

6 Family Planning Clinics and Activism in the 1970s

From the late 1960s to late 1970s, a number of family planning clinics were established across the country. The first of these, the Fertility Guidance Company, later the Irish Family Planning Association (IFPA), was founded in 1969. The name 'Fertility Guidance Co.' was chosen so as not to promote opposition, but to illustrate the group's aim 'to advise on the problems of infertility as well as the reverse'.¹ Others soon followed such as Family Planning Services (later FPS) (1972), the Cork family planning clinic (CFPC) (1974), the Navan family planning clinic (NFPC) (1975), the Limerick family planning clinic (LFPC) (1976), the Galway Family Planning Clinic (GFPC) (1977), and Bray family planning clinic (BFPC) (1978). The Well Woman Centre (WWC) was opened in Dublin in 1978. In order to get around the law, family planning clinics received a donation rather than a fee for their services, and 'their activities were strictly unlawful, in the sense of circumventing the law's purpose, rather than illegal in the sense of being explicitly prohibited by it'.²

Emilie Cloatre and Máiréad Enright's scholarship on illegality and the family planning movement has shown how the illegal practices of activists 'enacted critiques of the prevailing law' but also 'established new Irish modes of engagement with contraception, not yet provided by the state, which were no longer saturated by religious morality, or necessarily, by conservative medical power, but instead were characterised by solidarity with clients, care and even humour'.³ Their work has also shown how Irish clinics helped to challenge the law around the sale of condoms from the 1970s to the 1990s.⁴

Drawing primarily on thirteen oral history interviews conducted with activists and staff involved in family planning activism in the 1970s, this

¹ Solomons, 'Dublin's first family planning clinic', p. 525.

² Cloatre and Enright, 'On the perimeter of the lawful', p. 473.

³ Cloatre and Enright, 'On the perimeter', p. 499.

⁴ See: Cloatre and Enright, 'On the perimeter' and 'Transformative illegality', pp. 261–84.

chapter further explores the work of the clinics through a focus on the IFPA, FPS the Galway, Cork and Limerick family planning clinics and the WWC.⁵ It illustrates the personal risks that men and women took as part of their activism and their motivations for involvement. However, there was also a clear sense among many of the interviewees that the authorities would turn a blind eye to their activities. The family planning movement in Ireland must also be viewed in relation to the international movement. While the clinics primarily served the urban middle-classes, they nevertheless provided vital family planning services to individuals who could not access them otherwise.

The demand for the clinics across the country shows that many Irish men and women were beginning to exercise their own agency in relation to their reproductive choices. The stories of these family planning clinics, in particular the GFPC and LFPC, also show the importance of medical authority and how the medical model was seen to legitimise the work they were doing, but also enabled the clinics to provide a wider range of family planning options. While the clinics were independent of each other, it is evident that through regular meetings and correspondence, and in some cases, the sharing of supplies and legal advice, they created a community of family planning activists.

6.1 The Establishment of the Clinics

In April 1968, a Family Planning Study Group was founded by Dr. James Loughran, a GP in Skerries, to consider the question of family planning in Ireland.⁶ During the summer and autumn of 1968, four private meetings were held in Dublin at Buswell's Hotel. Eight people attended the meetings: Loughran, Dr. Michael Solomons, Dr. Joan Wilson, Yvonne Pim, Dr. Robert Towers, Dr. Dermot Hourihane, and Máire Mullarney.⁷ The final member of the group was 'a moral theologian at a Jesuit college' who provided the meetings with 'knowledge of Catholic doctrine coupled with advice and encouragement' in return for strict anonymity.⁸ According to Yvonne Pim, the mixed range of religious backgrounds of the group was beneficial. She felt 'it was quite fortuitous that we were quite a disparate

⁵ The Navan family planning clinic was opened by doctors Mary and Paddy Randles in 1975. The Bray Family Planning clinic was established by members of the Bray Women's Group in 1978. Unfortunately, I was unable to make contact with the founders of these two clinics for interview.

⁶ Michael Solomons, 'Dublin's first family planning clinic', *Psychomatic Medicine in Obstetrics and Gynaecology, 3rd International Congress, London, 1971* (Karger, Basel, 1972), pp. 524–6, on p. 525. Courtesy of Susan Solomons.

⁷ Solomons, *Pro-Life?* p. 24. ⁸ *Ibid.*, p. 25.

group, because obviously mainly Roman Catholic, Jewish, Protestant, and so we brought in all the elements without being overtaken by anyone, well, obviously the Catholic Church being the majority'. Loughran would go on to play a crucial role in the 1973 McGee case, in his position as Mary McGee's GP. Yvonne Pim was a social worker who, with Dr. Joan Wilson, had been involved in providing sex education talks in Protestant secondary schools. Dr. Robert Towers was the editor of the *Irish Medical Times*. Dr. Dermot Hourihane, a pathologist, had been involved with the Catholic Marriage Advisory Service and was disillusioned by the inadequacy of the rhythm method. Máire Mullarney was a qualified physiotherapist and nurse as well as a theologian and the mother of eleven children.

Michael Solomons' wife, Joan Maitland, introduced him to Dr. Mary Redding who had been involved in the family planning movement in Britain. He sat in on a few sessions at the North Kensington Family Planning Clinic in 1959 and during this visit met Joan Rettie, secretary of the International Planned Parenthood Federation (IPPF). According to Solomons, Rettie had received a growing number of letters from women in Ireland who had obtained the address of the IPPF in women's magazines or by word of mouth. Following the meeting with Rettie, Solomons agreed that she could give his name and address to Irish correspondents writing to the IPPF. He could then advise them in Mercer's Hospital; Solomons believed 'this was the first time public, as opposed to private, patients had access to contraceptive advice'.⁹ The study group continued to meet until February 1969 to plan the clinic and issues around training and the supply of contraceptives. The clinic would be funded by the IPPF on a continuing basis with the rest of the funding coming from voluntary subscriptions, philanthropic donors and organisations.¹⁰ Legal advice was also sought from a barrister, Noel Peart, who suggested it would not be a contravention of the law if contraception was not sold, while the establishment of a company would lessen the possibility of any individual member being subjected to legal action.¹¹

The FGC began seeing patients on 25 February 1969.¹² A report in the IPPF newsletter stated that 'so far there has been no adverse publicity, indeed the centre has been favourably commented upon in the press'.¹³ A leaflet from 1970 summarised the aims of the clinic as being 'to assist married couples requiring advice on family planning, to deal with marital problems, including infertility, and to promote the interests of family welfare and community well-being'. Married couples were

⁹ Solomons, *Pro-Life?* p. 17. ¹⁰ *Ibid.*, p. 28.

¹¹ Solomons, 'Dublin's first family planning clinic', p. 525. ¹² *Ibid.*

¹³ *International Planned Parenthood News*, No.184, (June 1969).

'encouraged to come and discuss their situation in complete confidence, in a relaxed atmosphere, where they can be assured of skilled medical advice. The individual's conscientious and personal convictions are respected in choosing a suitable method of family planning'.¹⁴ In a letter sent to Irish doctors in 1969, inviting them to become members, it was stressed that the company was a 'non profit making concern' whose aims were 'to assist married couples in the planning of responsible parenthood and in problems of sterility and other marital difficulties'.¹⁵ By 1970, the clinic operated on Tuesdays and Fridays from 7 to 8 p.m. by appointment, Tuesdays and Wednesdays, 2.30 to 4 p.m. and Monday mornings from 10.30 to 12.¹⁶ By the end of 1970, the clinic expanded to six sessions a week with ten patients per session. The staff also increased, with the clinic acquiring eleven doctors, sixteen lay workers, an extra nurse and a financial administrator. The demand for services meant that there was a waiting list of three to four weeks.¹⁷ In 1971, a second clinic was established at Mountjoy Square. The FGC officially changed its name to the Irish Family Planning Association in 1973.¹⁸

Family Planning Services, the next family planning clinic to emerge, emanated from The Irish Family Planning Rights Association (IFPRA) which was established in October 1970, and was concerned with the hypocrisy around the Irish laws on contraception.¹⁹ The IFPRA described itself as a 'non-political, non-sectarian group formed to promote in Ireland the internationally recognised human right of family planning'.²⁰ The group aimed to have the law changed so that artificial contraception would be openly legal.²¹ The committee members of the group included Jim Loughran from the IFPA, Michael Melville, Vincent McDowell, Brendan Walsh, Robin Cochran and Frank Crummey. The group held public meetings on the topic of family planning.²² Frank Crummey, who would go on to play a key role in the Irish family planning movement, had campaigned on issues such as corporal punishment and been involved in the Language Freedom Movement, described this period as 'a very exciting time to be alive'. The idea for the creation of FPS emerged out of the discussions of the IFPRA and the feeling that while there was a family planning clinic in Dublin, it was necessary to

¹⁴ Fertility Guidance Clinic leaflet, c. 1970. Courtesy of Susan Solomons.

¹⁵ Letter to prospective members, dated 1969. Courtesy of Susan Solomons.

¹⁶ Fertility Guidance Clinic leaflet, c. 1970. Courtesy of Susan Solomons.

¹⁷ Solomons, *Pro-Life?* p. 30. ¹⁸ *IFPA Annual Report 1973*, p. 3.

¹⁹ Hug, *The Politics of Sexual Morality*, p. 91.

²⁰ 'Family planning', *Irish Press*, 16 October 1970, p. 14.

²¹ Hug, *The Politics of Sexual Morality*, p. 91.

²² 'Family planning "a necessity"', *Irish Examiner*, 23 October 1970, p. 24.

provide 'a more practical approach' and a clinic that would provide non-medical supplies.²³ While the IFPA provided a full family planning service to their clients, they did not distribute contraceptives beyond their own clinic, instead, providing prescriptions and order forms to clients who could then import items on their own, such as from the IPPF in England.²⁴ Indeed, the IFPA was, in the 1970s, 'considered more conservative in its approach to the law than FPS and its associated clinics'.²⁵ A group of eight individuals, Frank Crummey, Robin Cochran, Dr. D.J. McConnell, Dr. Brendan Walsh, E.M. Lee, Dr. James Loughran, A.B.D. McDonnell and Pat O'Donovan, decided to set up a separate company to import contraceptives in bulk, with the rationale that having a company that was separate from the IFPA would mean that the clinic's work would not be jeopardised if the group members were imprisoned.²⁶ According to Crummey, '[We] decided to set up another company called Family Planning Services where we would blatantly advertise our products in magazines and have a postal service'. FPS was therefore established in 1972 with the aim of providing non-medical contraceptives such as condoms, and family planning information, with the hope that in the future the group would be able to set up an educational department.²⁷ In April 1973, the FPS moved to their first premises in Lower Leeson Street, Dublin and later to a larger premises in Pembroke Road in April 1974.²⁸

The Cork Family Planning Clinic opened in February 1975 with a staff of four doctors and four nurses, one of the doctors being its founder, consultant gynaecologist and obstetrician, Dr. Edgar Ritchie. The reception was manned by volunteer lay-workers.²⁹ Dr. Ritchie, who grew up in Abbeyleix, graduated as a doctor from TCD in 1958. He worked as a junior registrar in Oldham, Lancashire, alongside obstetrician/gynaecologist Patrick Steptoe, who would later pioneer IVF treatment. Dr. Ritchie then worked as a medical missionary doctor in Umuahia, Nigeria from 1960–1970, after which he returned to Ireland, securing an appointment as an obstetrician in Victoria Hospital, Cork, and later at the Erinville Hospital, which had links with the UCC medical school. The clinic received initial financial support from the IFPA and the IFPRA, and

²³ Margaret Bolt, 'Who's who around the country: no.1 Family Planning Services', *Family Planning News*, 1:1, (August 1975), p. 7.

²⁴ Cloatre and Enright, 'On the perimeter', p. 476. ²⁵ *Ibid.*, p. 491.

²⁶ Sweetman, *On Our Backs*, p. 156 and 'Free contraceptives from child lover', *Sunday Independent*, 19 November 1972, p. 12.

²⁷ Bolt, 'Who's who', p. 7. ²⁸ *Ibid.*

²⁹ 'Business as usual', *Irish Times*, 5 March 1975, p. 10.

started out offering consultations from 7–9 pm on Tuesdays, Wednesdays and Thursdays.³⁰

Discussions around the establishment of a family planning clinic in Limerick began in 1975. A public meeting attended by over 70 people was held in Limerick in June that year featuring Laurine Elliott and Dr. George Henry of the IFPA and Dr. Walter Prendeville, who worked in a Dublin clinic. The meeting was chaired by Councillor Jim Kemmy who said that family planning was ‘a basic human right’. Elliott claimed that there were more individuals from Limerick visiting the Dublin clinics than anywhere in the country. At the end of the meeting, 45 people who were present indicated that they would be willing to be members of a committee to set up a clinic in Limerick.³¹

Another public meeting was held in October 1975, chaired again by Jim Kemmy, and addressed by Margaret Bolt of FPS and Laurine Elliott.³² At the meeting, the objectives were set out as being to obtain a premises for the clinic; to seek finance; to obtain a doctor. Obtaining a doctor was a particular challenge and Kemmy claimed, ‘There have been some doctors with us in spirit, but the response has not been as forthright as we would have wished. Those of us who have lived in the real world know from experience, that some of the younger doctors are responding but do not want to be identified publicly’.³³ The clinic officially opened in mid-February 1976, a small announcement appearing in the *Limerick Leader* on Valentine’s Day.³⁴ The clinic was initially run entirely by lay volunteers who provided non-medical contraceptives which were available through a telephone service or directly to callers at their premises at 6 Cornmarket Row, the office being manned on Tuesdays and Thursdays initially.³⁵

The Galway Family Planning Clinic (GFPC) opened in July 1977. It emerged from two key groups. The first, the Galway Family Planning Association (GFPA), was a collective of individuals interested in setting up a family planning clinic. The second group was a collective who ran a postal service for non-medical contraceptives which was set up while the clinic project stalled.³⁶ The GFPA was established in late 1975 or early 1976.³⁷ The original subscribers of the GFPA included Brian Leonard

³⁰ ‘Cork family planning clinic’, *Evening Echo*, 4 February 1975, p. 5.

³¹ ‘Big numbers visit family planning clinics’, *Limerick Leader*, 24 June 1975, p. 1.

³² ‘Pill clinic’ meeting’, *Limerick Leader*, 18 October 1975, p. 1.

³³ ‘Family planning clinic for Limerick’, *Limerick Leader*, 20 October 1975, p. 1.

³⁴ ‘Clinic’, *Limerick Leader*, 14 February 1976, p. 4.

³⁵ ‘Family planning service for Limerick’, *Irish Times*, 12 February 1976, p. 11.

³⁶ Cloatre and Enright, ‘On the perimeter of the lawful’, p. 478.

³⁷ John Cunningham, ‘Spreading VD all over Connacht’: reproductive rights and wrongs in 1970s Galway’, *History Ireland*, 19:2, (March/April 2011).

(university professor), Sheelah Duddy (teacher), Broddie Mannion Raftery (nurse), Michael Conlon (administrator), Anthony P. Crowley (medical representative), Pádraig O'Carra (university teacher), Seaghan Ua Conchubhair (liaigh and croineir) and Frances Lenihan (doctor).³⁸ Plans to establish a family planning clinic moved slowly; in June 1976, a location was secured in Dominick Street, however, the GFPA was then told that because the premises was originally an architect's office, they would need to apply for planning permission for a 'change of usage'.³⁹ In the meantime, Evelyn Stevens, Emmet Farrell, and Pete Smith, decided to establish a postal service modelled on FPS, in order to distribute contraceptives by mail order, for a donation.⁴⁰ Following advice from FPS, Smith, Stevens and Farrell founded the mail order service in April 1977 out of Farrell and Stevens' home at 77 Ardilaun Road. After a few months, the group realised that there was a need for a clinic with involvement from medical professionals and they reconnected with the other group. The clinic finally opened on 21 July 1977. Evelyn Stevens secured John Waldron as a doctor for the clinic and Mary Fahy as the clinic nurse.

The WWC opened its doors on 17 January 1978 at 63 Lower Leeson Street, Dublin. Founder Anne Connolly had been heavily engaged in student politics at TCD, as deputy president of the Students' Union. She had been involved in the introduction of condoms for sale at the Trinity Student Union shop around 1974–1975. Connolly had been approached by the Marie Stopes Foundation in the UK about the potential of setting up a clinic in Dublin. The CEO of Marie Stopes had heard about Connolly as a result of her work in the Student Union, where she had begun a referral service for students who required the addresses of abortion clinics in the UK. In Connolly's view, 'very early on, one of the reasons the Marie Stopes approached me was because they wanted it to be a centre which would provide abortion counselling and referral on.' Connolly met with representatives of Marie Stopes. While she expressed to me her reservations at the time given the organisation's links with the IPPF, Connolly explained that 'overall it was an opportunity to do something really exciting in Ireland'. The WWC was arguably more politicised than the other clinics.

Formal and informal networks were crucial in the early years of the clinics. From an international perspective, the IPPF (founded in 1953),

³⁸ *Memorandum and Articles of Association: The Galway Family Planning Association Limited*, dated 7 January 1977. Courtesy of Dr Evelyn Stevens.

³⁹ 'It's all a question of planning', *Irish Examiner*, 23 June 1976, p. 16.

⁴⁰ Cunningham, 'Spreading VD'.

was crucial to the development of the FGC.⁴¹ As Bibia Pavard has shown, the organisation had two key objectives: to advance the universal acceptance of family planning and responsible parenthood in the interest of the well-being of the family through education and scientific research, with family planning viewed as a human right.⁴² However, for developed countries, there was an emphasis on the free will of couples, while for developing countries the emphasis was on the necessary reduction of population in order to allow for economic development.⁴³ Michael Solomons maintained contact with Joan Rettie during the sixties and in May 1968, he wrote to her for advice about setting up a clinic in Ireland.⁴⁴ Philip Kestelman, secretary of the IPPF European Regional Medical Committee met the family planning study group in the summer of 1968 and following this, Joan Rettie came to Dublin in August 1968 to provide advice and financial support, starting with a grant of £1000.⁴⁵ In Dermot Hourihane's view, 'in the contraceptive world, Ireland was an issue, so it would have been missionary work, so to speak' on the part of organisations such as the IPPF. The support of the IPPF in setting up the FGC may be viewed in the context of its wider efforts to establish family planning programmes globally, with much of this work focused on developing nations.⁴⁶ However, the support of the IPPF was critical to the endurance of family planning clinics in European countries such as Poland, in the case of the Society for the Conscious Motherhood, through the provision of financial support, expertise and international legitimisation, and in France where the IPPF provided the support necessary to set up the *l'association Maternité heureuse*.⁴⁷ Indeed, the financial backing of the IPPF would prove to be crucial to the survival of the IFPA in its early years. Janet Martin, writing in the *Irish Independent* in 1970 stated 'the Government's downright refusal to look at the question of contraception in this country means that an outside organisation – the International Planned Parenthood Federation – has had to take us under its wing

⁴¹ IPPF was officially created in Stockholm in 1953 after several international conferences which had taken place since 1946, at which women doctors, such as Helena Wright, Joan Malleson, and Margaret Jackson and activists Margaret Sanger and Elise Ottesen-Jensen, had played leading roles. Rusterholz, *Women's Medicine*, pp. 169–78.

⁴² Bibia Pavard, 'Du Birth Control au Planning familial (1955–1960): un transfert militant', *Histoire@Politique. Politique, Culture, Société*, n° 18, septembre–décembre 2012 [on line: www.histoire-politique.fr], p. 8. For more on the development of the idea of family planning as a human right, see Rusterholz, *Women's Medicine*, pp. 178–180.

⁴³ Pavard, *Du Birth Control*, p. 8. ⁴⁴ Solomons, *Pro-Life?* p. 26. ⁴⁵ *Ibid.*, p. 27.

⁴⁶ For a critical overview, see Matthew Connelly, *Fatal Misconception: The Struggle to Control World Population* (Harvard University Press, 2008).

⁴⁷ Kuźma-Markowska and Ignaciuk, 'Family Planning Advice in State-Socialist Poland', p. 9.

(along with all the other underdeveloped countries in the world) to finance a proper family planning clinic'.⁴⁸ According to Yvonne Pim:

We were very fortunate to have funding and a great deal of support from the IPPF and Joan Rettie, who was in charge there, had known Michael Solomons, so bit by bit then, they agreed to enable us to set up, and they funded us because obviously we'd no money at all. We had to get contraceptives, how do you pay for those? We wouldn't be able to charge patients, of course, because that would be against the law.

Clinics also shared advice and, in some cases, supplies and doctors, in their early years. National networks were also important in fostering a sense of community among activists. Mary Fahy recalled the GFPC receiving advice from the IFPA in relation to legal matters. Moreover, meetings attended by representatives of all of the family planning clinics were held four times a year and provided an opportunity to share information and advice. Dorothea Melvin (GFPC) recalled:

So, we met one another all the time really and talked to one another all the time and shared advice and information and, you know, if, say for instance, if I came back from the North with a big bundle of literature, I'd post off some to all of them. You know, just see what other stuff was available and that. Or posters.

Anne Connolly (WWC) also attended the regular meetings with the staff of the other family planning clinics across the country. In her view, 'it was good, it was very good collaboration'. She also recalled that Frank Crummey (FPS) 'was a regular visitor into us and he was a huge advocate'.

Some activists were keen to contrast their activities with those of feminist groups or individuals taking legal challenges, and there was a sense that there were two sides to the movement. Arguably, the WWC bridged both of these sides in that it provided a service but because of its abortion counselling, was more high profile and politicised. Evelyn Stevens (GFPC) stated, 'I know there was legal stuff going on. There were people in Dublin at different stages taking challenges to court because they wanted the legislation to change. But we were a bit more pragmatic and just getting on with it.' As Yvonne Pim (FGC/IFPA) explained, the clinics were providing a service 'with no fanfare at all'. In Pim's view, 'We had to go quite quietly, and I think that was very important.' Feminist campaigners in contrast:

They kept it in the front of the headlines. It's another way of doing it. Still it was like, in a sense, a relay race, handing on the baton to them. They could take it further. We were going along under the radar.

⁴⁸ 'The facts about women's wrongs', *Irish Independent*, 15 October 1970, p. 8.

Similarly, Dorothea Melvin (GFPC) explained:

And of course, the other side of it was that there were two sides, I suppose, to the movement. One was the mouth of the movement as I call it which was the girls and the Spare Rib and the Condom Train and all that kind of thing. The journalists didn't engage much with the clinics. It was like two completely separate legs of the same stool kind of thing. But everything worked in its own way.

6.2 Motivations

Family planning activists were motivated to set up clinics for a variety of reasons which often stemmed from personal and professional experiences. While some scholars of NGOs have dismissed 'foundation myths' as being 'marketing exercises' or 'disingenuous' I would argue, conversely, that in the case of the Irish family planning clinics, an exploration of the reasons why individuals set up these clinics is crucial to understanding the wider social and cultural climate.⁴⁹ The personal experiences of activists involved in such organisations are missing from the current historical narrative and oral history offers a way into understanding what underpinned individuals' motivations, as well as the personal impact of activism and legal risk-taking.

Dr. James Loughran and Dr. Joan Wilson, a Scottish GP, were motivated to become involved in setting up the FGC as a result of their experiences in general practice in Ireland.⁵⁰ Máire Mullarney, another founder member, was a practising Catholic but, like Dermot Hourihane, was disillusioned by the inadequacy of the rhythm method. In spite of the fact that she had used this method and later the temperature method, Mullarney and her husband 'had eleven children in sixteen years, which would seem to be rather more than would be likely if we had made no attempt to control production'.⁵¹ Mullarney wrote that she and Robert Towers' motive 'was to help people to control their fertility and to know they could do so with a clear conscience'.⁵² Mullarney read a 1964 book published in the US called *Experience of Marriage*, and could recognise similarities in the experiences of the couples featured in the book with her own.⁵³ She had also been inspired by a visit a family planning clinic in

⁴⁹ For a critical account of 'foundation myths' see: Matthew Hilton, James McKay, Nicholas Crowson, and Jean-François Mouhot, *The Politics of Expertise: How NGOs Shaped Britain* (Oxford University Press, 2013), pp. 56–63.

⁵⁰ Solomons, *Pro-Life?* p. 24.

⁵¹ Máire Mullarney, *What About Me? A Woman for Whom 'One Damn Cause' Led to Another* (Dublin: Town House, 1992), p. 162.

⁵² Mullarney, *What About Me?* p. 164. ⁵³ *Ibid.*, p. 161.

Lisbon which was organised by a priest and ‘furnished like a comfortable family home’.⁵⁴ Yvonne Pim was motivated to get involved partly as a result of her own experiences in accessing contraception. She explained:

There was the pill, and there were diaphragms. There were condoms, then there were IUDs, none of which were available in Ireland. I was also conscious at a personal level that I had to travel out of the jurisdiction in order to have my own fertility needs met. I just thought that it was most unfair that women in general were being denied this opportunity.

Moreover, Pim was inspired by her experiences as a social worker at the Rotunda Hospital:

I had been a basically trained social worker, and when I had done a little bit of work at the Rotunda Hospital, I’d seen for myself at first hand the multiparas on the district, as they called it. Women with no control over their fertility whatsoever, and obviously no likelihood of it either. I was very conscious of my own situation. I belonged to a minority church, in other words, the Church of Ireland, which had no restrictions on fertility. Of course at that time, control of fertility was available, but not obviously by law in Ireland.

Dermot Hourihane, another founder member of the FGC, was also moved to action as a result of his personal experiences trying to follow the Catholic teachings on family planning. He explained to me:

My wife and I tried to follow the Church’s teaching and found it difficult. Then I gradually ran Catholic contraception advice in London, not very successfully, I must say. My wife was one of the only people to get pregnant while I was doing it, and that was run by Catholic doctors, and then I gradually reached the conclusion that the argument about contraception was just hopeless, unconvincing, and the idea of following Thomas Aquinas, the genitalia are made for fertilisation and only for that, not for pleasure, is ridiculous. When the papal encyclical came out, *Humanae Vitae*, formally outlawing all contraception, I was absolutely disgusted. That tilted me into practising contraception myself and thinking that other people should have the opportunity to have it.

Hourihane obtained condoms by mail order from the Family Planning Association in England but was aware of his privilege in this regard, stating ‘very few people would have the ability or the knowledge to do that’. He explained:

There was a lot of ignorance. I guess everybody who was married and thought they had enough children already or too many maybe would have known about it. There was ... It was easy to get talking about it, but it was very difficult to do anything about it. I felt like the people who needed the contraception the most were the least likely to get it. I was educated, and I was in a position where I could

⁵⁴ *Ibid.*, p. 163.

get ... I used to hand write the letters myself to the Family Planning crowd in Britain. It was a very shameful society, looking back on it, and to say they didn't care about the children, the fifteen children that were born to somebody with seventeen pregnancies, those were the kind of figures that were common, and you could only see that in poor people who were on public health services. It was just social injustice.

Dr. Michael Solomons was a gynaecologist, who like his father before him, Dr. Bethel Solomons, gave advice to his private patients on methods of birth control when they required it. However, he wrote that he was 'aware of the injustice of a situation whereby those who had the money could travel outside the state, to the North or to Europe, to obtain contraceptives. There was absolutely nothing one could do to help our public patients'.⁵⁵ Solomons was motivated by his experiences in medical practice and the problems patients had using natural methods of family planning.⁵⁶ Solomons' arguments in favour of family planning were typical of campaigners internationally who framed family planning as responsible parenthood, but also acknowledged the potential benefits to the physical and mental health of the parents. He also viewed artificial methods as more effective and having the advantage that they allowed the woman control of her fertility without having to depend on her partner.⁵⁷

For Frank Crummey (FPS), his belief that individuals should be entitled to contraception stemmed from the idea that all children should be 'truly wanted, instead of being looked on as additional mouths to feed in a family'.⁵⁸ In an oral history interview with me, he also explained his sadness at the wider plight of women in Ireland, including his own mother. He said:

It's so sad. I mean, I could cry. I get very emotional. My mother was deserted at the age of 34, after four children. She spent the rest of her time rearing her children, done a wonderful job. But the idea of her going out with a man ... I know one man on the road asked her out. a widower, a lovely man ... She couldn't. That meant she was condemned, whether she liked it or not, to a life of celibacy for the rest of her life.

Dr. Edgar Ritchie's desire to establish the CFPC in 1975 emanated from his professional experiences:

Well, in the early 70s there was very limited advice available or in fact service available and it was obvious that there was a great need. I would have, having come back from Africa, I would have been aware of people who were at loss as to how to plan their family and so that was the kind of, and without going into

⁵⁵ Solomons, *Pro-Life?* p. 16. ⁵⁶ *Ibid.*, p. 21. ⁵⁷ *Ibid.*, p. 26.

⁵⁸ Frank Crummey, *Crummey v Ireland: Thorn in the Side of the Establishment* (Londubh Books, 2010), p. 98.

specifics, there would have been people that I would have known at that time who came for help and who in fact it was something of a matter of life or death, you know. It was serious as to whether they would endanger their lives by having another pregnancy and so on. So, it was quite a moral or ethical decision which after all that's what medical people are involved with.

Ritchie had joined the Family Planning Association in England on his return from Africa and 'they talked about certification for Irish people and rightly they said well, really, we should be doing that ourselves. So, that's one of the reasons we got started with both the clinic and advice and so on'. The clinic received initial financial support from the IFPA and the IFPRA, and started out offering consultations from 7–9 p.m. on Tuesdays, Wednesdays and Thursdays.⁵⁹

Cathie Chappell (LFPC) moved to Limerick from England in 1976. She joined the Limerick Women's Action Group. At a group meeting Chappell expressed her frustration at being unable to get the pill she had been taking in England at the Limerick Family Planning Clinic and told the group that 'You can't have a family planning clinic without the pill or the other methods.' Chappell explained that at the time, the clinic was a 'small outfit' being run by Jim Kemmy

with a group of like-minded socialist people, mainly men, and they had a little office, they had a few condoms, they gave advice, that was it. So, the Women's Action Group *en masse* – which was about maybe ten of us women – we joined the Family Planning Clinic, we took it over. [...] And one by one the guys kind of melted into the background because we said, you know, we have to do something about this.

Ferga Grant, one of the volunteers from the Women's Action Group later gave up her job as a secretary at Shannon Airport to become the first paid administrator at the clinic in 1978, at less than half of her former salary. Grant, Chappell, and Jan Tocher were crucial to the running of the clinic.

For the GFPC founders, their motivation also sprung from a combination of personal and professional experiences and indignation at the social injustice of the situation regarding contraception in Ireland. Brian Leonard, professor of pharmacology at UCG, recalled, 'There was a group of us who felt, well, look, this is completely unacceptable, it's inhuman. We got together, first of all, just a small group to discuss, "Well, what can we do?"' Leonard believed that 'I think that, as I said, a group of us just felt that, well, maybe this is something we could tackle and do something about. Have some practical value. Which it did, but it

⁵⁹ 'Cork family planning clinic', *Evening Echo*, 4 February 1975, p. 5.

had to be going in stages.’ Pete Smith, a lecturer in biochemistry at UCG, felt that his motivation came from two areas:

One was an obvious concern for my friends and people I knew that they couldn’t get access but the other came from the fact that I was teaching. And I was teaching students about medical diseases. And every year I was standing in front of them and saying, right, these are the sexually transmitted diseases, and these are the ways not to get them and it’s illegal. You know? And this is sort of irritating me. So, anyhow, we sort of debated this issue with the people I was close to in the university, and it really came from those two routes. The interest in direct action and the feeling that this was an issue that had to be dealt with.

Evelyn Stevens’ motivation to get involved in the GFPC came partly out of personal experience. Stevens recalled her own disappointment in relation to *Humanae Vitae*. Like many other Irish men and women she had expected that ‘the Pope was going to say that people could use contraception. But he didn’t. It was very disappointing. But people really were ready to change. They wanted contraception.’ She further explained:

Yeah, I mean the whole thing about contraception was significant for me because of being married and because Emmet and I were both students, we didn’t want to have a baby, so my first experience was going to a doctor in Galway to get the pill and I was married but he wouldn’t give it to me because he said I hadn’t had a child and I had to have a child first before I could get the pill. So, that was that. Then I did, I knew medical students, so I got a prescription from a medical student, so that was illegal but anyway, I managed to get the pill. And then at a later point when I wanted to come off the pill and ... I mean there was no other contraception available, but I wanted to come off the pill and then I wanted to get condoms and I became aware of Family Planning Services in Dublin and their postal service. So, I was involved with them on a very personal basis.

Mary Fahy, who had trained as a nurse in England didn’t think twice about her decision to work at the clinic as their first nurse. She said: ‘I didn’t even think about it. My head must have been on in a different direction. I don’t know, I just thought it was ... I suppose having done midwifery in England, we always had a family planning, there was a family planning section to the outpatients so it just seemed normal’. Dorothea Melvin was later taken on as an administrator for the clinic, thanks to a loan from FPS. Melvin became involved in the clinic because ‘I just felt that it was wrong, that there was something wrong with a society that didn’t allow couples or women, single women, I wasn’t fussed about whether they were married or not to make that decision for themselves.’

Anne Connolly, who established the WWC, was inspired by ‘the idea of having a centre where women could go for a whole range of contraceptive services, but more broadly, sexual health supports which didn’t require a medical filter’ and was coming from ‘a strong campaigning point of view’.

Connolly was just 23 years old at the time, and was faced with quickly developing skills in a range of areas relating to the running of a clinic.

6.3 Challenges

The opening of the clinics was not a smooth process and founders faced a number of challenges from their local communities. The CFPC, for instance, was condemned from its opening by the bishop of Cork and Ross, Cornelius Lucey. A letter was read out at all masses in the diocese on Sunday, 9 February 1975, informing the public that the clinic had opened on Tuckey Street. The letter drew attention to the fact that there were already services available through the Catholic Marriage Advisory Service and the Ovulation Method Advisory Service which would advise on natural methods in accordance with Catholic teaching. The letter also highlighted that the founder of the clinic, Dr. Edgar Ritchie was not Catholic and that artificial methods of contraception were ‘morally wrong’.⁶⁰ Indeed, Lucey’s letter might have inadvertently proved a boon for the clinic in promoting its services. Writing in 1975, David Nowlan of the *Irish Times* suggested that ‘the relatively high demand for services (About 50 couples have been advised in the first three weeks of the clinic’s existence) may in part be the result of the fact that 97% of the population of Cork were told one Sunday morning where the clinic was and what services it provided. It may also reflect a genuine need, increasingly felt, for the means to control fertility with methods more effective than those that Dr. Lucey would endorse’.⁶¹ Nevertheless, Lucey continued to condemn the clinic. In May 1975, speaking after the confirmation of 500 children in the south and middle parishes in Cork, Lucey again drew attention to the fact that Dr. Ritchie was not a Catholic doctor, emphasising that the contraception provided by the clinic was irreconcilable with Catholic principles.⁶²

Like the Cork clinic, the LFPC faced opposition from the local church hierarchy. Bishop of Limerick, Dr. Jeremiah Newman, was interviewed on RTÉ television in summer 1975. He stated his opposition to the clinic, arguing that the demand for contraception would lead to demand for abortion and euthanasia.⁶³ In August 1976, Newman again spoke out against the clinic. Councillor Jim Kemmy was not afraid to challenge Church hierarchy on the issue. Speaking at a function in September

⁶⁰ ‘Bishop’s letter on family planning clinic’, *Evening Echo*, 10 February 1975, p. 5.

⁶¹ ‘Business as usual’, *Irish Times*, 5 March 1975, p. 10.

⁶² ‘Bishop opposes Cork family planning clinic’, *Irish Times*, 16 May 1975, p. 4.

⁶³ ‘Dr. Newman comments’, *Limerick Leader*, 2 August 1975, p. 1.

1976, he stated, 'it is regrettable that the bishop appears to lack compassion and an understanding of the plight of countless couples suffering psychological frustrations and insecurity by trying to bring up too many children on inadequate incomes'. In Kemmy's view, the role of women had changed and women 'are no longer content to be relegated to a lesser role in marriage and in society generally, and they are increasingly regarding sexual intercourse as an expression of personality and a physical pleasure, rather than a mere means of human reproduction.'⁶⁴ Kemmy stepped down from the role of chairman of the LFPC committee before the 1977 election because of suggestions that he was using the clinic for political gain. Because the clinic only dealt in non-medical contraceptives, a doctor was not yet needed but he hoped that one would join the clinic.⁶⁵ Another limitation was that the local newspaper, the *Limerick Leader*, refused to accept advertisements from the clinic.⁶⁶ While the clinic often made front page news on the newspaper, it was often referred to as 'pill clinic' rather than given its full title.

Plans for the GFPC also faced backlash from their inception. In February 1976, the UCG Students' Union nominated the fledgling GFPA as the beneficiary of its rag week fundraising; the sum of £1,000. This proposal caused outrage; fifty local residents including then mayor Mary Byrne wrote a public letter to the UCG Students' Union, the three local newspapers editorialised against the allocation of the rag week money to the Galway Family Planning Association and the Students' Union was forced to debate the resolutions.⁶⁷ Concurrently, Galway corporation unanimously passed a motion condemning Mary Robinson's family planning bill. A member of Galway Corporation, Alderman Sheila Jordan, publicly declared her complete opposition to the plans to set up a clinic. Jordan appeared to have issue with the distribution of 'contraceptives to just anyone who asked for them. Only a doctor should judge whether a person should get them or not. A good bit of old-fashioned self-denial is the greatest thing going'.⁶⁸ In response, a spokesman for the GFPA, stressed that the main aim of the clinic was 'to advise and help in family planning. Contraceptives will, however, be available to anyone who wants them, but a doctor will be constantly available to give advice'.⁶⁹ After a heated debate, a vote was taken and 417 students voted for the rag week money to be given to the Samaritans and 379 voted for the money to be given to the GFPA.⁷⁰ The proposals to set up a family

⁶⁴ 'Bishop lacking family planning 'compassion', *Irish Times*, 4 September 1976, p. 11.

⁶⁵ 'Storm hits', p. 5. ⁶⁶ 'Contraception 1979', *Irish Times*, 5 January 1979, p. 8.

⁶⁷ Cunningham, 'Spreading VD all over Connacht'.

⁶⁸ 'Family plan clinic query', *Connacht Tribune*, 6 February 1976, p. 2. ⁶⁹ *Ibid*.

⁷⁰ Cunningham, 'Spreading VD'.

planning clinic were also met with passionate debate in the letters pages of the local newspapers. Writing to the *Connacht Tribune*, Michael Heneghan from Ballybane criticised ‘those faceless, nameless, gutless doctors and others who belong to and are ready to promote Galway Contraceptives Centre’ and argued that ‘wherever contraceptives have started abortion has followed’.⁷¹ Frank Wynne, from Wellpark, on the other hand felt that ‘the decision of UCG students to withdraw their contribution from the Family Planning Association, must be a lamentable one. So much for the benefits of an academic education’ and alluded to the problems brought on by unplanned pregnancies.⁷² One of the few local politicians to support the GFPC was then Labour Senator and UCG lecturer, Michael D. Higgins, who had supported Mary Robinson’s Family Planning Bill in the Senate in 1974, arguing that access to contraception was a civil right.⁷³

In April 1976, the GFPA organised a seminar on Family Planning at the Ardilaun Hotel. The speakers included Michael Conlon, Dr. Paul Dowding from TCD, and Dr. George Henry and Máire Mullarney from the IFPA.⁷⁴ The meeting attracted about a hundred attendees as well as a small number of opponents to artificial contraception, including Deirdre Manifold.⁷⁵ As John Cunningham has noted, in addition to the opposition at the public meeting from lay Catholics, the rag week controversy ‘stirred influential opponents into action’, with the Catholic Marriage Advisory Council devoting more space in local newspapers to the Billings method. Deirdre Manifold set up her own Billings centre in Galway city centre in spring 1977.⁷⁶

Public discussions of the issue of contraception could also turn heated. Frank Crummey (FPS) recalled giving a talk with Dr. Paddy Randles (who had founded the Navan Family Planning Clinic with his wife Dr. Mary Randles) at Moyle Park School Hall in Clondalkin. Crummey explained that the school principal, Brother Eamon, a Marist brother, was at the meeting but ‘shall we say, wasn’t friendly’. One of the attendees at the meeting was Mena Cribben, a prominent conservative campaigner, who sat in the front row. Crummey recalled the event as follows:

Anyway, I was speaking and I said something, whatever I said. Mena Cribben jumped up and said ‘I have six children’ and something, something, something, and started attacking me. I didn’t give a shit, but Paddy mumbled to me ‘they

⁷¹ ‘Views on family planning’, *Connacht Tribune*, 20 February 1976, p. 10. ⁷² *Ibid.*

⁷³ Family Planning Bill, 1973, Second Stage (resumed), Seanad Éireann debate, 21 February 1974, Vol. 77, No.3.

⁷⁴ ‘Plans for Family Planning Clinic’, *Connacht Tribune*, 9 April 1976, p. 2.

⁷⁵ ‘Views on family planning’, p. 10. ⁷⁶ Cunningham, ‘Spreading VD’.

must have been virgin births'. [...] And she fuckin' heard him. So she threw the table on top of us. There was total bedlam. When Brother Eamon ran up, he said 'I may not approve of you, but I don't approve of violence either'.

Crummey's account here, while humorous, illustrates how divisive the contraception issue was, and as the next chapter will also show, meetings organised by women's groups on the issue were also frequently disrupted by anti-contraception campaigners.

Most of the clinics struggled with finding a premises, legal representation and a doctor. In the case of the FGC, finding a solicitor to represent the group proved challenging. Dermot Hourihane asked two school friends who were working as solicitors in Dublin but:

Neither one would touch the case. They said, 'My firm doesn't do criminal cases. This would be a crime.' I was absolutely horrified. I still am. They were very nice people to meet and I would have agreed with them and a lot of what they viewed ... They were terrified of the consequences and I didn't have the same feeling.

Solicitor Raymond Downey eventually came on board and the group set about trying to find a premises for the new clinic. Accessibility and client privacy were key concerns. Many landlords were reluctant to rent their spaces to the group when they were told about the clinic's purposes, however, a premises was eventually found at 10 Merrion Square.⁷⁷

The GFPC experienced similar challenges in finding a premises and doctor. According to Pete Smith 'we were advised by a solicitor that the landlords of Galway would respond to money. So, if we paid over the odds, we'd get a place. And he was right'. A clinic premises was secured on Raleigh Row, a disused leather shop, but the owner had a change of heart when he received a petition from 284 local residents in the St. Ignatius parish.⁷⁸ However, the solicitor, Leonard Silke, had copper-fastened the contract and the GFPA were able to argue that the contract needed to be honoured.⁷⁹ The clinic finally opened on 21 July 1977.⁸⁰ The Raleigh Row premises was above an auto factors shop and was chosen, according to Brian Leonard, because it was 'very discreet, which of course we selected deliberately'. The next challenge was finding a doctor. According to Pete Smith 'I think doctors were nervous about being out there as the doctor who did that'. John Waldron, a GP from Tuam was recruited. Smith stated 'John was a particular person. He had very strong feelings and I say he was a particular person, so he was

⁷⁷ Solomons, *Pro-Life?* p. 28. ⁷⁸ Cunningham, 'Spreading VD'. ⁷⁹ Mary Fahy.
⁸⁰ Cunningham, 'Spreading VD'.

characteristically ... he was prepared to do it because he would be more capable of standing up to that kind of pressure’.

Ferga Grant explained how the LFPC also struggled to find a doctor: ‘One of the first jobs I had, I began a kind of a ring around of doctors and I did meet some opposition there from doctors who kind of said ‘Well I don’t really want to get involved in family planning in Limerick’’. Cathie Chappell concurred: ‘There was no doctor in Limerick that would touch us with a barge pole. They thought they would be ruined if they did’. The women organising the clinic got in touch with the IFPA and ‘they would send down doctors to us. So, we started doing the weekly clinic and then a twice-weekly clinic and built it up that way’. The clinic eventually recruited Dr. Philip Cullen as its first Limerick-based doctor. Dr. Cullen had graduated in 1975 so was a relatively young doctor when he joined the clinic. Cullen did not have qualms about getting involved. He explained:

I didn’t have any particular religious concerns about what was going on or whether it was lawful or not. I’m not from the Roman Catholic persuasion myself, I was brought up under the rules of the Church of Ireland. So, I was never particularly concerned about what they said in Rome, or they said in Dublin, or what they said anywhere else.

The WWC also had issues recruiting doctors. According to Anne Connolly, two of the originally recruited doctors were told by an eminent member of the Irish medical profession that working at the centre would be detrimental to their careers, and they pulled out. Moreover, some doctors had issues with the women-centred ethos of the clinic, which in Connolly’s words ‘was around empowering the woman at the centre of it’. This approach meant that women were ‘handed their chart so they read it in the waiting room’ and that stirrups were not used during the examination process. Attendees at the clinic were also referred to as ‘clients’ rather than ‘patients’ and were encouraged to call the doctors by their first names. Connolly explained ‘that meant a number of the doctors were saying “this is not for me”’.

The clinics also faced backlash from protestors. The postal service set up in the home of Evelyn Stevens and Emmett Farrell in Galway was targeted by anti-contraception protestors, including Deirdre Manifold. Evelyn Stevens recalled the personal impact these protests had on her:

She came and said the rosary on our front garden in Ardilaun Road. It was very ... and plus, I mean even worse than that, you know, that was a bit tricky. It was terraced houses, you know, all the neighbours could see what was going on. But she said ... I mean when I met her she said, ‘Your father would turn in his grave if he knew what you were doing’. It was horrible and very personal. Very difficult. That was painful.

In addition, Stevens faced pressure from family members, such as her mother who had heard that she was 'giving out condoms to 13-year-olds'. Frank Crummey also recalled personal backlash as a result of his work with FPS:

Oh, I mean it was horrendous. People shouted at me in the street at one time. The same way as they did about INFORM against corporal punishment. I was against the bishop, shouting, biting the hand that feeds you. Also, I used to visit an aunt of mine who was not married, she was a lovely aunt, one of my favourite aunts, and she could never look at me again. She would always speak directly to Evelyn [his wife] if she wanted to tell me something, because I was undermining everything she had stood for.

Conservative campaigners also organised pickets outside clinics. A group of men and women, led again by Deirdre Manifold, used to pray the rosary outside of the GFPC in its early years. Dorothea Melvin recalled:

Every time they had the clinic open, they were parading up and down outside with rosary beads and all manners of things and just saying that we were going ... telling us that we were all going to be off to hell in a handcart kind of thing. But on the other hand, I got so used to it after a while that it didn't bother me.

Similarly, Mary Fahy remembered:

... they carried a big statue of the Blessed Virgin and they carried that up and down outside and they'd stay for about an hour, hour and a half, walking up and down saying the rosary. And the women used to come in, they'd wait till they went down Palmyra Avenue and then the women would skip in and up the stairs, and then they'd have to wait until they turned back in that direction again and nip out.

Melvin was concerned about the impact that protestors would have on the clients at the clinic and that the protests might 'put people off coming to the clinic'. She felt that clients 'had to be very stiff of purpose if you were a patient coming in there' with the protestors outside. Brian Leonard faced an unpleasant personal attack when one of the leaders of the protests at the clinic found out where his teenage daughters went to school and contacted the school principal to let her know that the girls' father was 'behind the anti-Catholic family planning clinics, in Galway'. However, according to Leonard, the school principal said it had nothing to do with his daughters. In spite of the initial backlash, the GFPC soon grew and expanded its services. By the 1980s, it offered vasectomies, smear tests and sexual health screenings. It also evolved into a training clinic.

There were occasionally some quiet protests outside the LFPC. Dr. Philip Cullen recalled:

But I do know we used to get paraded outside the clinic from members of various organisations, like maybe the Legion of Mary, and things like that, they used to come and walk up Mallow Street with placards on a Saturday morning and pray for the wrath of God to fall down on us all. But apart from just waving out the window, it never bothered us, and it certainly never bothered me. [...] But I suppose we were conscious that this was out there, but it didn't really ever bother us. We never came to blows with people. They used to make their quiet protests, and that was about as far as it went.

Máire Mullarney, a founder member of the IFPA, also commented in her memoirs that 'We rather expected to be picketed by the conservative Catholic group "Maria Duce", to have bricks thrown through the window, even go to jail. Nothing of the sort happened'.⁸¹ Interestingly, this and Cullen's testimony reflect the expectation shared by many of the family planning activists that there would be significant protests but that these did not materialise.

The WWC was picketed by anti-contraception protestors for the first two Tuesdays it was open.⁸² The four picketers were from the groups Parent Concern and Mná na hÉireann and carried placards with slogans such as 'Contraception means promiscuity and abortion'.⁸³ This publicity, however, had a positive impact in getting the word out about the centre. Connolly stated that she had tried to encourage the press to publicise the opening of the clinic to no effect, but the picket outside the clinic 'was what saved us. So we just rang all the media, and within 10 minutes the media were outside, flashing away, and we were front page the following day. So, but we wouldn't have got that if it hadn't been for them'. Connolly's involvement in the WWC, however, had a significant personal impact. She told me, 'It was very difficult. It was very, it was very tough on, on both my parents'. She further elaborated that it was 'very, very tough on them because there was, you know, some of the profile publicly was, was pretty rough. A lot of their own peer group, you know, would have been very critical. And they were getting it, in the neck, and ... But at some level, my father in particular, who was a more rational person, would have said, you know, "It is better you, you lead ... you do what you think is right and you live by your principles". So, he would say that he admired that. Even though he found it very... He found it very tough'.

⁸¹ Mullarney, *What About Me?* p. 164.

⁸² 'Are you Well Woman?' *Rebel Woman*, c.1978 [Attic Press/Roisin Conroy archive BL/F/AP/1139/24], no page number.

⁸³ 'Family planning clinic opens to picket protest', *Evening Press*, 18 January 1978, p. 25.

6.4 Personal Risks

Founder members of the clinics took serious risks. In the early years of the FGC, clinic staff and supporters smuggled contraceptives back from England.⁸⁴ Yvonne Pim was one of the 'contraceptive couriers'. She explained:

I used to go on a regular basis over to the UK with my husband. He had a young business in air freight, and he had reason to go across to London from time to time. At that stage, Aer Lingus, because they were still in the early days, they were offering half-price spouse fares. So, if your husband's going abroad, you can go for half price. I managed to do that, and goods were delivered to my sister's house in Fetcham, in Surrey. I brought them back with my husband.

Pim believed that had she been caught, 'it would have had serious consequences' for her husband's business. She recalled business colleagues of her husband's advising him "You're going to have to stop Yvonne being involved in this kind of thing. It's not good for business". Because our names and addresses were on the front of all the papers'. But Pim felt:

I had nothing to lose, I thought, at that stage. I was just so fired up with the enthusiasm for doing this. So, we went through with that, we brought back the goods.

Following the High Court decision after the McGee case in 1973 that the import of contraceptives was a matter of marital privacy, the IFPA had more freedom to import and distribute contraceptives and developed a growing postal service to distribute condoms to clients who were unable to travel to the clinic in person.⁸⁵ The CFPC also received supplies from contraceptive couriers. Edgar Ritchie explained 'people would bring back supplies, devices and inter-uterine devices and so on who had visited England.'

Similarly, in the early years of the contraceptive postal service in Galway, supplies of condoms were obtained from FPS in Dublin. Following the establishment of the GFPC, Brian Leonard arranged import of condoms and IUDs. Leonard had condoms posted to his daughter's address in England: 'I arranged, through some of my pharmaceutical industry contacts, because I'd been working in industry, to supply, send condoms, to her address. One way to get condoms in was going over, with a case, and pick them up, hoping that the customs wouldn't stop you over'. Leonard also had IUDs sent to his daughter

⁸⁴ Solomons, *Pro-Life?* p. 31.

⁸⁵ *IFPA Annual Report, 1974*, pp. 2–3.

and explained that he would ‘smuggle them in, in luggage, covered up, and all the rest of it, and hopefully the customs wouldn’t open the case’. Frank Crummey explained to me how the FPS system of importation operated: ‘We imported from London Rubber, and they sent their shipment to Portadown, in the north of Ireland, to a house of a friend obviously, and every second Saturday it was my job to go to Portadown and to smuggle them over the border’. Crummey did not recall running into any difficulties with this, except for one occasion when he was stopped at a security checkpoint on the way back from the north and questioned about the forty thousand condoms in the boot of his car. Crummey replied, ‘They are for my own personal use’ and was told by the police to ‘Have a nice weekend’.

All of the respondents involved in the early years of the clinic were asked about whether they had concerns about it being raided or that they might face prosecution. This question was often met with humour. For example, Dr. Edgar Ritchie (CFPC), replied, ‘No, no. (laughter). We kept in touch with the appropriate Minister for Health who was called Charlie Haughey at that stage [July 1977-December 1979] and his staff. So, there was goodwill there’. The LFPC activists were anxious about the threat of raids in the early years of the clinic. According to Cathie Chappell:

so we would bring things back to our houses and we would stock the medical supplies, the condoms, all that stuff would be in our houses in case we got raided. We never did get raided but there was that threat hanging over us at one time until we began to realise, you know, nobody’s ever going to shut us down. So, we kind of relaxed a bit then. But in the early days it was a bit fraught, it was.

However, Chappell admitted that, like other family planning activists, ‘I don’t think we really thought seriously about the consequences of what could be. We just did it because it had to be done. It was no big deal kind of thing and yet at the same time we did know that we were providing a really essential service.’ In May 1979, seven members of the LFPC group set up a stall in Shannon town centre where they sold non-medical contraceptives. After almost two hours, the Gardaí arrived and confiscated £86 worth of goods. When the group asked the Gardaí what law entitled them to confiscate the contraceptives, they were told ‘ye know that better than we do’.⁸⁶ Chappell recalled the incident:

We went out to Shannon for some reason and we set up a stall. We were doing this deliberately and we were selling – well, donating with contributions – very openly in the street, in the shopping centre there and the Guards came and they

⁸⁶ ‘Around the country; Limerick’.

took all our stuff. And we thought oh, God, we're going to go to jail. We didn't really think very seriously that it was going to be actual jail. But there was a time when we thought, you know, maybe we could actually go to jail.

Respondents felt that Gardaí turned a blind eye to the clinics. Mary Fahy (GFPC) explained to me 'It was a nod and a wink. Like the law said you shouldn't be operating but highly unlikely that anybody would ever raid us or stop us'. Similarly, Pete Smith (GFPC) recalled, 'I mean we moved from there to another premises and I remember being in those premises minding the shop more or less when the Guards raided us. Nothing happened. A couple of Guards went around, saw everything we'd got, we had shelves full of, you know, a full range. And they did nothing'.

Some of the activists would have welcomed prosecution. Ferga Grant (LFPC) felt 'we would have gladly, you know, gladly have been arrested, as we always said. But we kind of, we felt I think that the authorities were a bit clever I think they knew that if they did this, they would give us, you know, publicity which they felt, probably, that we didn't deserve or need'. Similarly, Anne Connolly (WWC) felt that the police did not prosecute because 'on some level, somewhere, people were being sensible, and realised that we would have relished the day in court and it would have given the profile we wanted to increase awareness and that it would do more harm than good to prosecute'. Because the other clinics had already demonstrated that the law on contraception could be flouted, Connolly had no concerns about prosecution. However, she felt that the WWC was more radical and that it made some of the other clinics uneasy because 'we were very explicit about the fact that you did not have to be married [...] we went in there, you know, very clearly communicating 'This is contraception for everybody''. Connolly also felt that 'we were fairly confident we were okay referring people for abortion because this was before '83'. In fact, Connolly's interactions with the police were largely positive and described with humour. She explained:

So, we had a very large mail-order service and, the guards, every so often, would come down. There was a guy in the vice squad in Dublin Castle. He used to come and visit every so often, and he was just so nice. And he, he'd sit down in front of me, he'd raise his eyebrows to heaven, he'd say, 'I have another complaint here'. And he'd laugh, and I'd laugh.

6.5 Clients and Medical Authority

The history of the early family planning clinics also highlights interesting tensions around medical authority. Lay volunteers played an important

role in the early years of all of the clinics. In relation to the FGC, four doctors, Michael Solomons, Jim Loughran, Joan Wilson and Anne Legge, took it in turns to attend the one hour sessions on Tuesday and Friday evenings, accompanied by Máire Mullarney, Yvonne Pim and two lay workers, Nora O'Laoghaire and Betty Young.⁸⁷ Cecelia Homan, who volunteered as a lay worker at the clinic in its early years, joined the IFPA because she felt 'that it was important that women should have the means and the right to decide on the number of children they have'.⁸⁸ The lay workers had an important role in reassuring and meeting new clients to the clinic and also noted their addresses and family sizes.⁸⁹ Recalling her work at the clinic, Yvonne Pim (IFPA) stated:

That was great fun because we worked obviously with the patients coming in, and of course some of them coming in may be coming in with a sister or somebody, not knowing what was going to happen. It certainly was quite extraordinary. They didn't have to pay then for their contraceptives, so they just paid for their consultation. They were all delighted. There were well-known people crossing our doors as well. Took a while for them obviously, because of where we were situated, which was Dublin 2.

Both the Galway mail order service and FPS relied on posting condoms to individuals around the country. By 1974, FPS volunteers realised that they had to take on medical staff in order to develop their services. In 1975, the services of FPS were expanded to include medical contraception, and a clinic was opened in April of that year to offer a complete family planning service.⁹⁰ The postal service in Galway also operated for a few months before the group realised that there was a need for a clinic service or involvement from a medical professional. According to Pete Smith:

And then we started to get into what we thought was a problem. Partly it was obvious that we were only dealing with condoms. We couldn't deal with the coil, we couldn't do diaphragms, we couldn't do the pill. That was one thing. But the other was that we were getting worried about some of the letters. We got not just applications for supplies, but those frequently had letters associated with that. And you started to read some of those letters and you thought I'm not certain just sending something back in the post is the correct response. There was a greater need there. So, we said, right, we've got to move from this postal service – which at that stage was working quite well, it had good turnover, you know – so we recontacted the other group in Galway.

⁸⁷ Solomons, *Pro-Life?* p. 28.

⁸⁸ 'Dedicated to a cause', *Woman's Way*, 10 November 1978, p. 11.

⁸⁹ Mullarney, *What About Me?* p. 164. ⁹⁰ Bolt, 'Who's who', p. 7.

In the early years of the GFPC, clients were counselled by lay volunteers about their options. Pete Smith explained the rewarding nature of this work:

And that's probably the best teaching I did in my life was sitting down with these women explaining to them what options they had and this was exactly the information they wanted. We used to do this talk before they saw the doctor and said this is the pros and cons, disadvantages and advantages of each of the methods available. I enjoyed it tremendously, you know?

However, the clinic soon transitioned to what Brian Leonard described as 'much more of a sort of professional thing, rather than a very amateur volunteer-type organisation'. The movement to a more professional, medical model helped to further legitimise the clinic but was a source of disagreement among the original founders. Evelyn Stevens stated, 'we were very keen to have as many laypeople as possible involved. It was a kind of an almost peer support so there were quite a lot of volunteers. [...] And the volunteers used to come in and do sessions where they'd talk to people that came in and provide the information that they needed and then if they needed to see the doctor, they'd get an appointment'. This contrasted with doctor John Waldron's view, with Stevens stating that he 'was of the opinion that this needed to be a doctor-led service, that it should be a professional service'. According to Pete Smith, 'We ... I think I had anyhow, a very strong feeling that the clinic should be client rather than medical driven. I didn't want it to be another place where women were told what they could do. I wanted a place where women could come and get what they decided they needed. That didn't survive. I lost that'. Smith left the clinic after two years. Likewise, Evelyn Stevens, who was also dissatisfied with the clinic 'squeezing out the volunteers' left in 1980.

The hard cases of women with low incomes who were unable to afford their children, were often put forward as an important reason for the clinics' existence. However, in reality, some of the clinics were not reaching women from lower income groups that they had originally envisaged would be the most significant clients. A report on the IFPA clinic in *Woman's Choice* magazine in 1970 explained it was not attracting individuals most in need of contraceptive advice. The magazine asked 'Where are the mothers-of-ten? The women whose large families tax their resources physically, mentally and financially: the women who have no particular religious convictions; who don't think about not having babies because having them is part of married life; because no one has ever said anything to them personally about contraception?'⁹¹

⁹¹ 'Ireland's only family planning clinic', p. 55.

Similarly, anti-contraception group the Irish Family League critiqued the family planning clinics in 1973, arguing that they did not 'cater mainly for the poor and for women with 16 children. They cater for people with better means than most.'⁹² Indeed, reflecting on this issue in his memoirs, Michael Solomons wrote that he 'regretted that the so-called 'blue card' holders, the majority of whom were working-class, were not turning up to any great extent'. He believed this was due to problems with the clinic's information networks but also 'revealed the extent to which conservative teaching continued to dominate people's lives'.⁹³

The IFPA also arranged a mail order service through the IPPF for condoms, spermicides and diaphragms. According to Solomons, small packages with hand-written addresses usually got past the customs officials, but larger packages containing spermicide were sometimes intercepted.⁹⁴ For patients who wished to use the diaphragm or cap with spermicidal jelly, these cost 8s plus 3s 6d for two tubes of jelly, and these were posted to the client's address.⁹⁵ In addition, doctors who were based in Northern Ireland and sympathetic to the aims of the clinic would drive to Donegal and post supplies such as spermicidal jelly from there to Dublin.⁹⁶ Women who required IUDs in the early years of the clinic were sent to the Royal Victoria Hospital in Belfast to have this fitted free of charge but were asked to make a donation to the Northern Ireland Family Planning Association. A check-up was provided in Dublin a month after insertion and another year later.⁹⁷ By September 1970, following training provided by Joyce Neill from the Northern Ireland Family Planning Association, the clinics began providing IUDs.⁹⁸

A fear of being seen going into the clinic was a real concern for clients. Cathy (b.1949) for instance, explained:

I went on the pill a couple of months before I got married, and I used to go to the family planning clinic in Mountjoy Square. That's where they were. But I remember, I'd go to the door and I'd be looking over my shoulder before I'd go in, making sure nobody saw me. Because I told nobody I was on it.

Cathy's account is not unusual. However, the bravery of women like her in taking control of their fertility, helped, in Yvonne Pim's view, to push the movement forward:

⁹² Irish Family League, *Is Contraception the Answer?* p. 15. ⁹³ Solomons, *Pro-Life?* p. 30

⁹⁴ *Ibid.*, p. 31. ⁹⁵ 'Ireland's only family planning clinic', p. 55.

⁹⁶ Solomons, *Pro-Life?* p. 31. ⁹⁷ 'Ireland's only family planning clinic', p. 55.

⁹⁸ Solomons, *Pro-Life?* p. 33.

They felt the conscience was certainly pricking them if they had any thoughts at all about controlling their fertility. They struggled with their consciences to get involved, but through the family planning clinic, people did bit by bit.

While some anti-contraception groups claimed that family planning clinics such as the IFPA were money-making ventures, it is clear from their accounts in the early years that their profits were marginal. Indeed, the clinics would not have survived without the financial support of the IPPF.⁹⁹ For instance, in the period from February to December 1970, the FGC made a total of £10,772 in income, with £7,389 of this comprising patients' contributions and £3,000 comprising a grant from the IPPF. Their expenditure came to £11,040, which in addition to £256 depreciation meant that they had a profit of just £534 for that year.¹⁰⁰ Indeed, in 1974, the IFPA reported that in the spring of that year, they had been unable to meet the salaries bill and without the grant of £3,000 from the IPPF, the organisation 'would have been bankrupt'. This financial situation was attributed to escalating costs of post, heating and lighting as well as clinic supplies and printing.¹⁰¹

The clinic could not advertise its services, however, a large number of clients found out about its existence through word of mouth, mention in the press, and from GP referrals.¹⁰² In 1971, a total of 4,912 patients were seen at the Merrion Square Clinic, with 1,907 seen at Mountjoy Square. 2,182 of these were new patients. The majority of patients came from Dublin city (1,371) and Co. Dublin (377), however, there were patients from all of the 26 counties of the Republic, as well as 1 person travelling from Co. Fermanagh and one from Co. Tyrone. 80.9% of new patients at the Merrion Square clinic were married and 19.1% were single while at the Mountjoy Square Clinic, 90.1% were married and 9.9% single.¹⁰³ Of new patients at Merrion Square, 33% were in the 20–24 age range and 31.2% in the 25–29 age range, while at Mountjoy Square, 30% were in the 20–24 age range and 31.6% in the 25–29 range. At both clinics, the largest percentage of new clients had no children (28.8% at Merrion Square and 21% at Mountjoy Square), with 15.8% of new clients at Merrion Square and 12.9% of clients at Mountjoy Square having 1 child at the time of their first visit. The statistics relating to the

⁹⁹ For example, the IFL claimed that the family planning movement was 'a sordid business, involving money, big business, and new vistas for medical careers.' 'Breaking the law', *Irish Press*, 25 July 1973, p. 8.

¹⁰⁰ Fertility Guidance Company, *Annual Report for 1971* [IFPA Archives].

¹⁰¹ *IFPA Annual Report*, 1974.

¹⁰² 'The Dublin clinic that defies convention', *This Week in Ireland*, 7 November 1969, p. 23. Courtesy of Susan Solomons.

¹⁰³ Fertility Guidance Company, *Annual Report for 1971* [IFPA Archives], p. 3.

clinic clearly illustrate the urban-rural divide and that the most clients were young, urban-based women, the majority of whom had no children.

Irene (b.1942) from the rural south-east, recalled women she knew travelling to the family planning clinics in Dublin for contraception because access was limited in her area, but also for purposes of anonymity:

When I was living here then, I knew after a few years, people going up to ... because there was nobody in town. So women were going up to Dublin for the coil and stuff. Do you know what I mean? Some people went up because the husbands wouldn't know anything about it. Honestly.

The existence of the family planning clinics also meant that women did not have to ask their GPs for contraception and face the possibility of refusal. Judith (b.1950) told me 'They didn't want to go to the doctor and ask. In case the doctor said no'. Judith went to an IFPA clinic to obtain the pill instead because 'You knew you were getting it in there'. While she felt there was a possibility that she could have obtained contraception from her GP, she said, 'I didn't know to go in and ask'.

By 1975, 30.0% of patients at Mountjoy Square were single, and 48.14% of patients at Syngue Street (formerly Merrion Square) were single.¹⁰⁴ In her report on the Syngue Street clinic in 1975, Nora Harkin suggested that this was due to the fact that 'today women in Ireland, as elsewhere, find it necessary to continue working after their marriage and therefore seek advice on family planning beforehand'.¹⁰⁵ By 1981, 48% of visitors to the Cathal Brugha Street clinic were single and 43% married while 46% of visitors to the Syngue Street clinic were single and 54% were married.¹⁰⁶ The 1980 annual report stressed however, that the 'single' statistic was misleading because 'many first attendees will have married by their second visit'.¹⁰⁷ However, what is clear is that by the mid-1970s, it was becoming more acceptable for clients to visit the clinic prior to marriage and by the late 1970s, numbers of married clients were almost equal to numbers of single clients.

A significant percentage of first-time clients at the IFPA were individuals wishing to plan their first pregnancy, rather than women who had experienced multiple pregnancies.¹⁰⁸ While discussions of 'hard cases' such as of women who had experienced multiple pregnancies were clearly at the heart of public discussions around family planning in the 1970s in Ireland, the evidence from the IFPA suggests that these were not the women who were being served by the clinics; a pattern also

¹⁰⁴ *IFPA Annual Report 1975*, p. 9.

¹⁰⁵ *Ibid.*, p. 7.

¹⁰⁶ *IFPA Annual Report 1981*. No page number.

¹⁰⁷ *IFPA Annual Report 1980*, p. 12.

¹⁰⁸ See Appendix: Table 2.

borne out in some of the other clinics. For instance, in the case of the Navan clinic, the majority of clients were women in their early twenties who were about to marry, just married or married a short time with one or two children.¹⁰⁹ Oral history evidence from staff at the other clinics suggests similar patterns in relation to clients.

The majority of new clients at both IFPA clinics came on the recommendation of a friend, with the second largest number of clients finding out about the clinic from women's magazines, newspapers and the media. Smaller numbers were referred to the clinic by hospitals and family doctors.¹¹⁰ Female-centred forms of contraception were the most popular methods, particularly the pill. Male-centred forms of contraception such as condoms were less popular at the Irish clinics. Similar patterns occurred at the other family planning clinics established later in the 1970s. In 1971, 47.1% of first-time visitors to the Merrion Square clinic and 48.0% of first-time visitors at Mountjoy Square were prescribed the pill. The cap was the next most popular (23.5% at Merrion Square and 20.2% at Mountjoy Square), followed by the IUD (15.2% at Merrion Square and 14.9% at Mountjoy Square), condoms (2.1% at Merrion Square and 6.4% at Mountjoy Square), the temperature method (3.5% at Merrion Square and 2.0% at Mountjoy Square). 8.6% of clients at Merrion Square and 8.5% of clients at Mountjoy Square were described as looking for 'advice'.¹¹¹

In 1972, there was a significant increase in clients choosing the IUD, (10% at Merrion Square and 25.1% at Mountjoy Square), with a decrease in clients selecting the cap. This increase in IUD usage was said to reflect 'the particular suitability of this method in the Irish situation'.¹¹² Over the next eight years, there was some fluctuation in the popularity of the IUD, but evidently, at the Mountjoy Square (and later Cathal Brugha clinic) which served a higher percentage of clients from lower socio-economic groups, the IUD continued to be popular.¹¹³

¹⁰⁹ 'Navan family planning clinic', *Family Planning News*, 1:1, (August 1975), p. 2.

¹¹⁰ 434 clients at Mountjoy Square and 524 at Merrion Square came to the clinic on recommendation of a friend, 128 at Mountjoy Square found out about the clinic through newspapers and women's magazines and 52 from radio and TV (no figure given for Merrion Square). 90 new clients at Mountjoy Square and 89 at Merrion Square were referred by hospitals, and 104 at Mountjoy Square and 137 at Merrion Square were referred by family doctors. *Fertility Guidance Company Annual Report for 1971* [IFPA Archives], pp. 5–7.

¹¹¹ Fertility Guidance Company, *Annual Report for 1971* [IFPA Archives], p. 4.

¹¹² *F.G.C. Annual Report 1972*, p. 4

¹¹³ As Necochea López has suggested, the IUD gave more control to the medical profession over women's reproductive choices, reinforced medical authority, and 'converged with the goal of international birth control organisations of arresting rapid

A study by Dr. Helena Watson looked at the medical and socio-economic characteristics of women who used the IUD, based on research on 130 first-time visitors to the IFPA Mountjoy Square clinic in 1977 who decided to be fitted with an IUD. Watson also acknowledged that 'the distance many are prepared to come for advice, or to be fitted with an IUD, also indicate high motivation', with 8.5% of IUD users travelling from Donegal, Mayo, Clare, Limerick, Cork and Kerry. She found that the majority of women being fitted with IUDs came from lower socio-economic groups: 35.4% of the IUD users had a medical card in contrast with only 8.9% of women given 'other methods'. Watson believed the IUD's popularity was because of the fact that 'once in place, it requires little further effort and expense on the user's part' and for women who were less mobile, the necessity of regularly renewing a prescription for the pill may have been a deterrent.¹¹⁴ As Chikako Takeshita has shown, the IUD had been developed by population control advocates in the 1960s with the discourse around the IUD positioning it as a contraceptive for the masses, while user-controlled contraceptive methods such as the pill or the condom 'were characterised as appropriate only for educated upper- and middle-class Western individuals'.¹¹⁵

The services of the IFPA expanded over time. By September 1970, women were no longer being sent to Belfast for IUDs and these were being fitted initially at the clinic in Mountjoy Square.¹¹⁶ The first vasectomies were conducted at the IFPA Mountjoy Square premises in the summer of 1974 by a female ophthalmic surgeon who had been flown into Ireland to carry out the procedure. Dr. Andrew Rynne also attended this as he had conducted vasectomies in Canada. Following this, Rynne was taken on by the IFPA to do three or four vasectomies per week.¹¹⁷

The other clinics also expanded quickly. For instance, in spite of the condemnation from the Church hierarchy, the CFPC also proved popular. In its first year, 800 first visits were paid by individuals from all over Munster and other parts of the country, an average of 60 people attending for the first time each month.¹¹⁸ By 1977, it was necessary for the clinic to move to a larger premises.¹¹⁹ The clinic also, in Ritchie's words, engaged in 'a good deal of sensible collaboration and that clinic

population growth in parts of the developing world'. Necochea López, *A History of Family Planning in Twentieth-Century Peru*, p. 91.

¹¹⁴ 'The case for IUDs', *Irish Times*, 3 September 1982, p. 10.

¹¹⁵ Chikako Takeshita, *The Global Biopolitics of the IUD: How Science Constructs Contraceptive Users and Women's Bodies* (MIT Press, 2011), p. 71.

¹¹⁶ Solomons, *Pro-Life?* p. 33. ¹¹⁷ Rynne, *The Vasectomy Doctor*, pp. 120–1.

¹¹⁸ '800 first visits to Cork Family Planning Clinic', *Evening Echo*, 6 April 1976, p. 7.

¹¹⁹ 'Family planning clinic is run by company', *Evening Echo*, 24 February 1977, p. 4.

provided what were called temperature methods, advice and so on. And we would have had one or two people come in to provide that advice who would be working in perhaps a Catholic clinic'. According to an early report on the clinic, men and women from surrounding counties such as Limerick, Tipperary, Kerry and Waterford, travelled to the Cork clinic and a large amount of correspondence from these areas was also noted. For clients who were unable to travel to the clinic, a postal service for non-medical supplies was available. Clients were primarily women in their early twenties, 'about to marry, recently married, or married a short time with a couple of children'. The report expressed concern that, as was the case with other family planning clinics, that there was a relatively small attendance from women who already had large families and women from lower socio-economic groups, or medical card holders.¹²⁰ By 1978, total patient attendances reached 3,772 for the year from February 1977 to February 1978 and medical card holders comprised 43% of new patients. From December 1977, the clinic was able to remain open five days a week.¹²¹ As with the other family planning clinics, the Cork clinic provided contraceptives to unmarried as well as married individuals, leading one writer to the *Evening Echo* in 1979 to query 'the number of young teenagers into whose hands these [artificial contraceptives] fall into'.¹²²

Again, and similar to the case of the Cork clinic, the LFPC quickly became popular in spite of Church condemnation. By October 1976, Jim Kemmy claimed that they had 150 enquiries per week, with about 50 coming from Co. Limerick and the remaining 100 coming from Limerick city as well as a few from Kerry, Clare and sometimes Galway. The clinic moved to a new premises on Myles Street that month as a result of an expanding service. Kemmy stated that the majority of the people visiting the clinic were 'in their thirties and married with families already'. At this point, the clinic still did not have the services of a doctor and about a third of their business was through the post.¹²³ The Limerick clinic, in contrast to the other clinics in Ireland, with the exception of the WWC established later, took a more feminist approach. Chappell recalled that the women involved in the clinic became known as 'Kemmy's Femmes', which perhaps highlights the continued association of Kemmy with the clinic and perceived hierarchies. In addition to becoming involved in the LFPC, members of the Limerick Women's Action Group were also involved in setting up the Limerick Rape Crisis Centre. Information on

¹²⁰ 'Cork Clinic', *Family Planning News*, 1:1, (August 1975), p. 2.

¹²¹ 'More attend clinic', *Evening Echo*, 4 April 1978, p. 7.

¹²² 'Contraception: Agrees with Mr. O'Connor', *Evening Echo*, 5 February 1979, p. 5.

¹²³ 'Contraceptives clinic moves', *Limerick Leader*, 16 October 1976, p. 1.

the clinic's activities was largely spread by word of mouth. The clinic initially started solely providing contraception but soon began offering other services such as smear testing.

The majority of clients at the clinic were women and they came from a range of social backgrounds. According to Ferga Grant:

There was a lot of rural people I remember, sad stories, people who had, you know, large families, didn't want any more children. [...] actually some women I remember telling me at the time, they had more opposition from their doctors than they had from their priests about using contraception, which surprised me.

Grant's testimony here is revealing in it further highlights the power and authority that the medical profession held over individuals' access to contraception at the time. Grant stated that as feminists clinic workers 'we would be saying, "Look, this is your body, you have a right to want to do this, you know."'

The LFPC did not just serve the Limerick city area but according to Cathie Chappell, word spread, and the clinics also served women from surrounding counties, including Clare, Kerry and Tipperary, who struggled to get contraception from their local GP.¹²⁴ Moreover, the clinic provided contraception to both married and single women and women were not asked about their marital status when visiting.¹²⁵ According to Dr. Philip Cullen, the pill, over the counter sales of condoms, and IUDs were the most popular forms of contraception. The clinic moved premises again in 1978 to Mallow Street and extended its hours to 16 hours six days a week as a result of increased demand. By this stage, the clinic was offering medical and non-medical contraceptives. From 1982, Dr. Cullen began providing a vasectomy service.

The GFPC also had a range of clients who travelled in from other parts of the west of Ireland. Evening sessions also facilitated some level of secrecy for individuals who had a fear of being seen going into the clinic. Melvin explained that 'the evening times were the times when local people came in. Under cover of darkness'. As with the other clinics, there was a real fear from clients about being seen. Richard (b.1954) who attended the clinic for contraception before he and his wife got married recalled his visit vividly and with humour:

It's strange but I can still remember going down to the family planning office. Kind of six months before we got married. You know, one of these kind of mile stones that stick out. You know. I mentioned it earlier. But, like, looking behind your back to see your, do I know anyone. (laughs).

¹²⁴ Cathie Chappell. ¹²⁵ *Ibid.*

Richard had a positive experience at the GFPC, explaining, 'It was very kind of open. And we were surprised. We thought that it would be much, much more, that they'd be much... but they were very, very open. Very informative. And provided lots of details on the options and all of that. And the implications'.

Word about the clinic soon spread. Mary Fahy recalled the Thursday evening sessions as follows: 'And you could hardly walk up the stairs to the clinic rooms because people would be ... girls, women everywhere. Very few men attending. But just so busy. People coming from all over the place in spite of Church teaching and stuff'. According to Stevens, Melvin and Fahy, the contraceptive pill and the coil (IUD) were the most popular forms of contraception in the early years of the clinic, although they also supplied diaphragms and condoms. In the early years of the GFPC, women who required sterilisations were sent to Dr. Edgar Ritchie in Cork, and later a vasectomy service was provided by Dr. John Waldron.¹²⁶ Smith recalled being surprised that few university students attended the clinic and that the majority of clients were married women who had children already, 'the typical person we saw were 30-year-old women with two children who didn't want any more'. Clinic workers often had to deal with difficult cases. Melvin recalled, 'it was shocking some of the stuff that came in the door. It took a while, not being social workers, not having the kind of training of a social worker, it could affect you quite profoundly'.

It is evident from the oral history interviews, that activists from all of the clinics viewed Irish women as being important drivers of change. These women were beginning to reject Church teachings and exercise their own agency over their reproductive choices. Evelyn Stevens told me:

and I think that was *the* most noticeable thing or most notable thing that most of the people that came in would have been from Galway and County Galway, specifically the west of Ireland and more than likely would have been raised as Catholics, but they just did not want to have more children or children for a certain period of time, so they were going to avail of contraception no matter what.

Similarly, Mary Fahy (GFPC) recalled a group of women from Connemara who had lived in England:

they all had their coils fitted and stuff like that when they came home and no place to have them changed or do anything about them. So, they used to come in, a carload of them would come in on the Thursday night or a Wednesday night and they were great, you know, they just didn't pass any remarks, they just thought it should be ... that's how it should be, that they were entitled to the service.

¹²⁶ Dorothea Melvin, Mary Fahy.

Yet, in her view 'for a lot of women, there was a huge anxiety about it being against the teaching of the Catholic Church. And that was the ... we weren't in a position to make those kinds of decisions for people. It was something they had to come to grasp or to terms with themselves'. Edgar Ritchie (CFPC) believed 'in practice the tide was flowing in the direction of taking responsibility, looking for ways of limiting their family and of course, in fact of ability to conceive and so on'. These testimonies suggest that many women were beginning to reject Catholic teachings on birth control and come to their own decisions on the matter.

Like feminist health centres in the United States, the WWC encouraged women to take ownership of their health and tried to empower women through the provision of information such as on, for example, self-examination of the cervix and breast examinations. An emphasis was placed on making the WWC a friendly and comfortable environment with Connolly recognising that, 'Many women are reluctant to attend GPs about these kind of matters and feel more confident coming to a centre where there is a confidential and specialised service'.¹²⁷ The waiting room of the WWC was designed to be welcoming, with one article describing 'its brown and cream décor, chrome easy chairs with brown corduroy upholstery, chrome and glass coffee tables, green plants and soft white net at the window' as well as a box of children's books, toys and games. Tea and coffee making facilities were also provided with Connolly noting that 'People tend to be nervous when they come to a place like this, and a hot drink sometimes helps'.¹²⁸ Indeed, Connolly found that large numbers of women came from other parts of the country to the Well Woman because they found it difficult to talk about women's health issues with their local GP¹²⁹

As with the other family planning clinics, WWC clients tended to come from the middle-classes; the fees were relatively expensive at £5 for a first visit and £3.50 for every other visit. The centre did not accept medical cards.¹³⁰ A critical view of the clinic was published in *Rebel Woman* magazine which stated that the WWC 'is more 'sophisticated' and indeed ruthless than the 'traditional' ones: it uses a 'hardsell' approach. No white coats here...but plush carpets and first names for doctors and patients.' The magazine also raised concerns that, in its view, 'it advocates strongly male and female sterilisation as a form of birth control – an attitude common to population control clinics in Asia and Latin

¹²⁷ 'Well Woman Centre opens in Dublin', *Irish Independent*, 16 January 1978, p. 8.

¹²⁸ 'Dedicated to a cause', *Woman's Way*, 10 November 1978, p. 12.

¹²⁹ 'Can you talk to your doctor?', *Irish Independent*, 26 April 1978, p. 6.

¹³⁰ 'Are you Well Woman?'

America'.¹³¹ In Anne Connolly's view, as with the other clinics, there was evidently a demand for the WWC's services. She told me, 'You know, women voted with their feet, they wanted to be able to access the service which was very pro-woman, which put as much of the decision-making as possible in the woman's hand'. Oral history testimonies suggest that women who attended the clinic viewed it in a positive light. Ger Moane (IWU), visited the WWC in her final year of university in Dublin. She explained, 'It was a positive experience, is all I can say. It felt bold, and it felt like a right in the one way that I was doing something for myself, and for us. All this liberation had obviously gone to my head. Yeah. I went to the Well Woman Centre, and got the pill. Went on the pill, did the whole thing. Had sexual intercourse, felt great about it. I remember leaving the Well Woman Centre feeling like, "Wow! I've grown up!" You know? That this is kind of a strong thing to do'. Similarly, Mairead (b.1953) stated, 'I remember the Well Woman Centre was great like, you would have all the information and stuff. And they would be very sort of, caring and things and supportive exactly, yeah'.

In addition to providing family planning services including vasectomies, the clinic also provided mail order contraceptives, information on STDs, pregnancy testing, advice and referrals for female sterilisation, smear tests, pregnancy counselling, and advice on the menopause and pre-menstrual tension.¹³² The centre referred women to BPAS clinics in the UK for abortions and also conducted pre- and post-abortion counselling.¹³³

Counselling in relation to unplanned pregnancy was also provided at other clinics in the era before the introduction of the eighth amendment in 1983. Dr. Philip Cullen (LFPC) recalled:

We would have said to people, okay, we'll arrange for you to have a termination in London, and in the clinic, we would have quietly made the necessary arrangements. But then of course, when the Eighth Amendment came along, you really couldn't do that, because you would have taken the risk of really being locked away if you did it.

Similarly, Evelyn Stevens (GFPC) also recalled counselling women in the late 1970s who were experiencing unplanned pregnancies:

that was a very tricky area, but there would have been people who came in who were pregnant and didn't want to be pregnant. And I would step outside the

¹³¹ 'The Battle of the Clinics', *Rebel Woman*, c.1978 [RCAPA, UCC, BL/F/AP/1139/24], no page number.

¹³² The Dublin Well Woman Centre leaflet, [RCAPA, UCC, BL/F/A/[1221/2].

¹³³ Anne Connolly, 9 December 2019.

clinic sort of thing and just on a one-to-one basis I'd just give them a phone number in England, because I couldn't do it really as per the clinic work and these people were desperate and I just had that bit of information so I passed that on to people. That was very difficult.

Stevens felt that 'I suppose, the advantage of getting it from somebody like me was that I ... I'd had contact with places, I knew that they were trustworthy and people had come back and said that they were trustworthy'.

The clinics were also involved in education around family planning. As mentioned in Chapter 3, the FGC published an educational booklet, *Family Planning*, written by Jim Loughran and Robert Towers in 1971. In addition, members of the organisation were involved in outreach activities. In 1972, Loughran gave lectures on family planning to the Dublin and North Wicklow branch of the Irish Medical Association, to senior midwives from the midwifery training hospitals and to final year students at the Royal College of Surgeons. Máire Mullarney presented lectures on family planning to more than twenty Ladies' Clubs in the Dublin region.¹³⁴ Frank Crummey and Pat O'Donovan (FPS) also gave regular talks to ladies' clubs.¹³⁵ In Frank Crummey's words, 'messengers were sent out on educational missions all over the country, to talk about contraceptive methods and choices'.¹³⁶ Moreover, an important element of the clinics' work was the provision of training in family planning. Edgar Ritchie (CFPC) felt:

really the important thing was training doctors out in the provinces and so on. How to advise people and that was I think the most important thing we did. In a sense that it was no longer something that was restricted to a few people in gynaecology or in family planning clinics, but right across the country. It could be taken up as a proper service both in method and advice by family doctors across the country.

6.6 Conclusion

The history of the Irish family planning clinics provides a number of important insights into the history of contraception. As scholars such as Cloatre and Enright have already shown, the clinics played an important part in challenging the law on contraception in Ireland. While oral history respondents felt that the risks of arrest or raids were minimal, or as Dorothea Melvin (GFPC) described it, 'We were a little bit afraid but not too afraid', it is still clear that they were taking significant risks through their involvement with the clinics, and in some cases this could have

¹³⁴ F.G.C. *Annual Report 1972*, p. 8.

¹³⁵ *Crummey v Ireland*, p. 100.

¹³⁶ *Ibid.*, p. 99.

substantial personal impact. It is evident that activists had a range of reasons for becoming involved in family planning activism, but often this motivation stemmed from personal experience. Many had a firm belief in responsible parenthood and contraception as a human right and as such positioned themselves within the wider international family planning movement. Networks were crucial to the development of the Irish family planning clinics. In particular, the IPPF was an important transnational network without which, the Fertility Guidance Company/IFPA would not have survived, while the Marie Stopes foundation in the UK was integral to the setting up of the WWC. Regular international meetings and financial support from the IPPF enabled the development of the IFPA clinics but arguably impacted on the direction of the services provided. National networks were integral in providing a sense of community and in exchanging support and advice among workers involved in the clinics across the country. While it was often not possible for clinics to publicly advertise their services, information on them was spread by word of mouth and protests by conservative campaigners arguably helped to publicise them.

It is evident, from oral history interviews and archival evidence, that women were predominantly the main clients of the family planning clinics. While all of the clinics eventually began to expand their services, female-centred forms of contraception such as the pill, IUD and the diaphragm, remained the most popular methods, in line with those being promoted by international family planning organisations such as IPPF. While the majority of clients were young, middle-class and urban-based, the clinics provided an important service, and travel from rural areas to the urban clinics for family planning advice was a common practice. Moreover, discussions about the clinics in the press helped to spark debate around the issue more broadly. The clinics were not just providing advice on family planning, and over time their services expanded widely. Additionally, several of the clinics also provided advice on unplanned pregnancy to women. It is clear also that the clinics became an important setting for the medicalisation of family planning in Ireland. Medical authority was essential in the cases of all of the clinics so that a full spectrum of contraceptive options could be provided, although the WWC attempted to negate this with a feminist health approach. Organisations such as FPS and the Galway mail order service which initially began providing non-medical contraceptives, soon realised the necessity of providing a full service. The cases of the Limerick and Galway clinics also reveal the tensions between grassroots activism and a more medical, professional model. Indeed, arguably, the involvement of medical professionals helped to give clinics more legitimacy and a more professional identity and meant that training could be provided.