This article places the UK edition of the American women’s health manual Our Bodies, Ourselves in a longer tradition of health consumer activism in Britain, coming after the women’s liberation movement of the late 1960s. It shows how the UK Our Bodies, Ourselves, one of the first feminist women’s health books published in Britain, brought together concerns of consumer and feminist activists that undercut the entrenched authority of the British healthcare system, the National Health Service (NHS). While the UK edition authors modelled the book with the aims of the American original in mind, the text reflected the unique form of health activism in the UK. The connection between feminist publishing and health activism is a notable exception to recent recorded histories, but this research shows the tangible influence of a feminist text from a mainstream publisher on women’s health activism in the UK.

At the end of the 1960s in Boston, Massachusetts, a group of women met to discuss health issues like sexuality and abortion. They realised that recounting their own experiences with healthcare empowered them to learn more about their bodies, and wanted to spread this message to other women. After researching and gathering experiences from others, they produced the first version of the now feminist classic Our Bodies, Ourselves in 1970. The authors intended to deconstruct the traditional patriarchal medicine that had dominated healthcare for most of the twentieth century by including women’s personal stories, and the book quickly became an icon of the burgeoning women’s health movement.

The text spread to Europe, Asia, and South America before the end of the decade. According to scholar Kathy Davis, the book appealed to a wide variety of women.¹ The American edition was considered ‘gold dust’ by one British woman teaching girls about feminism, ‘so easy to look at and flick

through’. In the words of Davis: ‘In contrast to globally exported products such as Nestlé’s milk or Coca-Cola, Our Bodies, Ourselves was never simply “consumed” by women in different parts of the world.’ The book was not merely transcribed for different nations but, rather, absorbed as a part of the local culture. However, Davis does not address the book’s spread to the United Kingdom. Understanding the context of the UK edition, published in 1978, reveals dynamic interactions between the British women’s liberation movement and health ideas from the United States.

This paper shows how the UK edition of Our Bodies, Ourselves, one of the first feminist women’s health books published in Britain, brought together the concerns of consumer and feminist activists that undercut the entrenched authority of the National Health Service (NHS). While the UK edition authors modelled the book with the aims of the American original in mind, the text reflected the unique form of health activism in the UK. Recent interest in the UK women’s liberation movement has produced testimonies like those in the Sisterhood and After project, which includes video recordings of women involved in 1970s feminist campaigns. The connection between feminist publishing and health activism is a notable exception to these recorded histories, but this essay will show the tangible influence of a feminist text from a mainstream publisher on women’s health activism in the UK.

Health in Women’s Liberation

The women’s liberation movement, which began in the 1960s in the United States, was initiated by a number of books articulating many women’s concerns about a sexist society. By the end of the 1960s, health emerged as a central tenet of the movement, and women like those in the Boston’s Women’s Health Book Collective (BWHBC) were some of the first identifiable activists of the American women’s health movement, discussing issues like abortion and sexuality. While the founders of the group were all college educated, most came from working-class backgrounds and did not not have an educational background in health. Many came to women’s health activism

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from social protest movements of the 1960s: civil rights, antiwar, legal abortion. They came to view women’s health as a tangible way to spread their newfound feminism and empower women by focusing on the body. Rather than rely on information presented by almost exclusively male doctors, the authors began encouraging women to get to know their bodies—the key to understanding themselves. Their book, *Our Bodies, Ourselves (OBOS)*, signified a revolutionary way of presenting health, by interspersing women’s personal accounts of healthcare, a feature maintained in international editions, including the UK version. The book dismissed traditional ideas of a woman as a ‘normative, typical case’, and deviation from the male standard in favor of a spectrum of possibilities.

The first edition of *OBOS* was a 1970 course booklet titled ‘Women and Their Bodies’, which was soon renamed *Our Bodies, Ourselves* and republished by the New England Free Press in 1971. Although not a large publisher, the book sold 250,000 copies by 1972. By the next year, Simon & Schuster had published the first commercial version of the book. Already in 1973, Christopher Lehman-Haupt, reviewer for *The New York Times*, acknowledged the book’s widespread national appeal and, while not without criticism, encouraged the American public, male and female, to read the book.

Historian Wendy Kline argues that while women may not have had access to the consciousness-raising groups of women’s liberation, many felt empowered by *OBOS*, participating in an active exchange of health information with the authors and women they knew. Readers made health a focal point of activism by sharing their own health stories and informing the BWHBC of outdated or mistaken information. The authors welcomed this exchange, and asserted that their papers were ‘not final … not static. They are meant to be used by our sisters to increase consciousness about ourselves as women … to begin to struggle collectively for adequate health care.’ Some women originally engaged by *OBOS* became doctors within the traditional medical

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10 Kline, *Bodies of Knowledge*, 25.
structure, bringing feminist ideas to their medical practice. The OBOS authors encouraged a collective sisterhood connected through health knowledge. They were not hindered by international boundaries and, instead, allowed a dynamic exchange of information. In their 1973 version, one of the main sources for the UK edition, the BWHBC received inspiration from English abortion and childcare practices.

Unlike the US, the UK had a nationalised healthcare system, which allowed for more doctor oversight. In 1948 Britain adopted the National Health Service (NHS), intended to provide free healthcare for all citizens. The hierarchical structure of the NHS included oversight committees that increasingly attempted to respond to patient demands. In contrast, according to the BWHBC, American healthcare was built on a ‘capitalist theory of disease’, based on a ‘fee-for-service system’. As a result, American health care for women meant a ‘private relationship between an individual and her physician’ where patients paid for treatment. The British public could tangibly impact monitoring committees, unlike the individual doctor-patient interactions that OBOS authors emphasised with America’s healthcare system. American health reformers became increasingly inspired by feminist ideologies and demanded health reform by the end of the 1960s. However, in Britain, before feminists demanded social reform in the 1970s, activists were already campaigning for improved healthcare for women. Consumer activists argued for doctors to effectively respond to patient concerns, and homebirth advocates argued for emphasising the role of women in childbirth. These early demands for reform inspired British legislation around women’s rights. For certain healthcare concerns, like childbirth and abortion, British women had more freedom and a larger role in their healthcare, at times inspiring the BWHBC to look to British models.

While Britain’s more liberal healthcare system legalised abortion with the Abortion Act 1967, American women continued to work to secure access, which was legally achieved in 1973 with the landmark case Roe vs. Wade. The first edition of OBOS was written before abortion was legalised in the United States, and the BWHBC understood the impact of exposing readers to a feasible model. They noted that in the UK ‘pressure … came from not only the general public but also national medical associations and distinguished doctors, whereas in the United States the medical profession has been a major

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12 Ibid., 283.
13 Ibid., 238.
obstacle to change’.14 Although the UK edition had not yet been released, the BWHBC still looked abroad for guidance, initiating a relationship between health activists in the United States and the UK. The American authors realised the reluctance of their own country’s medical profession, and instead looked to British medical services for inspiration as they had already been influenced by public outcry and medical oversight.

This practice of looking abroad continued in the childbearing chapter, the longest in the book. The authors presented a grim picture of health services in America: ‘The present medical system … pretend[s] to help us, it tends to interfere with natural processes … In this country we are denied control over our own very personal childbearing experience.’15 Rather than discussing the need for reform, the authors instead advocated for a new model, asserting: ‘This [current medical] care interferes with the rhythm of our lives. It turns us into objects … We want adequate flexible medical institutions that correspond to our needs.’16 The BWHBC offered readers a real solution by looking to childbirth options in England, where over half of women chose homebirths. The BWHBC reported: ‘we have no such system, and thus home delivery can indeed be very risky. We feel that one of our demands must be to make home delivery feasible here in America.’17 American women’s health activists most often came to argue for health reform after advocating feminist reforms. In contrast, before women’s health became a broader issue in the UK, home birth advocates initiated health reform within the NHS system, a call taken up by feminists by the end of the 1970s.

When adapting OBOS for British readers in 1979, the British authors, while maintaining the original message of the text, recognised that they were adapting the book for an entirely different healthcare structure. Feminists of both nations were concerned about the patriarchal tendencies of their healthcare systems, but the British authors operated within the framework of nationalised healthcare.

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15 Ibid., 157.
16 Ibid.
17 Ibid., 183–4.
HEALTH CONSUMERISM AND FEMINIST PUBLISHING

Feminist writing on health issues in 1970s Britain would unite strands of activism specifically dealing with maternity care. Many activists worked from within the National Childbirth Trust, founded in 1956 with the goal of providing written information and support for women experiencing pregnancy and childbirth. Consumer organisations joined the backlash against the medicalisation of childbirth, uniting with feminist critique of healthcare services. The Association for the Improvement of Maternity Services formed in 1960 with the goal of improving birth and childcare. The group published on these topics before there was a more concerted push to improve women’s health, but later became part of a feminist communication network.

Activists did not necessarily identify as feminist, although they often joined with feminist reform efforts by the 1970s. Sheila Kitzinger, a self-proclaimed champion for homebirth, argued particularly for alternative forms of childbirth, a feminist health concern. Like many activists in England, her profession as a writer allowed her to spread her knowledge in feminist publications. Kitzinger’s Birth at Home was applauded for its accessibility, as many women were increasingly demanding information about childbirth options. Further, women were interested in the situation at home in the UK. A reviewer was critical of Kitzinger’s ‘American bias’, which ‘bears little relevance to our situation here where everything we need is provided by our midwives’. While Kitzinger’s book, The Place of Birth, had been intended for ‘professionals and “informed” consumers’, ordinary women read the book as many became inspired by healthcare critiques and wanted to understand their options.

Feminist publications characterised the women’s liberation movement by the mid-1970s, with activists arguing beyond maternity care for women’s education and a breakdown of traditional social expectations. Journals like Socialist Woman and Women’s Voice provided a platform for feminist activists and encouraged women to join consciousness-raising groups. Similar to the arguments later made in the UK OBOS, many feminists wished to reform

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20 Ibid.
21 Ibid.
state structures and policies that reinforced the patriarchal family structure. Throughout the 1970s, activists made headway in legal reform, with gains of equal pay, anti-sex discrimination, and domestic violence protection.²⁴

In the female-focused writing spheres that emerged in the 1970s, women could spread the message of the liberation movement. While more generally dealing with women’s issues, magazines often featured health topics like abortion reform, pregnancy, and sexuality. The most well-known publication, Spare Rib, began as a women’s liberation magazine in 1972 but covered women’s health developments. Women’s Report, a ‘bi-monthly roundup of news and reviews by women for women’, began in 1972 and contained a ‘woman’s mind, woman’s body’ health feature in every issue, which expanded over the life of the magazine from one page to two and three pages.²⁵ Women’s health issues were considered general women’s liberation issues since the magazine self-identified as a feminist publication.

By the mid 1970s, authors of magazines like Women’s Report championed the new form of feminist health guides that featured personal experiences, including a positive review of the American OBOS.²⁶ Books on childbirth prominently displayed stories and pictures, demonstrating techniques from women’s health activism and ‘destabilizing assumptions about the clinical nature of reproduction and women’s bodies. Birth was not a medical event but a natural process that had been taken away from women.’²⁷ In a 1974 issue the Swansea Women and Health Group positively reviewed a book on childbirth as a ‘landmark in the history of the women’s health movement in this country’, partly because it ‘describes womens’ [sic] experience, both good and bad’.²⁸ This health group was typical of the women’s liberation in Britain, which avoided the ‘formal, hierarchical structures typical of male politics’.²⁹ Consciousness-raising groups formed a network across the nation that held authority on issues like childbirth and more general health.

The Women’s Health Handbook, published in 1976, became an important general health guide for many women.³⁰ The book was published by Virago, the best known feminist publishing house, at a time of budget constraints within

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²⁴ Black and Pemberton, Reassessing 1970s Britain, 159.
²⁹ Pugh, Women and the Women’s Movement in Britain, 319.
the NHS. The authors gave women health information ‘at a practical level’, directing them to health and consciousness-raising groups around Britain for more information.\textsuperscript{31} Books like these inspired mainstream presses to take on feminist works, which were increasingly demanded, like the UK edition of \textit{OBOS}.\textsuperscript{32} Similar to the message in the UK \textit{OBOS}, the \textit{Women’s Health Handbook} authors wanted to help women respond to discrimination from healthcare providers and was the first women’s general health book with a feminist analysis of the NHS. While much of the book was written in a question and answer format to engage readers, the book featured fewer topics and personal experiences than in \textit{OBOS} largely due to space constraints.\textsuperscript{33}

\textbf{UK Our Bodies, Ourselves: A Penguin Publication}

Before the UK edition of \textit{OBOS}, those in the women’s liberation movement were already familiar with the original text. The feminist magazine \textit{Spare Rib} featured the book as an authoritative source throughout the 1970s, frequently listed as a reference for women to examine and understand their bodies.\textsuperscript{34} In one letter from a reader in 1975 requesting information on ‘women and their bodies’, a writer at \textit{Spare Rib} replied that the American \textit{OBOS} ‘covers every aspect of health care for women, and the material is presented warmly and directly’.\textsuperscript{35}

While feminist publications featured the bulk of reception, the general press also acknowledged the book. A \textit{Guardian} contributor claimed the book was a ‘particular boon for Women’s Liberation as it shows what men as well as women should be striving for’.\textsuperscript{36} Although relegated to a separate section of the newspaper titled ‘Woman’s Guardian’, known for its radical views, the article’s national audience indicated the importance of health in the women’s liberation movement.\textsuperscript{37} While the reviewer appreciated the candid and friendly tone of the book, she tempered her enthusiasm at the book’s American bias.\textsuperscript{38}

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32 Pugh, \textit{Women and the Women’s Movement in Britain}, 320.
38 Jerman, ‘Sidelines,’ 9.
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The authors of the UK OBOS, Angela Phillips and Jill Rakusen, were involved with feminist publications before adapting OBOS. After reading about the women’s liberation movement in a newspaper and identifying with the description in the article, Rakusen joined consciousness-raising groups, campaigned, and read feminist literature. Through this community, she joined others who wanted to start a news magazine: Women’s Report.\(^{39}\) Phillips became involved with feminist publishing as a photographer, eventually deciding to focus on writing about women’s health in magazines like Women’s Report and Spare Rib, where she met Rakusen.\(^{40}\) In 1974, she wrote a full page article in Spare Rib on the book Women’s Rights: A Practical Guide, hailing it as ‘deserv[ing] a place on every woman’s book shelf right next to “Our Bodies Ourselves”’.\(^{41}\) She appreciated that this book had ‘done for the law what the Boston Womens Health Collective did for basic medicine’, recognising the power of giving women information to make their own decisions.\(^{42}\)

Julia Vellacott, an employee of Penguin publishing, knew Phillips through this feminist writing, and thought her writing experience would make her well suited for adapting OBOS. Vellacott worked as an editor for Penguin, and among others, was responsible for securing book rights for Penguin to publish works. After travelling to the United States and hearing about OBOS, she wanted to bring the book to the UK. Vellacott identified with the women’s liberation movement, and often recommended feminist texts for the company. After the contract was established, Vellacott contacted Phillips, and through her, Rakusen, to write the book.\(^{43}\)

Penguin most likely saw the UK OBOS as both a commercially successful book, often the case with European adaptations, and as a work fulfilling their goal of producing books on social change.\(^{44}\) According to Penguin’s Chief Executive Officer, Peter Mayer, ‘Penguin’s non-fiction reflected the new cultural openness embodied by the youth culture of the decade. It was leftish, and it definitely appealed to new generational ideals of personal freedom and social awareness’.\(^{45}\) Allen Lane, the founder of Penguin, had wanted to form a company that responded to the interest of the general public, with particular

39 Rakusen, email correspondence with author, 18 January 2016.
42 Ibid.
45 Black and Pemberton, Reassessing 1970s Britain, 213.
sympathy to a ‘center-left political identity’. Penguin had supported the efforts of many feminist works throughout the 1970s, including those of Sheila Rowbotham, a recognised feminist author, and The Single Women’s Guide to Pregnancy and Parenthood, among others. This trend continued into 1984, with Penguin publishing numerous books in the highly advertised ‘First International Feminist Book Fair’ at WHSmith.

By 1978, the company ‘had come to rest outside the mainstream of British publishing, whereas it had once dominated and determined that mainstream’. Beginning in the late 1960s, the publishing house began to be more interested in leading public opinion than following it. However, it was still a widely read and recognised publishing company, and the UK OBOS fit in with the company’s focus on ‘civil liberties, women’s rights, student politics and ecological problems’. Perhaps because of the desire to publish more radical books but understanding the need to keep public interest, Penguin changed the UK edition cover to reflect a similar aesthetic to the American editions.

The authors of the UK OBOS benefitted from Penguin’s consumer-minded focus. Phillips and Rakusen agreed to write the book because of their commitment to informing women about their health, and reworked material from the 1973 and 1976 American editions of OBOS with information from their own health experiences, those of others, doctors, and publications. To Rakusen, it was important to honor the intentions of the BWHBC and also to validate the book against scrutiny from medical authorities. Phillips says they did not view themselves as health care experts, but rather as ‘consumers of healthcare’, wanting to provide comprehensible and accessible information for ordinary women.

Before patients began to demand more information, the ‘asymmetry of the doctor-patient knowledge-power relationship made it difficult for patient

46 Ibid., 224.
49 Black and Pemberton, Reassessing 1970s Britain, 216.
50 Ibid., 231.
51 Ibid.
52 ‘Letter from Julia Vellacott to Peter Wright’, 24 May 1979, in Editorial Files: Julia Vellacott files, University of Bristol Library Special Collections, DM1952/654.
53 Jill Rakusen, telephone interview with author, 15 December 2015.
54 Ibid.
Figure 1. Part of a display ad from the *Guardian* in 1984 advertising the ‘First International Feminist Book Fair’, featuring the UK *Our Bodies, Ourselves*. Penguin published many of the titles highlighted, alongside feminist presses like Virago and Womens Press. Although not featured here, Penguin published a number of non-fiction women’s health books, like *Ourselves, Our Children*, written by members of the Boston Women’s Health Book Collective.
consumers to act as autonomous individuals’.\textsuperscript{56} Phillips and Rakusen wanted to combat this ‘doctor knows best’ attitude with practical solutions for British women. Unlike activist writers like Sheila Kitzinger, who specialised in childbirth, Phillips and Rakusen were broadly interested in women’s health. However, the message in their book joined with other strands of activism, like the health consumer movement, in order to impact healthcare.

Early meetings between the American authors and the UK adaptors highlighted the work necessary to produce a UK edition, a book that needed to reflect a different healthcare system. In 1977 two of the original American authors, Norma Swenson and Judy Norsigian, met with Phillips and Rakusen. Swenson spoke with mixed feelings about the health model in the UK: ‘the existence of your National Health Service does erode people’s initiative – work has to go into trying to change policy – rather than into direct confrontation with the system.’\textsuperscript{57} She favoured a model within the NHS of women’s programs with physician backing, and said of the UK version of the book: ‘Reading it now we think it’s terrific. Our hope—and indeed our requirement—is that in any country … a group of local women concerned about health will be involved in expressing for the women in their country what it’s like to deal with their system.’\textsuperscript{58}

The UK book appeared in November 1978, a new but revised edition of the American original. Unlike the original, written by a collective and first published as a newsprint book by a local press, Penguin commissioned the UK edition. Readers in the United States contacted the BWHBC as it was a collective and source for more information, while Phillips and Rakusen were experienced feminist journalists transmitting knowledge to others, familiar with how the NHS operated. While the authors received letters from readers, their goal was not to remake the text as was the intention of the American group.

Despite these differences, the UK version largely mirrored topics from the American edition, including chapters on sexuality, relationships, birth control, abortion, considering parenthood, and menopause. The two editions placed different weight on specific topics, and the UK version included a new chapter on venereal disease. However, both books included quotes from women, illustrating diverse views throughout the US and UK. These stories of

\textsuperscript{56} Alex Mold, \textit{Making the Patient-Consumer: Patient Organisations and Health Consumerism in Britain} (Manchester: Manchester University Press, 2015), 8.

\textsuperscript{57} Jill Nicholls, ‘“Our Bodies” International,’ \textit{Spare Rib} 60 (July 1977): 29.

\textsuperscript{58} Ibid.
individual women’s voices reflect the essence of *Our Bodies, Ourselves* and the main tenet of the women’s health movement. The second chapter, ‘Anatomy and Physiology of Sexuality and Reproduction’, reflects a typical example. The American edition featured a quote about a woman’s positive experience of her body: ‘Having my first child was the first experience in my life in which I felt my physical being was as important as my mind. I related to my total body. I became very un-self conscious. I felt my body as a fantastic machine!’

In contrast, the UK edition opened with a woman’s negative memory of her body: ‘I remember coming home from school every day and going over my body from head to toe. My forehead was too high, my hair too straight, my body too short, my teeth too yellow, and so on.’

These two short anecdotes reveal the essential difference in the two texts, the different experiences of individual women, but both allowed readers to connect with a real story of a ‘sister’.

Women in the UK included their experiences with the NHS, a topic the UK adaptors dealt with based on their previous work covering women’s health. In 1974, facing budget constraints, the NHS reorganised in an attempt to connect hospitals and government services with health authorities. A major change of this reorganisation was the formation of Community Health Councils (CHCs), which were intended to process patients’ complaints. A 1974 issue of *Women’s Report* claimed that ‘this will not effectively involve women as consumers at all, while the professions’ interests are carefully safeguarded’. While not a healthcare system modelled on fee-based care as in the United States, the UK authors claimed of the NHS that, in comparison, ‘only the economic relationship changed’ and ‘no attempt was made to change the power relationship between doctor and patient’. There was still an unequal relationship between doctors and women, who were not always given information to make their own medical decisions. Phillips and Rakusen reported that the NHS did not respond directly to the needs of women, but instead to the ‘employing authority’, a hierarchy within the government. This same problem had been elucidated

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63 Phillips and Rakusen and Boston Women’s Health Book Collective, *Our Bodies Ourselves*, 536.
64 Ibid.
in the American OBOS, where the authors blamed the medical profession for restricting knowledge.\textsuperscript{65}

While Phillips and Rakusen favored the principle of the NHS, they took a critical stance on specific shortcomings. In their chapter on abortion, the authors emphasised that women should have the choice between abortion and childbirth, and criticised the NHS for ‘inadequate service’, noting that many women felt forced to use the private sector for abortions because of lacking NHS resources.\textsuperscript{66} While American women were still fighting the medical establishment for safe access to abortions, British women had comparatively easier access to such services because of the \textit{Abortion Act 1967}. Rather than passively accepting state care, however, the UK OBOS bluntly stated: ‘It is crucial that any abortion services should be organized not on the basis of saving money but of giving service’; a response to the budget cuts of a conservative government.\textsuperscript{67} The authors knew that it would not be easy for women to ‘tackle the monolith of the NHS’ but listed resources like local women’s groups, encouraging women to join and reform maternity services.\textsuperscript{68}

The UK OBOS wanted to bring health workers into conversation with women, believing this would lead to gradual progress in reforming healthcare: ‘The women’s health movement is beginning to show how useful it can be to bring health workers into discussions with women’s groups when the balance of power is reversed and they are doing the listening rather than the talking.’\textsuperscript{69} The authors were positive, asserting that the health movement in Britain was gaining momentum as more women demanded rights: ‘the abortion debate has re-emerged with greater intensity, and cuts in health service spending have made us aware that our free health system is under threat.’\textsuperscript{70} The book ended with a plea for women to collectively influence change: ‘We must have the courage to join these organizations which have sprung up to defend the rights of health workers and fight there for our own rights and the rights of all patients to the care we need,’ and included a list of resources to set up alternatives within the NHS.\textsuperscript{71} The authors gave women tangible solutions to

\textsuperscript{65} The Boston Women’s Health Book Collective, \textit{Our Bodies, Ourselves}, 239.
\textsuperscript{66} Phillips and Rakusen and Boston Women’s Health Book Collective, \textit{Our Bodies Ourselves}, 294–5, 310.
\textsuperscript{67} Ibid., 298.
\textsuperscript{68} Ibid., 298, 535.
\textsuperscript{69} Ibid., 543.
\textsuperscript{70} Ibid., 560.
\textsuperscript{71} Ibid., 567–568.
join with others and work towards the health aims of the women’s liberation movement.

**Post-Publication: The Lasting Impact**

The UK *OBOS* received positive press and, as expected, feminist magazines praised the book’s informative and accessible nature. In *Spare Rib*, The Archway Women’s Health Group claimed that the book was a ‘welcome British version of the excellent American original’. The group particularly noted the bond created through the book: ‘It is a good feeling to know we’re not alone in our experiences.’ Collective solutions offered readers a supportive network for learning more about their health, a key feature of the women’s health movement. Further, the traditional medical establishment was influenced by this new form of health empowerment, and the back cover of the book featured a quote from the *British Medical Journal*: ‘well researched, informative, and educational for both men and women, professional or not’.

Women began demanding tangible rather than superficial solutions for their healthcare concerns. The Association for the Improvement of Maternity Services newsletter particularly celebrated *OBOS*’s information on maternity services, discrediting another book because it ‘doesn’t really do more than scratch the surface ... one would be far better off reading the final section of the new British *Our Bodies, Ourselves*’. Similarly, a later *Spare Rib* article, recommending books about childcare, dismissed a book from Marks & Spencer, claiming it had advice ‘so general that it is impossible to put into practice’.

A national newspaper, the *Observer*, featured two articles on *OBOS* a few days before the UK edition was published, initiating a conversation about health and sexuality. The first article used information from the American edition to discuss the possibility of motherhood and demonstrate women’s newfound freedom in society: ‘Do we want to become mothers? This was not a question asked by our grandmothers. For them motherhood was the natural outcome of sex and the duty of all women.’ Immediately following, contributor Christine Doyle, ‘Motherhood?’ *Observer*, 26 November 1978, 37.

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72 Archway Women’s Health Group, ‘Our Bodies Ourselves by Angela Phillips and Jill Rakusen,’ *Spare Rib* 79 (February 1979): 37.
73 Ibid.
77 Ibid., 33.
Doyle welcomed the coming UK edition because ‘there has not been a major general book on women’s health in this country which departs radically from the “doctor tells all” paternalistic approach’. However, according to Doyle, the British edition more than made up the lack. While some doctors may have been reluctant to embrace the cooperation demanded in OBOS, feminist texts and newspaper articles like these provided a platform for health advice and women’s liberation.

Both Phillips and Rakusen remained women’s health activists after the book’s publication, giving talks and recommending the book. Throughout the next few years, Spare Rib continued to list the UK OBOS as an authoritative text for a number of issues, including pelvic inflammatory disease, antenatal care, and raising children. The book affected the lives of individuals, with a woman reporting in the Observer that she had begun demanding more information from her doctor after reading the book. Further, while not explicitly mentioning OBOS, the author of a 1979 Observer article embraced the idea of ‘our bodies, our selves’ on abortion reform, even though she did not often ‘vote the straight feminist ticket’. While the specifics of the book were not mentioned, even those beyond strictly feminist circles were influenced, normalising the attitude that women should actively partake in their healthcare.

Women’s health came to the forefront during the 1980s, when England experienced a ‘baby book boom’, with a high demand for childcare texts. While OBOS was still considered a source of authority, it was sometimes lost in the ‘publishers paradise’ of demand for books on ‘conception, fertility, infertility, pregnancy, birth, babies, motherhood’. Readers still appreciated quotations from women, but publishing companies began to capitalise on books about women’s health and overwhelm the market. A 1981 Spare Rib article on the baby book boom praised OBOS, yet a 1984 Times article never mentioned it. While not all of these new books answered the demands of newly empowered female patients, the UK OBOS helped bring prominence to discussion of

78 Ibid.
82 ‘Our Bodies, Ourselves and Them,’ Observer, 15 July 1979, 43.
women’s health. The personal stories of OBOS proved to be part of the book’s lasting and meaningful impact.

**CONCLUSION**

While the text of the UK OBOS inspired and informed many readers, the book’s reception and coverage in the media allowed further dissemination of the feminist ideas, goals, and achievements of women’s health activists. The American OBOS did not reach a wider audience until it was published with a mainstream publishing company, but the UK text was framed within wider literature of women’s health throughout the 1970s, and received wide coverage before and after the book’s publication. The text was one of the first explicitly feminist women’s health books published in England, and furthered previous activist efforts to reform healthcare. Despite its significance and continuous publication through the rest of the decade, the book’s distinctiveness was somewhat lost with the plethora of books on women’s health from the 1980s.

A second edition of the UK edition was published in 1989, a much longer and more expansive text that covered new health developments like the discovery of AIDS. The book is still mentioned in articles about sexuality and childbirth, but today, literature is overwhelmingly focused on the American OBOS, with an updated version of the book still published every four to six years.86 While in America the book helped initiate a feminist critique of healthcare, inspiring reform of an individual level, the British OBOS added to existing demands of health activists. Penguin published the book because of its more radical liberal content, simultaneously recognising its widespread appeal to a general audience. UK healthcare activists had already paved the way for the book’s content, and a UK version of the iconic feminist health book appealed to radical feminists and ordinary women alike.

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