needed money to buy test kits, pay the rent and print leaflets for advertising. Notices in the testing room publicised the 20p cost of each test and invited donations. Many testees overpaid and C.P.A.G. generated extra funds by selling feminist literature and also received donations from student unions. By May 1975 they had negotiated promises of financial help from the Regional Health Authority on the grounds that they were 'doing their work for them (since pregnancy tests are supposed to be available under the NHS)'. C.P.A.G. advertised weekly in the personal column of the local newspaper and displayed stickers, cards and posters in town (Figure 2). The stickers did 'very well on toilet doors', sometimes staying up for years at a time. The local Citizens Advice bureau, Samaritans and Local Authority Family Planning Office promoted the service and, before long, word of mouth also played a significant role. By 1975 the group was doing around 400 tests every year.

C.P.A.G. held a meeting every Wednesday after testing to go over the previous week's tests, 'pool information and expertise', and 'discuss any problems' that came up. They kept 'simple records' of every test, which consisted of:

First name (if willing); date of LMP ['last menstrual period', used by doctors to estimate the gestational age of the fetus], average cycle length, no. days late; early morning sample or not; results; drugs taken; contraceptive if used; whether wants to be pregnant or not; confirmation of result; how they heard of us; names of testers.⁴⁶

Members kept up to date by reading the *British Medical Journal* and *Lancet* as well as the medical correspondence in daily newspapers. They also maintained a card index on 'attitudes of local G.P.s to abortion, contraception and women in general, whether married, unmarried, or very young', which they then used to help a woman decide between going to a family planning clinic or her own G.P. for contraceptive or abortion advice. Most local G.P.s agreed to accept the group's results without a retest and C.P.A.G. supplied each testee with a result card which she could 'show [...] her doctor if necessary.' They also tried to use the two minutes afforded by the test to 'find out whether the woman wants to have a child,' in order to help decide whether it was 'relevant to raise the subject of

FREE PREGNANCY TESTING AND INFORMATION ON CONTRACEPTION

- -Free, confidential service available to all
- -Immediate results
- -For more information, phone (evenings only)

CAMBRIDGE PREGNANCY ADVISORY GROUP

Figure 2. C.P.A.G. publicity card courtesy of Mary Bernard.

abortion.' It was 'very important,' they asserted, 'not to make any assumptions about women's attitudes and certainly not to pressure them towards abortion but simply to help them see what is involved in the decision either way.' Finally, they also tried to explain their belief 'that women must have control over their bodies so that they can control their lives' as well as how the test worked in order to 'dispel some of the medical "mystique" surrounding pregnancy testing.'47

In Bristol, where comparably detailed records exist, a pregnancy testing service was likewise set up by women affiliated to W.A.C.C. They operated out of the local women's centre, which opened in March 1973 in the one-room basement kitchen of Ellen Malos's house in suburban Redland. The centre advertised its address and telephone number through the local press and radio as a 'woman's information service' and similarly offered pregnancy testing twice a week, on Thursday evenings and Saturday mornings. The rota was 'wommaned' by trained volunteers, two or three at a time, who also offered advice on contraception and abortion, collected information about 'conventional women's health services in the Bristol area,' and liaised with the local Brook clinic.⁴⁸ Despite the availability of pregnancy testing through local authority clinics, the Bristol group hoped to 'attract women who might be put off by the "official" institutions.'49 In this they seem to have succeeded in meeting a significant demand. By January 1974, they were performing three to five tests every week and, by April, as many as a dozen.⁵⁰ By 1976, the group was doing around 500 tests every year, on a par with the local hospital's 800 tests on samples sent by family planning clinics.⁵¹

The Bristol group tried to provide a 'friendly informal atmosphere' for women of 'all ages and social backgrounds', some of whom travelled 'great distances, and certainly from all over Bristol and the surrounding rural areas.' In a 'Dear Sister' open letter, from November 1974, they explained that their service filled 'a real gap in the N.H.S.' and that there was 'virtually no other way a woman can find out if she is pregnant, except by persuading her doctor to arrange a test, or to pay for one to be done'. The problem, as they saw it, was that Bristol doctors didn't perform the tests themselves, but instead sent samples to the local Public Health Laboratory or Southmead Hospital. Often, a woman was required to take the sample there herself and, in any case, she would not be informed of the result for several days and, then, was 'only told indirectly via her doctor.' Moreover, the Bristol testers had 'heard many instances of samples getting mislaid and the results getting lost.'52

Suspicious samples emerged as a new concern after a series of articles published in the News of the World in February and March 1974 alleged that laboratories were providing false positive test results to generate business for abortion clinics. These and other allegations were later reproduced in the book, Babies for Burning.⁵³ Members of the Bristol group returned from W.A.C.C.'s second annual conference in Nottingham, in March 1975, with 'some pretty hairy stories from people in PAS who had been given doctored samples by anti-abortionists trying to cast doubts on their reliability and honesty.⁵⁴ Most women did not produce a sample on site, but brought one along, so to cover themselves from allegations of fraud the Bristol group adopted a policy of 'stating that the test is 98% accurate, and that if it is a fresh sample in a clean bottle, and not taken too early after missing a period, then we feel reasonably confident about the result.'55

Domesticating a medical technology

As with cervical self-examination and menstrual extraction, feminist pregnancy testing depended on the appropriation and circulation of inexpensive and portable tools and protocols.⁵⁶ The Bristol group took pains to explain the immunological science behind pregnancy testing (Figure 3), but the tester—whether a lay activist, lab technician, pharmacist, or G.P.-did not need to understand how the test worked at the molecular level to become adept at using the kit. C.P.A.G.'s Mary Bernard, for instance, had 'no scientific knowledge whatsoever', but rapidly learned the basics of reproductive physiology and 'could explain to people what the test was about.'57 Just as lab technicians had learned to skilfully manipulate test animals, so too did activists learn the basic laboratory skill of mixing reagents with urine and interpreting the results.⁵⁸ On the other hand, many testers were able to draw on prior experience. Lucy King, for instance, had studied biology in Scotland, and a female doctor in the Bristol group trained others to use the kit.⁵⁹ The medical laboratory has often been compared with the kitchen and it is also possible that gendered household skills facilitated the domestication of pregnancy testing, which could be a bit like cooking.⁶⁰

C.P.A.G. obtained Organon's Pregnosticon Planotest from the Dutch pharmaceutical company's British laboratories in Morden, Surrey. Organon did not supply 'members of

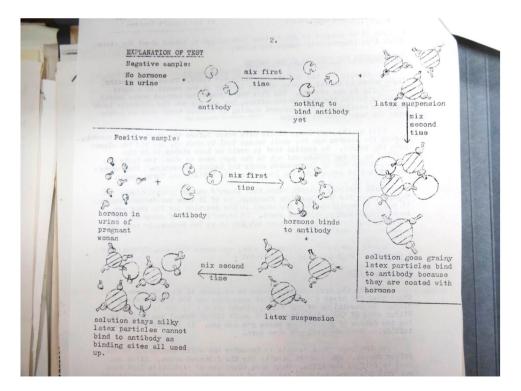


Figure 3. Detail of report on 'Pregnancy Testers' Meeting', Women's Centre, Bristol, 17 February 1976. Report and diagrams by Helen Seed, typed by Betty Underwood. Jackie West materials on abortion, contraception, and other topics, 1912–1983, University of Bristol Library Special Collections, Bristol (DM2614/2).

the public', so the group approached Sheila Abdullah, a 'sympathetic' Liverpool doctor and abortion campaigner they had met at the W.A.C.C. conference, and she agreed to obtain the kit for them. 61 Planotest simply required the user first to mix one drop of urine with two drops of commercially prepared liquid reagents on a glass slide, and then read the result after two minutes of 'gentle mixing'. Cambridge testers worked in pairs to confirm one another's readings and generally became confident in distinguishing between positive and negative results after seeing about six tests each. Good lighting was important to read the test correctly and testees were instructed to bring their urine samples 'in a clean bottle, well rinsed with water, not detergent, as this may interfere with the reaction.' Eventually, Abdullah was able to vouch for the group's reliability and Organon agreed to supply Planotest directly. C.P.A.G. offered to order and sell kits to newly established groups in other parts of the country until they were able to 'set up a similar arrangement locally.'62 By May 1975, they had performed around 600 tests, and knew of only one incorrect result.

The instructions for Pregnosticon Planotest, preserved along with an example of the test kit at the Museum of Contraception and Abortion in Vienna (Figure 4), read as follows:

Place 1 drop of antiserum within the yellow circle on the slide and add 1 drop of urine with the spare dropper provided. Mix carefully with the white spatula. Shake the latex suspension and add 1 drop to the mixture on the slide. Stir this mixture with the spatula and spread it over the entire surface within the yellow circle entirely. Shake the slide gently for two minutes so that the liquid covers the yellow circle evenly. The test result can then be checked. No agglutination: positive for pregnancy. Agglutination: negative for pregnancy.

Activists familiarised themselves with the jargon of immunochemistry and learned to translate it into plain English. Agglutination, for instance, was likened to 'ground glass'



Figure 4. Pregnosticon Planotest, 1967, 19.4 × 7.8 × 5.8 cm, Museum of Contraception and Abortion, Vienna, Inventory number: 2747. Note the red and green topped bottles.

and its absence described as 'milky looking' in the instructions prepared by a member of the Kingsgate Place Women's Centre in Northwest London:

Stuff is in fridge. Take an early morning sample of urine. Put 1 drop on clean glass slide in box with dropper. On top of that put 1 drop of solution from green topped bottle to start reaction. Add to that 1 drop from red bottle. Be sure to keep urine and chemicals in circle on glass slide. Move liquid around slowly in circular motion for several minutes. If it remains milky looking, thick and white test is positive (she's pregnant). If it forms small granules (like ground glass) it's a negative test. Helps if you hold it up to light or have several people look. 63

A fridge, which could be found in the majority British households by the early 1970s, was important.⁶⁴ A note from the same centre, dated Thursday 21 November 1974, reads, 'Fridge broken so pregnancy testing not possible until further notice'. (Planotest stuff must be kept at 4°.)'⁶⁵ The Bristol group also had refrigeration trouble. In November 1975, they were 'still looking for a fridge so that we can keep the pregnancy testing kit at the women's centre instead of passing it from hand to hand (or rather, fridge to fridge) as at present.'⁶⁶

Privacy, or lack thereof, was another issue. Who knew the result? Just the doctor? The receptionist too? A 1977 B.P.A.S. report observed that 'requesting a test within the hearing of a waiting room full of people is not conducive with the ideal of what should be a confidential health service.' Women's groups did what they could, but the domestic space of pregnancy testing was in short supply. Malos's basement doubled as a shelter for homeless women, including, on one occasion, 'a young woman [...] who was very heavily pregnant, kind of lying on the bed while women were coming in for pregnancy tests.' This prompted the Bristol group to develop 'a rule that women couldn't stay [...] beyond Friday evening, because pregnancy testing happened on Saturday morning.' Potentially upsetting intrusions, by women who visited the centre to 'buy books, chat or meet friends,' had also to be guarded against.

The 'many faces' of pregnancy testing

Why did women in the liberation movement and beyond perceive pregnancy testing as important? For some it was a practical form of involvement in a movement that also tackled large and seemingly intractable problems. As Ruth Wallsgrove later recalled in *Spare Rib*:

Some of us choose the broader, apparently grander visions of a nuclear-free world or total revolution; some choose to organise a pregnancy-testing evening around the corner, knowing for sure that we'll help a few women, giving them a chance to decide what they will do with their lives. ⁷¹

For others it was a way to bide time while doing something useful. For instance, when the recently divorced Sally Harrison first came to Bristol from America, she decided to take up pregnancy testing while looking around for other activities in which to involve herself because it was a 'really constructive thing to do' and 'easily learned'. For Betty Underwood of the Bristol W.A.C.C., pregnancy testing was 'an important link in the chain of facilities which are needed for women to have the right to choose when, and if, they are to have children.' And for Sue Jones of Bolton, pregnancy testing was 'one of the

important things that we did, because it provided a free service to women, by women who were in the same boats themselves.'74

Non-medical pregnancy testing was needed, a C.P.A.G. manifesto argued in 1976, because 'the NHS works through doctors, GPs whose women patients are often quite justly reluctant to visit them unless they are either ill or desperate.'75 While keen to 'demonstrate some of the inadequacies of the NHS', the group also tried 'to put pressure on the NHS to give a better and more human service' and did not 'want merely to do their work for them.'⁷⁶ A mission statement by members of the Bristol group explained they had 'started the free pregnancy testing because as women we know how difficult it can be if our doctors are unsympathetic.'77 Other lines of evidence corroborate the perception that some, though not all doctors were indeed out of touch with women's expectations. To give an example, in 1979 a Norwich G.P. complained in a letter to his M.P.:

The other day I was asked by a patient to supply a bottle and form so that she could have a pregnancy test organised at the pathology laboratory. It appeared that her reason for doing so was idle curiosity, there being no real medical reason for it. On my explaining that social pregnancy testing was not necessarily a part of the National Health Service she became most annoyed and informed me that all her other doctors had done it without question before.⁷⁸

At least one woman chose to have her urine tested at the Brighton women's centre because her G.P. 'laughed at her.'⁷⁹

Ad hoc counselling, meanwhile, emerged as a significant feature of grassroots pregnancy testing around the country, but the same social advantages that facilitated educated activists' acquisition of the 'easy' laboratory skill could also impede communication across class boundaries. Cambridge testers, for instance, valued counselling as 'one of the most important, but also the most difficult of the things' they were trying to do. They felt that it was 'much simpler to learn to do the pregnancy test than [...] to learn how to get through to some of the very varied women who come to us.' In addition to explaining the test, they asked each woman whether or not she had been using contraception and, if so, whether she wanted to change method and 'whether she knows what methods are available and where to get fixed up with them.' Some testees, evidently, had 'never before talked to anyone about contraception,' and Cambridge testers sometimes found themselves 'discussing very basic anatomy and physiology.'80

Records kept by the Brighton service reveal that while some testees did without any form of contraception or were relying on the rhythm method, others had used the sheath, cervical cap, I.U.D., and oral contraceptive pill (Figure 5). The surprisingly high number of women taking the pill who came in for pregnancy testing demonstrated, according to the B.P.A.S. report, 'the confusion surrounding the pill and also [...] the fact that many women are not as happy on the pill as some doctors would have us believe.'81

While some members of the Bristol group 'felt strongly in favour of asking women what contraceptives, if any, they were using', others 'felt that sometimes this would be difficult and a bit intrusive.' They also worried that raising the subject of contraception assumed that a woman was 'worried about being pregnant', and knew from experience that 'at

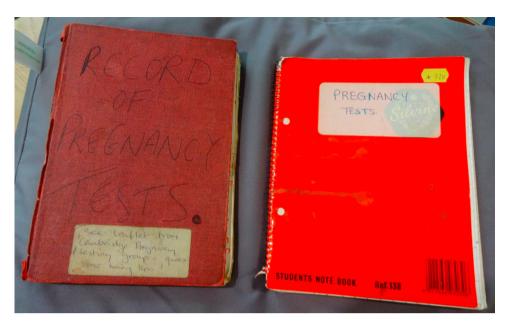


Figure 5. Red ledger and student note book used to log pregnancy tests in the 1970s and 1990s, respectively. Records of the Brighton Women's Centre, Women's Library @ LSE, London (5BWC/survey/G).

least two out of every five' women were 'really pleased to find that they are.' Eventually, the group decided to 'play it by ear' and to 'try to give women the opportunity to talk about contraception in case they want to, but feel embarrassed about opening the subject.'82 Revisiting the issue later on, they reiterated the point that just because they were 'providing a service,' it did not give them the 'right to ask extra questions' that testees might perceive as 'unnecessary and prying.' As an indirect alternative, testers could 'always invite women to help themselves to any of our leaflets on their way out.' They also stressed that it was 'important not to baldly ask women if they want to be pregnant or want an abortion.' Instead, testers were supposed to say 'if the test is positive or negative, not "you are pregnant" or "you are not pregnant". Whatever the result the woman ought probably to see a doctor.'83

Sue Jones later recalled that Bolton testers 'didn't give advice' or 'tell people what to do,' but rather:

used to give people options of where they could go, you know, or who they could see, and just talk really for who came to see us, about whether the pregnancy test was positive or negative, if they wanted to stay and talk about it, we'd do that.⁸⁴

As with Lucy King in Cambridge, Jones later went on to a professional career in counselling, for which her early experience in pregnancy testing held her in good stead. But for others, impromptu counselling without proper training could take its toll.

One of the most detailed and moving accounts is that of feminist writer Michèle Roberts, who volunteered with a 'small team of testers [...] in a shabby basement, unobtrusively entered down a steep flight of steps,' at the London P.A.S. Roberts had no training in counselling and her instructions were to refer her clients to their G.P.s or else to the

trained counsellors upstairs. As she later recalled in Paper Houses, her memoirs of the 1970s:

Some women, receiving their test results, expressed delight, because they wanted to get pregnant, and rushed away. Some were grateful for the contraceptive information we gave them. Others were devastated to be told they were pregnant, burst into tears and then poured out their unhappy stories. Of course I listened. I could not possibly show women to the door while they sat in front of me weeping. They recounted tales of male doctors' and boyfriends' callousness, indifference, brutality. I did not know so much suffering existed. I did not know how to listen in a detached way: I took the women's grief and anger into myself and carried it home with me [...] One morning I just collapsed into tears. I wept into the urine sample I was testing and ruined it and the woman who'd given the sample had to go and supply another one and was understandably annoyed. I was told to take the day off. I went home but didn't know how to cope. I just went on crying.86

Though Roberts's account understandably concentrates on the grief and despair of unhappily pregnant women, it also helpfully draws attention to the delight experienced by some happily pregnant testees. While direct evidence is scarce, records have survived that permit a partial reconstruction of the testee's perspective, albeit a mediated one. For instance, the red ledgers kept by the Brighton group record the highly variable reactions of testees: 'Ah well—try harder!'; 'Thank God for that!'; 'Relieved'; 'Bit disappointed'; 'Going to doctor—still unsure!'; 'Sad but wants to keep it'; 'Pleased'; 'Very pleased'; 'Very very pleased'; 'Oh gosh'; 'Stunned'; 'Shocked'; 'Wonderful'; 'Don't mind'; 'Going to have an abortion'; 'Fantastic'; 'Great!'⁸⁷

Aggregated and analysed data confirms that pregnancy testing, if nothing else, was a variable experience. Of the sixty-two positive results obtained by C.P.A.G. in a single year, twenty women 'wanted to be pregnant,' thirty 'did not' and the rest either 'weren't sure' or didn't say.⁸⁸ An analysis of 304 tests performed by the Bristol service found that, while 53% of testees were pleased with a negative result and 43% disappointed with a positive, 37% were pleased with a positive and 13% disappointed with a negative. No older women wanted to be pregnant and sufficiently many were worried about menopause for the group to produce an informational leaflet on the 'Changes in Life'. As expected, young women and girls frequently 'wanted reassurance after "taking a chance," or else doubted the effectiveness of the contraceptive they were using. But a substantial group of women in their mid to late twenties were 'keen to start or add to their families' and 'really pleased to get a positive result.'89 As the title of the B.P.A.S. report put it, pregnancy testing had 'many faces'.

B.P.A.S. began in Birmingham in 1968 as an abortion provider, but a decade later its Sheffield branch was also providing referrals for infertility treatment, albeit to a 'small minority of women with, apparently, long histories of trying [to conceive] and who were clearly upset by a negative result.' Just over one in four (27.4%) of all women known to have had their first pregnancy test with the Sheffield B.P.A.S. were 'anxious to be pregnant.'90 In Bristol, Ellen Malos had expected the pregnancy testing service to be used by women 'who didn't want to be pregnant' and was surprised that many testees 'were women who were quite happy to be pregnant but just wanted to know' or were 'older women who were having menopause babies and didn't quite know what they thought about it'. 91 And in Bolton, Sue Jones remembered that, in the days 'before we heard about test tube babies or infertility or anything,' the service attracted 'a



number of married women coming who couldn't get pregnant' and who used it 'for as they would call it now "fertility problems." She further reflected that this:

was an indication of something that was really going to grow into a big ... well, it is a big industry now isn't it? All happening all the way back in the early 1970s. So there was a need for it, well, there had obviously been a need for it before, but there was a real need beginning for it then.92

At the level of national campaigning, the women's liberation movement did not organise anything on the scale of W.A.C.C. for menopause or infertility. Bristol's Angela Roddaway, who joined the movement when she was in her fifties, struggled for years to start a discussion group on menopause,⁹³ and Naomi Pfeffer's attempts to set up workshops on infertility at women's health conferences in the early 1980s 'met with no response'. 94 At the level of grassroots activism, however, feminists such as Sue Jones, Ellen Malos and Michèle Roberts were confronted by a spectrum of women seeking tests for a variety of reasons. B.P.A.S., P.A.S. and W.A.C.C. initially set up pregnancy testing services to facilitate access to contraception and abortion. But testees, including women struggling with fertility problems, menopausal women and young, happily pregnant women challenged the assumptions and expectations of volunteer testers, some of whom later came to see themselves as having been in the vanguard of access to information about infertility and menopause.

Winding down

Many women, and a few men, continued to organise local pregnancy testing services in the late 1970s. A mixed group including medical students started the Oxford Pregnancy & Abortion Support Group in 1976 to provide an alternative to LIFE, which was 'widely publicizing its covertly anti-abortion pregnancy testing/counselling services.' They offered free pregnancy testing, by appointment only, on Tuesday evenings and Saturday mornings (donations 'gratefully received' to offset the 30p cost of each test), and also ran a counselling service. In February 1976 the group was 'pushing for both these services to be provided by the NHS.'95 The Archway women's health group in North London met for pregnancy testing and, in 1977, planned practical workshops on health, electricity, massage, photography, plumbing and bicycles. In Camden, free pregnancy testing was offered alongside feminist therapy, health groups, study groups, yoga and karate. 96 A Norwich collective, based in 1978 in a room in the Community Arts Centre, concentrated on 'free pregnancy testing and advice/support to women.'97 And the women's group in Newham, East London, launched a service in 1978, to 'enormous' demand. 98

Women attending the seventh national Women's Liberation Conference in Newcastle in April 1977 discussed pregnancy testing in relation to 'the problem of how much to create alternative structures and how much to put pressure on the NHS to provide what women need.⁹⁹ In July 1977 the National Pregnancy Testers' Conference at the Friends Meeting House in Bristol debated the extent to which women's groups aimed 'to provide an exemplary service and pressurise the NHS' or considered 'a woman-run pregnancy testing service as something valuable which can't be provided by paid professional workers—both for ourselves, as lay women developing a skill, and for women who want a test and can see one being done without mystique.'100 At least two further national pregnancy testers' conferences were held, in May 1978, at Newnham College, Cambridge, and in June 1981, at the Queen's Walk Community Centre in Nottingham. ¹⁰¹

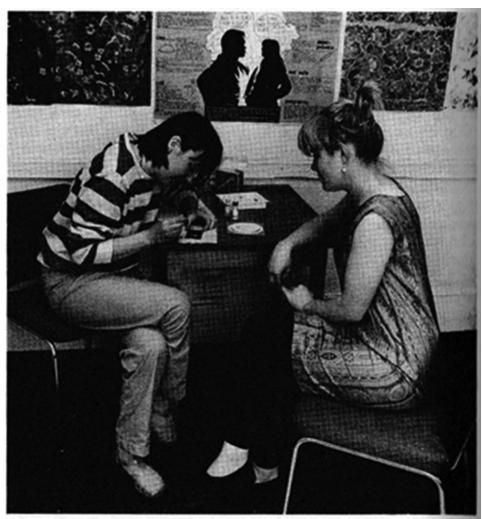
Feminist guides such as The Woman's Directory and The Women's Health Handbook, both published in 1976 by Virago, advertised the addresses of local groups. 102 A revised edition of the latter from 1978 discouraged the use of 'difficult to read' home tests, which 'may have been stored incorrectly and deteriorated when not refrigerated, or the reagents may be out of date.'103 The first British edition of Our Bodies, Ourselves, published by Penguin in 1978, recommended 'WL groups' over commercial agencies, since the former were 'obviously committed to providing accurate results. Not all commercial agencies can be so relied on.'104 And Virago's Talking to Your Doctor, also published in 1978, 'particularly' recommended clinics 'run by women's groups,' because they did pregnancy testing:

for nothing and tell you the results immediately, whereas a doctor will send away your urine sample and this may mean waiting up to 10 days for the result—too long if you think you may want an abortion should the result be positive. 105

For members of the Bristol group, pregnancy testing was an 'important' activity, and so they were 'unhappy' when the number of volunteers began to drop off. The service 'only managed to keep going' because of 'a few dedicated people' and, while the group was able to recruit new testers and to 'resurrect' a few old ones, filling the rota became a perennial problem. 106 In November 1976, for example, the rota was 'still very empty' and the group reminded readers of the Bristol Women's Liberation Newsletter that they 'always need more testers; the test is very simple and it's easy to learn.'107 Finally, in December 1979, about six years after it had been set up, the labour shortage was precipitating a 'crisis'. The centre had 'not yet had to cancel any sessions,' but it had come close 'on many occasions.' If the service became unreliable, an open letter warned, the group would be 'just as guilty as the NHS for messing women around.' Pregnancy testing, the letter reasserted, 'is an important function of the Women's Centre.' It was 'easy to learn, quick, reliable, and done in a supportive environment that avoids the waiting and bureaucratic nonsense required by the NHS' and it had 'helped thousands of women who would otherwise not have made any contact with the Women's Centre.' For testers, it took only a couple of hours every month or so and could be 'a very rewarding way to spend a Saturday morning or Thursday evening.'108

Despite shrinking donations and rota problems, feminist pregnancy testing persisted into the 1980s, well beyond the final, acrimonious national conference of the women's liberation movement in Birmingham in 1978 (Figure 6). 109 Activist Elizabeth Bird later remembered using the Bristol service 'at the Women's Centre when she found out she was pregnant with her son (on International Women's Day!) in 1981.'110 Pregnancy testing accounted for nearly 40% (8 out of 21) of all activities scheduled by the centre in October 1981, alongside N.A.C. meetings, lesbian discos and computer work at the Feminist Archive (Figure 7). The service was still going in 1983, when the Bristol Newsletter ends.111

The pregnancy testing service at a women's centre in Paignton, Devon, was still going in 1982, though struggling to cover costs. 112 Free pregnancy testing carried on in the London Borough of Brent even after the local women's centre closed in 1992. 113 The Brighton group, which originally ran from 1975 to 1981, was revived between 1991 and 1996. 114



Two women doing a pregnancy test at a family centre. Tests are not always as quickly and easily available under the NHS as they should be.

Figure 6. Image of pregnancy testing as women helping women in Nick Davidson & Jill Rakusen (1982) *Out of our Hands* (London: Pan), p. 60. Photo credit: Gina Glover (Photo Co-op). The test kit appears to be Pregnosticon. Reproduced by kind permission of the Syndics of Cambridge University Library.

And some ninety people had volunteered for C.P.A.G. by the time the last urine sample was tested in September 1993.¹¹⁵ By then, women's health centres had given way to a network of feminist-run 'well women's clinics' that attempted, with mixed results, to provide an alternative model within a restructured N.H.S.¹¹⁶ Doctors too had changed; a younger generation of G.P.s and gynaecologists were more understanding of women's needs than their paternalistic predecessors had been.¹¹⁷ Meanwhile, the commercial rise of Clearblue and other more streamlined and aggressively marketed products decisively put an end to drop-in services and brought self-testing from the margins into the mainstream, creating a new normal for a younger generation of women.¹¹⁸ Somewhere along



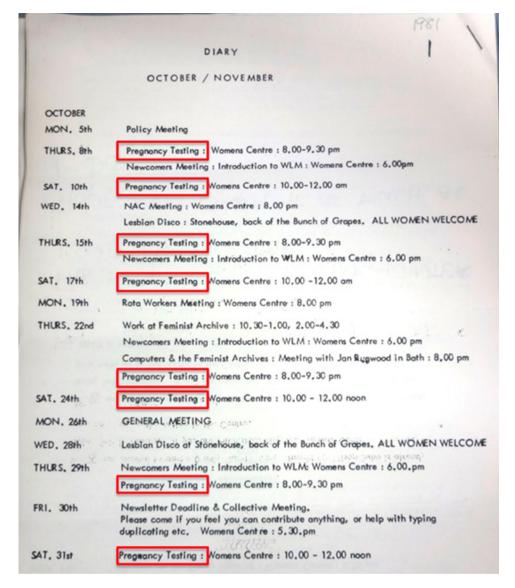


Figure 7. Bristol Women's Liberation Newsletter, October 1981, Ellen Malos Archive, Feminist Archive South, University of Bristol Library Special Collections, Bristol (DM2123/8/115).

the way, the plastic speculum and menstrual extraction kit, but not the pregnancy test, came to be celebrated as iconic relics of 'second-wave' feminism. 119 Today, the utter commonplaceness and slick commercialism of pregnancy testing conceal its radical past.

A feminist technology?

This article has recovered one of the central activities of the women's liberation movement: free or at-cost, anonymous on-the-spot pregnancy testing usually combined with counselling, information about contraception and referrals for antenatal care or

abortion. Although initially linked to W.A.C.C., feminist pregnancy testing was not clearly delimited by the movement's official demands. Rather, its remit extended to include infertility and menopause as well. As with the networks of birth-control and family planning clinics that went before, the pregnancy testing services set up in the 1970s also served women who were trying to conceive. 120 Nor were such services obviously part of a broader women's health movement, as it was in America. Rather, they were offered alongside a jumble of activities—from yoga and karate to bicycle repair and women's studies. British feminists framed pregnancy testing as a more efficient and sympathetic alternative to the inadequate N.H.S. as they pushed for reform. They appropriated a medical technology, bringing it into the domestic sphere and endowing it with the politics of the movement.

Many women's groups 'made serious attempts to reach local working class women based on their own particular needs.'121 Pregnancy testing was one of these needs and, for the predominantly white middle-class activists, it provided a means of reaching a diversity of women, including those who had never before talked to anyone about contraception, anatomy or reproduction, and who would otherwise not have made contact with a women's centre. 122 In this regard, it is helpful to think about feminist pregnancy testing in relation to comparatively well-studied instances of health-related activism. The Black Panther Party, for instance, used Sickledex, an inexpensive, portable diagnostic test for sickle cell anaemia to not only raise awareness about the genetic disease, but also recruit members and garner support for related causes. ¹²³ A.I.D.S. activists, often educated white middle-class men, acquired the language of immunology and learned to translate it into the vernacular, much as feminists had done before. 124 And the birth-control clinics set up by Marie Stopes and others, including Lella Secor Florence in Cambridge, confronted similar challenges in reaching the desired clientele, including rural and working-class women. 125

The well-documented demand for feminist pregnancy testing combined with the paucity of historical evidence for self-testing may give the impression that 'no self-administered kits were available' in the 1970s. Nevertheless, it is important to remember that Predictor and other home tests were in fact stocked by many British pharmacies, though not Boots, from 1971. This does not mean, however, that self-testing was the norm. On the contrary, waiting on one or the other side of the bathroom door for the result of a self-administered test only started to become a commonplace around 1990. Until then, self-testing coexisted with a range of medical and non-medical services that offered pregnancy testing to the whole spectrum of women. Predictor, which still had to be purchased in public and somehow disposed of, did not guarantee privacy and many women opted for anonymous drop-in services, including those provided free of charge by feminists.¹²⁷ What feminist pregnancy testing lacked in convenience, it more than made up for with supportive counselling, reliable information and considered referrals. Perhaps contrary to present-day expectations, the most subversive aspect of pregnancy testing in the 1970s was not privacy, but counselling—a sympathetic ear and shoulder to cry on. As with the interwar birth-control clinics, compassionate 'woman-to-woman' care distinguished feminist pregnancy testing from competing alternatives.¹²⁸ In the hands of lay activists the pregnancy test kit became, at least for a time, a feminist technology. 129



Notes

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- 6. Doyal, 'Women, Health and Sexual Division of Labour', pp. 23, 31.
- 7. Suzanne Staggenborg (1991) *The Pro-choice Movement: organization and activism in the abortion conflict* (New York: Oxford University Press), pp. 49–50. See also Sarah A. Leavitt (2006) 'A Private Little Revolution': the home pregnancy test in American culture, *Bulletin of the History of Medicine*, 80, pp. 317–345, p. 328.
- 8. Deborah Cohen (1993) Private Lives in Public Spaces: Marie Stopes, the Mothers' Clinics and the practice of contraception, *History Workshop Journal*, 35, pp. 95–116.
- 9. Audrey Leathard (1980) The Fight for Family Planning: development of family planning service in Britain, 1921–74 (London: Macmillan); Clare Debenham (2014) Birth Control and the Rights of Women: post-suffrage feminism in the early twentieth century (London: I.B. Tauris).
- 10. B.P.A.S. became the British Pregnancy Advisory Service in the mid 1980s and merged with P.A.S. in the late 1990s: David Paintin (2015) Abortion Law Reform in Britain 1964–2003: a personal account by David Paintin (Stratford-upon-Avon: B.P.A.S.), pp. 66–74. On Brook: Wellcome Witness Seminar: 50 years of Brook on Friday 6th February 2015, http://film. wellcome.ac.uk:15151/0056-0000-8081-0000-0-0000-0000-0.pdf, transcript accessed 12 September 2016.
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- 12. More recently, women-led communities have similarly appropriated the 'abortion pill', mife-pristone (RU486) to demystify abortion and decentre the doctor's role: Sally Sheldon (2014) The Medical Framework and Early Medical Abortion in the UK: how can a state control swallowing? In Rebecca J. Cook, Joanna N. Erdman & Bernard M. Dickens (Eds) Abortion Law in Transnational Perspective: cases and controversies (Philadelphia: University of Pennsylvania Press), pp. 189–209.
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- 21. Olszynko-Gryn, Pregnancy Testing in Britain, pp. 249–250.
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- 32. Ibid. p. 499.



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