

3 Birth Control Practices and Attitudes to Contraception in the 1960s and 1970s

Reflecting on the experiences of couples today and the impact that a lack of access to reliable contraception had for her, Siobhan (b.1942) explained:

I mean, the contraception thing ... it's a pity now, I envy ... I sort of, I would have loved to have known what it was like to have got married and have no children for five years. I would have loved that, and that's the one thing ... I shouldn't be having regrets, but that – I would have loved that. I envy the couples getting married now that can start ... I mean I would have loved that.

As outlined in the introduction, contraception was not legalised in Ireland until 1979, and even then, it could only be obtained for *bona fide* family planning purposes, or through a family planning clinic in an urban area. Some legal restrictions lasted into the 1980s and 1990s. For example, condoms could only be obtained on prescription until 1985 when the change in the law meant that they could be obtained over the counter in licensed premises such as chemists by individuals over the age of 18. Moreover, clear guidance and information on family planning was limited.

As the previous chapter has shown, lack of adequate sex education and a climate of shame around sex which was reinforced by Church teachings, meant that contraception was not just legally inaccessible during the 1960s and 1970s, but was fundamentally stigmatised. This chapter highlights how, in the absence of legal access to artificial methods, natural methods of family planning, in particular calendar-based methods remained popular, particularly for couples who were born in the 1930s and 1940s. In addition, for many couples, having children was an accepted part of marriage; contraceptive methods only tended to be used after participants had already had children in order to 'space' subsequent pregnancies, or in order to 'stop' pregnancies following the completion of the family.¹ In contrast to Ireland, visions of England as a 'permissive' society persisted well into the twentieth century. The chapter also seeks

¹ For a detailed overview of the 'stopping' vs 'spacing' debate, see Simon Szreter, *Fertility, Class and Gender in Britain, 1860–1940* (Cambridge University Press, 1996), pp. 367–440.

to explore the dynamics of decision-making around family planning in the period, illustrating how women began to exhibit more agency around these choices, and that contraception was generally seen as a female responsibility. It will also illuminate the impact that lack of access to artificial contraception had on individuals.²

3.1 Information on Family Planning

During the 1960s and 1970s, information on contraception and family planning was disseminated through a number of sources. Magazines were an important source of information for participants such as Helena (b.1945) who explained that ‘Magazines were the only place you could get that sort-of thing’. Sandra (b.1951) similarly remembered *Woman’s Way* being significant. She recalled, ‘People were discussing spacing your family. [...] And people would write in saying, “I don’t want to have any more children, I have ten. How do I tell my husband?” and stuff like this. And she’d ... she’d probably write back and say ... That was the way we gleaned some of our information do you know what I mean?’ Brigid (b.1945) recalled finding out about the Billings Method through *Parent’s Magazine*, telling me, ‘I suppose that’s really where I got the most information from’.

Natural methods of family planning in line with Catholic teachings were popularised in women’s magazines by agony aunts such as Angela Macnamara from the early 1960s.³ In a two-part series in *Woman’s Way* in 1963, Macnamara discussed recent debates around birth control, ultimately arguing that artificial contraception went against Catholic teachings and that it would lead to sexual promiscuity and ‘moral degradation’.⁴ Instead, she promoted abstinence as a form of birth control.⁵ In 1965, the magazine also ran an article entitled ‘Regulation of Family’ by the magazine’s marriage counsellor, described as ‘a woman doctor’, which promoted the idea of responsible parenthood through the use of the rhythm method.⁶ Angela Macnamara also received regular letters to her agony aunt column asking about contraception; she tended to advocate calendar methods such as the safe period, temperature method, and

² In discussing the methods of contraception utilised, this chapter will focus primarily on natural methods and the use of condoms. The pill is discussed in more depth in Chapter 4, while permanent forms of contraception such as tubal ligation and vasectomy, which became more increasingly available from the 1980s, are discussed in Chapter 9.

³ For a detailed account of Angela Macnamara’s life and work, see Ryan, *Asking Angela Macnamara*.

⁴ Angela Macnamara, ‘On Control’, *Woman’s Way*, 14 November 1963, p. 14.

⁵ Angela Macnamara, ‘Science and control’, *Woman’s Way*, 30 November 1963, p. 55.

⁶ ‘Regulation of family’, *Woman’s Way*, 1 March 1965, p. 21.

later Billings method.⁷ Information on natural methods of family planning were also provided in the magazine. In 1970, in the ‘Young Motherhood Bureau’ section written by Sister Eileen, an explanation of the temperature method was provided. Women were encouraged to avail of a special thermometer ‘incorporating the new international Centigrade scale and with an enlarged distance between two grades’ so that they could properly detect the slight rise in temperature that occurred with ovulation.⁸

Articles providing information on artificial forms of contraception were also common in *Woman’s Way* magazine from 1966 onwards, particularly through articles written by Monica McEnroy. The magazine included a series of articles on the pill in 1966 and in 1968 the contraception issue was regularly discussed in its letters pages.⁹ Similarly, in 1973, *Nikki*, a short-lived magazine aimed at young Irish women, published a ‘Guide to Sexual Knowledge: Contraception’ which provided information on the main forms of contraception, including caps, condoms, spermicides, the pill, *coitus interruptus*, and the rhythm method. Acknowledging that ‘it’s against the official teaching of the Roman Catholic Church’, the magazine stated that in publishing the piece, they were ‘accepting reality – the reality of abortion, or illegitimate children, of spoiled young lives. It doesn’t help to preach a sermon to a pregnant teenager – nor to think “it’ll never happen to my daughter”. It does. That’s why we printed this article’.¹⁰

The Billings Method was also popularised in Ireland from the 1970s by a huge network of lay women. Mavis Keniry, a mother of two, founded an educational service on the Billings Method from her home in Dublin in the early 1970s. She later expanded this to the Dublin Ovulation Method Advisory Service, which later became the National Association of the Ovulation Method in Ireland (NAOMI). By 1978, there were eleven ovulation method advisory service centres operating in Dublin and over eighty centres throughout Ireland. Women could also receive information through a postal advisory service. Keniry was also appointed to the ten-member International Committee of WOOMB (World Organisation for the Ovulation Method-Billings), attending their annual nine-day conference in Los Angeles in 1978.¹¹ Under the Family Planning Act of 1979, a provision was made that a comprehensive

⁷ See, for example: ‘Angela Macnamara gives a helping hand’, *Woman’s Way*, 10 November 1967, p. 59 and ‘Help page: Angela Macnamara’, *Woman’s Way*, 6 December 1974, p. 68.

⁸ ‘Young Motherhood Bureau’, *Woman’s Way*, 16 October 1970, p. 48.

⁹ For discussions of the pill in *Woman’s Way* see: Laura Kelly, ‘Debates on family planning and the contraceptive pill in Irish magazine *Woman’s Way*, 1963–1973’, (*Women’s History Review*, online 2021).

¹⁰ ‘Sexual knowledge: contraception’, *Nikki*, July 1973, p. 54.

¹¹ ‘Natural family planning’, *Connacht Tribune*, 3 February 1978, p. 31.

natural family planning service would be introduced to provide information, instruction and advice on natural forms of family planning, and that a grant would be provided to assist with research into natural family planning.¹² This meant that from 1980, NAOMI was provided with a grant to assist with its work. By then, there were 19 centres in Dublin with 100 women involved in teaching. Keniry estimated that by 1980 20,000 women in Dublin were using the Billings method and 50,000 throughout the country.¹³

Pre-marriage courses were also important in providing information on family planning to couples. Courses run by priests which were aimed at educating engaged couples appear to have started up around the mid-1950s. From 1955, pre-marriage classes were established in Dublin by the Jesuit Fathers and the Catholic Social Welfare Bureau.¹⁴ An article in the *Irish Examiner* in 1955 explained that the aim of these classes was to give engaged couples 'a grounding in Catholic principles as well as in the various material aspects of marriage'.¹⁵ However, speaking at the Christus Rex Congress in the same year, Rev. Daniel F. Murphy, stated that 'these took in only the minority, and in rural parts little or nothing was done by way of pre-marriage instruction'.¹⁶

Dennis (b.1937) and his wife used the safe period after they were married in 1965 to space the births of their three children. They found out about the method through the pre-marriage courses they attended separately as they were living in two different cities before marriage. He recalled that his course in a city in the west of Ireland 'was one of the first that was set up and there was a lot of gynaecologists'. He was living in digs at the time with a married couple with three young children. Dennis explained:

I came home anyway one night after my pre-marriage course with all this data on the safe period. I went in and Paul the husband says, 'Well, how did you get on tonight?' 'I'll be telling you now, later on', you see? They'd been married before pre-marriage days, before. He would have been about seven or eight years older than me, you see? I got out my pen and paper and I went through all how to with him. Then shortly after that, I got the house here and I moved up here. I met Paul about nine months later and he says 'Do you see that lad in the pram, that's yours!'

¹² Health (Family Planning) Act, 1979. Accessed: www.irishstatutebook.ie/eli/1979/act/20/enacted/en/print

¹³ *Evening Herald*, 17 September 1980, p. 3.

¹⁴ *Clinical Report of the Rotunda Hospital, 1st January 1966 to 31st December 1966*, p. 68.

¹⁵ 'Dublin letter', *Irish Examiner*, 27 September 1955, p. 4.

¹⁶ 'Rev. lecturer deploras marginal Catholicism', *Evening Echo*, 13 April 1955, p. 2.

While this is an amusing anecdote and was told by Dennis with humour, it nevertheless illustrates how knowledge was passed between individuals and the potential for information to be miscommunicated or misunderstood.

From 1969, formal pre-marriage courses were run under the auspices of the Catholic Marriage Advisory Council (later CMAC) which was established in Ireland in 1962, later renamed Accord. By 1976, there were 22 pre-marriage centres in the Dublin diocese and 33 centres elsewhere in the country.¹⁷ Father Paddy Gleeson, who had worked as an emigrant chaplain in Northampton, England, was asked by the new archbishop, Dermot Ryan, to get involved in coordinating the pre-marriage courses in Dublin in the 1970s. Gleeson was inspired by his previous experiences working in Dublin in the mid-1960s, where he 'was conscious I suppose that a lot of couples were getting married maybe in a hurry for the wrong reasons'. The CMAC marriage guidance courses therefore provided an opportunity for couples to discuss key issues in advance of marriage and ensure that they were more prepared for what was to come. Moreover, the CMAC also established natural family planning centres for couples to obtain more information on those techniques if they wished.

Father Gleeson also produced a guide for priests conducting pre-marriage courses in 1978. For a three session course, he advised that the first session should be concerned with how much the couple knew about each other, how they came to fall in love, plans for their life together, and issues such as money and household chores. The second session should cover love, infertility, methods of family planning (this element usually being delivered by a doctor), sex and parenthood. The third session should deal primarily with issues of faith, the marriage ceremony and family and community.¹⁸ Father Gleeson explained to me that at the courses he was involved in, the talk given by the doctor on family planning 'described all the methods. I mean the methods at that time would be you know, condoms, intrauterine devices I suppose you know and the pill I suppose, they'd be basically. And of course, the possibility of sterilisation as well'.

Individuals' experiences of pre-marriage courses varied and there were regional differences. Mary Ellen (b.1944) from a rural part of the west of Ireland got married in 1974. She recalled that her pre-marriage course touched on intimacy in brief and with regard to contraception:

¹⁷ 'Apprenticeship for marriage', *Irish Press*, 30 December 1976, p. 9.

¹⁸ Fr Paddy Gleeson, *Helping Engaged Couples: A Guide for Priests* (Veritas Publications, 1978).

They talked about the different forms of family planning and contraception and that. But it would be brief. The doctor would be very brief. It was very conservative information at that particular time. Because it was an unspoken language, sex, in society.

Christine (b.1947) and Stephen (b.1943) who got married in Dublin in 1969 recalled the pre-marriage course they undertook which was run by the Jesuits. Stephen recalled that during the course 'I don't think the word sex was ever used', while Christine explained, 'Family planning wasn't mentioned, nothing like that'. Noel (b.1952) from a small town in the west of Ireland, got married in 1975. He said the information he and his wife received about family planning in their course was 'very, very cursory'. Similarly, Pierce (b.1948) who got married in 1971 explained that the information provided on the pre-marriage course 'was very general sort of stuff', stating that it was not 'too invasive' or 'too personal' but 'it gave us a general outline of, eh, well enough to be going along with it, you know?'

Catherine (b.1953) who undertook her pre-marriage course in London found that the priest who ran the course had more progressive attitudes towards contraception:

He said 'Well, this is the Church's official attitude.' 'But', he'd say, 'but to be honest', he said, 'it's up to your conscience. If you think that it's okay to do that, who am I to tell you that you can't?'. So even back in 1974, you know.

Yet, even by the 1980s, natural methods were still being encouraged at Irish pre-marriage courses. Denise (b.1961) who was married in 1983 in a rural part of a northern county said that she 'was as wise when I went in as I came out. I hadn't a clue. People, you would be afraid to ask a question'. She recalled there being an emphasis on three key methods of 'natural' family planning:

I think it was something about temperatures and it was a rhythm and temperatures and something else. There was three things. And abstinence was a big thing. You know, just between do this and do that, you just don't do it. That's it, you don't do it. And you certainly don't use condoms and you certainly don't go on the pill. You know, these were the methods you were to use. And I said, 'There is no way I am starting to take my temperature, every bloody day'.

Some men and women may have gleaned information from booklets. In 1966, a number of the London-based CMAC booklets were reportedly available to purchase from Gill's bookshop in Dublin. These included titles such as *Beginning Your Marriage* (1963) as well as publications by Professor John Marshall, including *Family Planning* (1963), *A Catholic*

View of Sex and Marriage (1965), and *The Infertile Period* (1963).¹⁹ Books on family planning and reproductive health that had been published in England were also read by some participants. For example, Clare (b.1936) from the rural west of Ireland, explained that she found out about the temperature method through her ‘sister, a nurse in England, and I think she sent me books on it’. Maria (b.1957) from a city in the west of Ireland also recalled reading the British book *Everywoman: a gynaecological guide for life* (originally published in 1971) by Derek Llewellyn-Jones, which she also gave to her female work colleagues to read.

The first Irish book dealing with sex education for adults, was Michael Solomons’ *Life Cycle: Facts for Adults*, published in 1963. Solomons had been inspired to publish the book as a result of his experiences in medical practice and his bewilderment ‘of the ignorance that I had encountered among my patients’, particularly in relation to problems individuals had conceiving which he felt were not down to ‘infertility but poor technique’.²⁰ The book provided detailed information on topics such as marriage, sexual intercourse, conception, labour, adolescence, menopause and old age, and included diagrams showing the male and female reproductive systems and a glossary outlining key terms relating to reproductive health.²¹ According to Solomons, the book was ‘well received. There was little adverse reaction and it went into paperback’.²² The book did not, however, provide detailed information on family planning or contraception, perhaps owing to the social climate at the time, and in order to escape censorship. The safe period was briefly referred to in the section that dealt with conception, but only to make the point that it was unreliable.²³

The first detailed Irish guide to family planning, *Family Planning: a guide for parents and prospective parents*, was published eight years later by the Fertility Guidance Company in 1971. In the introduction to the booklet, family planning was framed in terms of responsible parenthood.²⁴ The booklet sold 800 copies in its first month and new editions

¹⁹ ‘Patients’ postbox’, *Woman’s Way*, 18 November 1966, p. 37. Marshall was a counsellor and chairman of the CMAC (1952–1996) who had, in his early career, published the first guide to the basal temperature method of natural family planning. He had been brought onto the 1962 papal commission by Pope John XXIII, as a medical representative and defender of the Church’s stance on artificial contraception. Geiringer, *The Pope and the Pill*, pp. 37–8.

²⁰ Solomons, *Pro-Life*, p. 18.

²¹ Michael Solomons, *Life Cycle: Facts for Adults* (Dublin: Allen Figgis, 1963).

²² Solomons, *Pro-Life*, p. 18. ²³ Solomons, *Life Cycle*, p. 46.

²⁴ *Family Planning: A Guide for Parents and Prospective Parents* (Dublin: Fertility Guidance Co., 1971), p. 4.

were reprinted in coming years.²⁵ The book comprised of two main sections, the first on 'effective family planning methods' explored the pill, the intra-uterine device, the diaphragm and sterilisation while the second section 'less effective family planning methods' examined the rhythm method, condoms, foams and jellies, withdrawal, and complete abstinence. Each of these methods was described concisely and clearly with the advantages and disadvantages of each explained. The guide also dealt with myths and misunderstandings about family planning. After sterilisation, the pill was proposed as the most effective form of family planning. The IUD was outlined as the next most effective because 'like the pill, its application is not directly related to love-making, and it requires no adjustment after insertion'.²⁶ The temperature/rhythm method was deemed to be less effective and 'seldom advisable when there is a real medical or social necessity for the couple to avoid pregnancy'. Nevertheless, the guide explained that 'when conditions are right, however, the temperature method can be useful for reducing a couple's fertility and spacing their children'.²⁷ The initial version of the booklet escaped censorship but featured in a 1973 Dublin District Court case which will be further discussed in Chapter 8. Reprints of the guide in later years were similar in terms of the content provided, but also included detailed colour diagrams, which meant that it was picked up by the Censorship Board. The 1976 edition of the book was banned by the Censorship Board on the grounds that it was 'indecent and obscene'. The IFPA took a High Court case against the Censorship Board which they won. The Attorney General appealed but the ruling stood.²⁸ The 1978 third edition, also contained illustrations, however, it was noted in the IFPA's 1978 annual report that 'some of the artwork has been changed'.²⁹ Information was also provided on infertility and pregnancy tests.³⁰ Interestingly, there was also a slight shift in language, perhaps reflecting changes in social attitudes. In the original guide, the couple were usually referred to as 'the husband' and 'the wife', however, in the third edition, they were simply referred to as 'the man' or 'the woman'.

Students were also active in disseminating information. For example, a contraception guide was produced by the welfare officer of TCD, Kathy

²⁵ Solomons, *Pro-Life*, p. 37. ²⁶ *Family Planning*, p. 13. ²⁷ *Ibid.*, p. 14.

²⁸ Solomons, *Pro-Life*, p. 42. ²⁹ *IFPA Annual Report for 1978*, p. 5.

³⁰ *Family Planning: A Simple Guide to Contraception and Fertility* (Dublin: Irish Family Planning Association, 1978).

Gilfillan in 1971. In order to avoid prosecution, the author of the guide was listed as the collective student body and it was only distributed within the university grounds.³¹

Women also discussed and circulated information on family planning among themselves. Christine (b.1947) for example, stated, ‘but you know when you’re women and you have children and you’re sort of chatting among yourselves. That’s how we came to learn things, from one another. And some of course were a bit more knowledgeable than others, but that’s how we learned about it’. Similarly, Diane (b.1949) explained how she found out about family planning through reading and from friends coming back from being abroad:

Well, when you have friends you investigate and you read and some goes to America, maybe on holidays or they go to abroad and they come back with ... some people travelled and even in the 60s and 70s we travelled and come back with information from other places.

Men may also have shared information on the topic. Jeremiah (b.1942) explained that he learnt about family planning ‘from the media or whatever, you know? And from the boys’. Yet, as the following sections will show, family planning was often viewed as the responsibility of women.

3.2 Attitudes to Family Planning

Con (b.1940) who grew up in the rural south-west explained:

There was no such thing as family planning in those days or anything else, you know and it wasn’t even a matter for discussion at that stage in life, you know, it would have been many years later before people even discussed these things or spoke about them, you know and there wasn’t much advice now, it was learned by experience and that was it really, you know. That was that.

Several respondents, like Con, and particularly those from the older cohort of participants, when first asked about family planning and contraception, stressed that ‘there was no such thing’ or expressed fatalistic attitudes towards having children. A couple, interviewed together, Tony and Emer (both b.1939) who spent their childbearing years in a city in the west of Ireland, were also united in this view:

³¹ Steve Conlon, *The Irish student movement as an agent of social change: a case study analysis of the role students played in the liberalisation of sex and sexuality in public policy* (unpublished PhD thesis, Dublin City University, 2016), p. 166.

TONY: There was no such thing as contraceptives when we were younger.

EMER: Oh God no.

TONY: Nobody knew anything about them.

EMER: No.

TONY: No.

Given that the period when these respondents were getting married and starting to have children (1960s and 1970s) witnessed increased discussion of contraception in the media, these responses may seem surprising. However, they are revealing on three levels. First of all, the participants were keen to emphasise a difference in the experiences of their generation compared to mine, using phrases such as ‘when we were younger’ or ‘in those days’. Indeed, as the discussion went on, participants often drew attention to the differences between their experiences and those of people of fertile age today. Secondly, as Chapter 2 demonstrated, there was a resounding lack of knowledge in relation to sex and reproduction, and indeed, for the older members of the cohort, particularly those living in rural areas, this may have been more pronounced. Respondents in Kate Fisher’s study of family planning practices in England and Wales in the early twentieth century also emphasised a lack of knowledge and asserted their innocence of matters relating to contraception.³² Indeed, in the Irish context, this may also have been the case. For instance, Úna (b.1944) who grew up in a city, explained:

Family planning? Not at all. And there was no such thing. There was nowhere to go at the time, do you know? It was something you didn’t do. There was no family planning. That didn’t come into it at all.

Many interviewees born in the 1940s also expressed an acceptance that having children was a normal part of married life. When asked about what she knew about family planning when she got married, Nellie (b.1944) from a rural part of the west of Ireland told me:

No. Absolutely nothing. You just knew that you wanted to have children and that would be it.

Maud (b.1947) who grew up in a rural part of the north of Ireland, explained that she ‘didn’t know any planning at all’. Her first child was born within a year of marriage and her second sixteen months later. She asked her doctor to prescribe her the pill but was refused. Her third child was born four years later but this gap was not planned, and she ascribed this space to illness. She had surgery after the birth of her third child and

³² Fisher, *Birth Control*, pp. 26–75.

had no subsequent pregnancies as a result. Her sister, on the other hand, had six children, and Maud believed ‘Now if I didn’t have that surgery, I probably would have carried on’. In Maud’s words:

She didn’t do any planning or anything, because she was led to believe that was just how it was really. You went on and you had your babies. Didn’t you?

Some female respondents such as Kate (b.1944) from a town in the south-east of Ireland, had a stoic attitude towards having children:

Oh yeah, it just... you got your baby, you got your baby, so you didn’t...and you were pregnant again, so that was it. There was no big deal, oh my God.

Similarly, Irene (b.1942) who lived in the rural south-west contrasted her attitudes towards having children with those of women of childbearing age today:

I never minded becoming pregnant. And honestly... Didn’t. And no, I didn’t. I suppose it’s just a way of life. It is a way of life. And that’s so different. It’s so different today isn’t it?

For these respondents, it appears that in addition to there being an inability to access effective family planning methods, there was also a resistance towards family planning too. This may have been in part due to Catholic Church teachings at the time, as will be discussed further in Chapter 5, which placed emphasis on the idea that child-bearing was an integral part of marriage. It may also have been due to the social prestige of having a large family, as Kevin C. Kearns has suggested in his study of Dublin tenement life, stating that ‘in working-class culture, there was a natural pride in having produced a small tribe of sons or daughters’.³³ Tom Inglis suggests that large families could be ascribed not only to individuals following Church teachings, but peer pressure from mothers and other women.³⁴ Having large families meant, however, that low employment rates persisted for Irish women as childcare was difficult to arrange and would not have been economically viable.³⁵

Many respondents referred to ‘pot luck’ with regard to children and taking what came. Christina (b.1935) from a small town in the Midlands, stated:

And we, kind of you just take pot luck with... that’s the way we did at that time. There was no such thing as contraception.

³³ Kevin C. Kearns, *Working Class Heroines: The Extraordinary Women of Dublin’s Tenements* (Dublin: Gill Books, 2018), p. 132.

³⁴ Inglis, *Moral Monopoly*, p. 185.

³⁵ Lindsey Earner-Byrne and Diane Urquhart, ‘Gender roles in Ireland since 1740’ in Eugenio F. Biagini and Mary E. Daly (eds.), *The Cambridge Social History of Modern Ireland* (Cambridge University Press, 2017), pp. 312–26, on p. 317.

Emer and Tony had a similar attitude, stating that in contrast with younger generations, they did not plan the number of children they would have:

TONY: It was pot luck.

EMER: That's it.

TONY: Whereas now they plan their family, don't they? At that time you didn't.

EMER: If they come they come and that's it.

TONY: If you had another one that was it.

Similarly, Stephen (b.1943) and Christine (b.1947) explained to me that they didn't ask their doctor for advice about family planning after the birth of their first child:

STEPHEN: No, because we felt possibly that... We probably didn't... Did we really think about whether we'd need it? No?

CHRISTINE: We didn't think about it or talk about it, even. No, we just went on with life.

STEPHEN: Went on with life and things were probably a little bit easier with families in those days, there wasn't as much going on. You know? We were just husband and wife, we were in this house. I was working and you weren't because I was bringing in a reasonably good wage and we were happy in what we had. And we did what married people do and... what happened then? A second child came along but there was no planning, there was no thought that... 'We're going to have two'.

For Stephen and Christine, family planning was not a topic of discussion in the early years of their marriage as they both wanted to have children, and this decision was informed by a sense that having children was 'what married people do'. Moreover, as Stephen explained, with Christine working in the home, they felt that there was less of a need for them to consider spacing the pregnancies. Other interviewees expressed similar views, such as when Anthony (b.1934) was asked if he and his wife had considered how many children they wanted to have, he replied, 'No, we kind-of just took it as it came'. These fatalistic attitudes to having children perhaps reflect a few things: fundamentally, a lack of information on and access to contraception. But they are also revealing of the persistence of the traditional family structure in Ireland during the 1960s and 1970s which designated the husband as the breadwinner and confined his wife to the role of homemaker and mother. Several respondents reflected on these gender roles. Ann (b.1945) felt that while her husband was a 'a good man. A great father and great worker kind of thing. But I ran the show, if you know what I mean'. In Ellen's (b.1949) view:

the men were no good back then, I can tell you that now. Men didn't change nappies, men didn't dress children, men didn't do anything, feed them, do

anything until they were well able to get up and run around and dress themselves sort of, you know? The men didn't do anything. [...] Men expected you to give up your job and stay at home and look after the house, and bring up their children. That was just I think the normal kind of a thing.

Annie (b.1939) who had eleven children, explained how organised she needed to be with housework:

Oh, you had to have everything ready the night before. Them times, they didn't have three or four pair of shoes, they had the one pair of shoes, and you polished them every night when they were gone to bed like. And leave out their socks and pants and you know, what they had for the next day. Oh you had. I remember I used to iron when they were all gone to bed and everything. And I could be ironing up to twelve o'clock like. Then the minute I'd sit down, sure I was falling asleep.

Changes in equality legislation including the removal of the marriage bar in 1973, as well as shifting values in relation to gender equality which were associated with the women's movement, meant that for the younger couples in the cohort, contraception and family planning were more important considerations.³⁶

Some respondents also drew a distinction between their experiences and attitudes towards the possibility of planning one's family and those of their children, or my own generation. Paula (b.1955) from an urban part of the west of Ireland, explained that she had discussed the issue with her daughter who had asked about whether she and her sibling were planned and that her daughter found it hard to understand that there had been no planning involved or thought given to the number of children that her mother wanted. Paula explained:

No. I feel foolish acknowledging it because of your generation, people seem to be taken aback. Did I sit down and plan? No. We didn't plan. No. It was just I was pregnant and it was happy news and I was delighted.

A number of interviewees thus had their first child soon after getting married. Jim (b.1933) from Dublin, explained to me that he and his wife's first child, 'was conceived the day we got married. It had that feel about it'. Many respondents also reflected on a sense of lack of control over the number of children they would have. Bridget (b.1945) had her first child a year after her marriage, and went on to have four more children within the following six years. She explained:

But I suppose families at that time weren't so restricted numbers-wise, I think. It just kinda happened, you know? I think that's the way it was with most people at the time.

³⁶ Kennedy, *Cottage to Creche*, pp. 94–5.

Similarly, Sally (b.1956) who grew up in the rural east, recounted the feeling she had that there was no option but to have children, particularly because of a lack of contraception. In her view, pregnancy 'was there waiting for you. And it was like a train crash, you were born straight on the line, because there's no way of your being able to prevent it'.

Such attitudes appear to have persisted into the 1970s and 1980s. Nicholas (b.1953) from a city in the west of Ireland, explained that after marriage, 'I would have said that our thoughts would have been to have children as soon as it was quickly possible, practically possible'. Financial stability was not a major consideration, in Nicholas' view 'The biggest factor would be just having children'. Likewise, Pól (b.1948) from a small town in the west of Ireland, and his wife, married in their thirties and as a result 'contraception never came into it. Or family planning didn't come into it. We wanted children straight away and so, we were aware of it. But it wasn't even come up for discussion because we wanted ...' Clodagh (b.1940) from the rural Midlands expressed that she felt the purpose of getting married was to have a family and as a result, she did not have concerns about spacing her children:

I'll tell you really what you thought about was, you got married to have a family, that's what everybody done, you know you didn't think, 'Oh my God there's a whole load of them going to come together'.

Clodagh's testimony also highlights the social pressure she felt around having children:

You see you'd be terrified you weren't going to have kids, that would be the thing you'd be thinking about that way when you were getting married, that was what marriage was about, having children like and everyone just loved to have children that's the sort of thing you know.

When she didn't become pregnant after four months of marriage, Clodagh was worried she was not able to have children. This concern may have emanated from the pressure she felt to have children but the issue of infertility was also beginning to be more widely discussed in the press, such as in women's magazines.³⁷ However, Clodagh soon became pregnant with her first child and by the age of 28 she had a total of six children (including a set of twins) under the age of four and ten months. Four years later she had another child, and her eighth child was born when she was 46. Clodagh explained:

³⁷ See for example: Elizabeth M. Hayes, 'When a baby never comes', *Woman's Way*, 30 August 1968, pp. 14–15 and *Woman's Way*, 6 September 1968, pp. 34–5.

I mustn't have known much about birth control anyway, did I? No, but the first few you wouldn't be thinking about it. You wouldn't even dream about – it was only then when I had the six, it was, when I had – then I just said to myself, but the birth control there was no artificial birth control, you had to control yourself or ourselves, shall we say you know.

In Clodagh's case, as with many other respondents, family planning practices were not used until the couple had already had a number of children and wanted to space subsequent ones, while many other respondents only began to use contraceptive practices for 'stopping' when they had completed their family size. And in some cases, because the woman in the couple had reached menopause, family planning was no longer an issue. Several respondents did not engage in any attempt at family planning, again, perhaps due to an acceptance that having children was a part of marriage, but also potentially due to a lack of knowledge. Bridget (b.1945) for example, told me:

We were as green as could be, you know? We didn't really ... you just kind of ... I don't know. We didn't really, and you know if you asked, the honest truth was I suppose none of them were planned, do you know, that kind of way? It just happened. Do you know?

3.3 The Prevalence of Natural Methods

With a lack of access to artificial contraception, the only option for most couples who wanted to limit their families was to abstain from sex or utilise calendar-based methods such as the safe period, temperature method or Billings method. As Table 3.2 in the Appendix shows, the 21 oral history respondents who were born in the 1930s all tended to use natural forms of family planning such as the safe period, temperature method or Billings method, with the exception of four individuals and one couple who said they used no form of family planning, and two respondents who used the safe period, the pill and condoms during their fertile years. These findings correlate with Betty Hilliard's study of 105 women in Cork city which suggested that the women in her sample relied on 'combinations of luck, natural methods and their partner's co-operation to curtail their number of pregnancies'.³⁸

Nuala (b.1935) who grew up in a small town in the Midlands and married in 1964, when asked what people would do to space their children stated: 'Go to different beds I suppose. I'd say that was the solution'. With regard to information on family planning, Nuala said,

³⁸ Hilliard, 'The Catholic Church and married women's sexuality', p. 36.

'I would say we didn't know anything about it any way.' Similarly, after the birth of their two children, Christine (b.1947) and her husband used abstinence. She explained to me, 'After the second, we were careful but that would've been abstinence, it wasn't anything else. No pill or anything else. We didn't know anything about them, at that stage'. Eibhlin (b.1943) also practised abstinence after the birth of her fifth child:

I was forty when I had him, so I sure did, yeah I was just being very careful because I didn't... I knew I was at an age when it wasn't good... well, it could be quite dangerous you know? And I said, definitely five was enough you know.

For the majority of interviewees who did engage in family planning, calendar-based methods were commonly used in the absence of other forms of reliable contraception. Of the 99 total respondents who had been married, 47 reported using a calendar method such as the safe period, temperature method or Billings. The Knaus-Ogino method of family planning or 'rhythm method' was developed from the findings of Japanese gynaecologist Ogino Kyusaku and Austrian gynaecologist Hermann Knaus who separately calculated the time of ovulation in 1924 and 1929 respectively.³⁹ Based on his findings, Knaus worked out that in normal circumstances, ovulation usually took place 14 days before the next period began.⁴⁰ In 1951, Pope Pius XII declared that the Knaus-Ogino method was acceptable to the Catholic Church, thus bringing it to worldwide attention.⁴¹ However, the method was very unreliable as there could be many reasons for fluctuations in a woman's cycle.⁴² Writing to the *Sunday Independent* in 1968, H. L. from Dublin commented that for the vast majority of people the rhythm method was 'a real game of guesswork, with no real guarantee of success'. In her view:

It is very hard on young married couples to have to limit their lovemaking to a few days every month, and believe me, it boils down to a few days each month if one wants to be absolutely sure of non-conception. For myself, I have no so-called safe period after a period as my cycle is 25–31 days. Under these circumstances it is very hard for me to have a satisfactory relationship with my husband as often times he is working late, and I am asleep when he gets in, or I am babysitting and he is asleep when I get in. The result is that I often have no intercourse for 3–4 months at a time. Needless to say, this is very frustrating and as a result both myself and my husband suffer from tension and nerves.⁴³

³⁹ Donna Drucker, *Contraception: A Concise History* (MIT Press, 2020), p. 33.

⁴⁰ Robert Jutte, *Contraception: A History* (Wiley, 2008), p. 204.

⁴¹ Jutte, *Contraception*, p. 205. ⁴² *Ibid.*, p. 204.

⁴³ 'Rhythm: a real game of guesswork', *Sunday Independent*, 25 August 1968, p. 8.

Tessie (b.1938) and her husband used the safe period which she described as: 'You'd be trying to gauge in between and hope for the best, you know what I mean?' She and her husband used the method in combination with the withdrawal method. Ellen (b.1949) went to her doctor after having three children in two and a half years:

So, when I said it to the doctor then I said, 'What will I do?' And he said, "Well I don't agree with giving the pill but I'll kind of tell you about the safe period'. As they called it. So he just said, for five days after your period you're okay, but then for about two weeks you shouldn't do anything and then the week before the period again. You know, if you're fairly regular you could kind of work that out.

The safe period was often described by male respondents as being something that their wife was responsible for, or they alluded to the fact that women were more knowledgeable about this method of family planning. Colm (b.1940) explained that the 'safe period wasn't something that lads discussed. You know what I mean? It was a woman's problem'. Ronan (b.1933) and his wife started using the safe period method after having six children. They had not used any method prior to this. He explained, 'But we did, we did at that stage then, we started em, family planning you know and watching the safe time to have intercourse. But up to that no, nothing. So that was the beginning of it but that was after having six children'. From Ronan's testimony, it appears that his wife took responsibility for the method; he explained that:

the women would know more about these things than we would. And she would read books. She was a very good reader and she would you know. And to be sure, she'd be talking to her friends and other women and she'd learn that way. So between what she read and meeting other young married women in the same position.

For Ronan, however, 'It was all new to me. Ovums and all the rest of it'. Such statements contrast with Kate Fisher's findings for 1930s and 1940s Britain which showed that contraception was a male responsibility and that 'birth control was seen as an essential element of a husband's duty.⁴⁴ In the Irish context, for participants born in the 1930s, 1940s and 1950s, responsibility for contraception appears to have lied predominantly with the female partner.

The safe period method was less reliable and many of the respondents who used it found that it did not work for them. Gráinne (b.1937) who had eight children, told me 'It was talked sometimes about the safe

⁴⁴ Fisher, *Birth Control*, pp. 189–237.

period and everything, and my husband considered that was hogwash. And I think it was because it didn't work for us anyway'. Similarly, Winnie (b.1938) who had seven children, explained that she 'would vaguely have, you know, without, in my last couple of children probably, I would have tried to mind the different time of the month to... It never really worked. Didn't pay a lot of heed now to be honest'. Mary Margaret (b.1945) who successfully used the safe period in combination with breastfeeding to space her four children, admitted that there were 'a lot of mistakes made too, that was human nature'.

The safe period method relied on having a regular cycle and women with any variation on this struggled to use it reliably. Siobhan (b.1942) from the rural Midlands, had five pregnancies in total. She tried to use the safe period method after the birth of her first baby but found that she became pregnant with her second child. She explained 'I know for a fact that I was caught on the 24th day', which, under the rules of the safe period should have been an infertile day. Similarly, she later conceived on another occasion 'maybe three days after the period. Like, I worked that out. I knew myself. So I couldn't have worked a safe period system'. She explained that for her 'There was no safe period' and 'So, I was just terrified' as she believed that any time she had sex it could result in a pregnancy. Similarly, Lily (b.1946) who grew up in the rural north of the country, and had three children, used the safe period as a method of family planning when she got married after experiencing negative side effects on the contraceptive pill. She found that the safe period mostly worked for her, but with her first pregnancy 'I was caught – I was caught you know, I was caught when I'm like ... you know when they say your cycle is 28 days, mine used to be 32. And I was caught on the 28th day'. Siobhan and Lily's use of the term 'caught' highlights the unreliable nature of the safe period and the sense that pregnancy was out of their control.

Calendar based methods may also have been difficult for women with a number of children who may not have had the time to chart their cycles. Evelyn (b.1940) used the safe period for a while to space her pregnancies, but believed that:

Obviously, it's very difficult. I'm sure if people were clinically good at this sort of stuff and took the time, it's like anything, you'd probably be able to work things out right? For somebody with a lot of kids and who's busy, that would be difficult.

Similarly, Colette (b.1946) who lived in a small city, used the safe period primarily for religious reasons, switching to condoms later. She recalled the anxiety during her use of calendar methods when she was coming up to the time of her period:

Oh, you ... coming up to the time when ... I think it was when a period was due. You would be uptight, absolutely, and I mean I would suffer a bit with premenstrual tension. Not very badly or anything, but that combined with this. As I say, the most wonderful cramp you could have. Sore boobs. You know, oh God. [...] Oh, I could never understand people in later years, 'Oh, she suffers terrible with her pains', would you go away, it was the best pain I ever had.

She contrasted this with her experience using condoms as 'No, I remember thinking that it's a shame I didn't start doing it years ago. You know? Because I mean it took all the worry and all the counting and all the rest of it and ...'

The temperature method of family planning was developed by a Catholic priest, Wilhelm Hildebrand, who linked the measurement of basal temperature to birth control, finding that at the time of ovulation, a woman's body temperature rises by about 0.4 to 0.6 degrees Centigrade and that the temperature remained raised until around the start of the woman's next period.⁴⁵ This method, however, required the woman to keep a careful record of rises in body temperature.⁴⁶ The Billings method, developed by Australian married couple, Dr. John and Dr. Evelyn Billings, was a more reliable form of natural family planning. It involved observation of changes in the cervical mucus and charting in order to detect periods of fertility and infertility. As mentioned earlier, the method was popularised in Ireland from the 1970s by NAOMI.

The temperature method could also be constraining and respondents who used it perceived it to be unreliable. Clare (b.1936) described the method as 'taking temperatures and keeping records and all that', which she found 'boring'. She found that 'it kind-of worked, but you couldn't be 100% relying on it'. Similarly, Pierce (b.1948) and his wife used the temperature method after their first two children, which he described as 'You had to take your temperature. It was supposed to go up a bit or go down a bit', however, although his wife did it for a period of time, they still conceived a third child. 'So it wasn't working very well. (laughs)'. Likewise, Julia (b.1946) went to the doctor for family planning advice and was told about the temperature method, but 'I did that for a while but it didn't seem to ... (laughs) I don't know if I was taking it right or not, but it didn't seem to work for me when you had four of them in three years'. Similarly, Ellie (b.1944) found out about the temperature method from an aunt who was a nun. However, she 'lost the thermometer one morning, and couldn't find it (laughs) [...] "Oh, that's that."'" A 1971 *Woman's Way* article reflected on the challenges individuals faced in using the method. While the article acknowledged that the method was

⁴⁵ Jutte, *Contraception*, p. 205. ⁴⁶ *Ibid.*

useful for women with regular periods and for women who wished to abide by Church teachings against artificial contraception, it had a failure rate of 7 out of every 100 women who used the method, with a higher failure rate for those who used the method in a 'half-hearted' way.⁴⁷ Myra (b.1947) tried using the temperature method but explained her confusion about it:

But sure I was doing it all wrong. I used to be sitting up in bed feeding the child and take this temperature. You weren't supposed to do anything like that, it'll tell you how stupid we were. You know, yeah, yeah, you were supposed to — when you woke up in the morning, you were supposed to take that lying down before you did anything else. So if you had a baby boy alongside you, like you couldn't do that but we were doing that.

While Myra seemed to blame herself for her inefficient use of the method, it is evident that little effective guidance was being provided at the time, which meant that women often picked up information in a haphazard way.

Calendar-based methods did, however, rely on having what Mary Ellen (b.1944) from the rural west of Ireland described as a 'considerate' husband. She felt that 'Not all men would be considerate. A lot of them would be very demanding men sexually'. A letter to *Woman's Way* in 1971 emphasised this point, stating, 'Women with husbands who refuse to work the safe period are in a sad position. If the husband is selfish about this aspect of marriage it often follows that he is mean and inconsiderate in other aspects too'.⁴⁸ Similarly, Christina (b.1935) who used the safe period, described her husband as 'very considerate'. Margaret (b.1954) who used the Billings Method also described her husband as 'extremely understanding' and 'very considerate'.

Abstinence during fertile times could be difficult for some couples in terms of reducing the spontaneity of sex and potentially reducing sexual pleasure because of the fact that sex took place in at the point in the cycle when the woman was not fertile.⁴⁹ Colm (b.1940) felt that safe period 'I always looked on, it was sex by appointment. Not sex on instincts. Which I think that's, that ... I think that's wrong too'. Colm felt that sex on impulse was preferable to being told, in his words, 'Oh Jaysus, I can't go

⁴⁷ Kate Kennelly, 'Dilemma: report on family planning', *Woman's Way*, 22 January 1971, p. 24.

⁴⁸ 'Over to you...', *Woman's Way*, 23 April 1971, p. 6.

⁴⁹ In her study of birth control practices in England and Wales, Kate Fisher similarly found that some of her respondents reported that appliance methods were less favoured because they removed the spontaneity necessary for sexual pleasure. Fisher, *Birth Control*, p. 170.

to till next, what, Sunday'. Julie (b.1947) from the rural west of Ireland explained:

I would have known the theory of it all, but the theory is one thing, and the Billings method was the ... we were supposed to be using, but that's fine, except that the time that you really want to be close to somebody is actually your fertile period. So it's actually doubly hard. My husband used to say he only had to look at me for me to get pregnant. He only need to look at me he used to say. That's not quite true.

Ellen (b.1949) also remarked on the problems of abstaining during the fertile time of the cycle, which for her, was about two weeks of the month under the guidelines of the safe period. She stated, 'But you know, human nature being what it is, you want sex at the time that you're supposed to have it'. Teresa (b.1946) from a small town in the southwest had a similar experience using the Billings Method. She found, 'it was awkward enough because – our friends and we'd be talking about it like that's a very controlled thing and being sexually active it isn't that you want to be sexually active when you're safe, you know'. Margaret (b.1954) who used the Billings method to plan her pregnancies, worked out that there were 12 days in her 31–32 day cycle which was a 'no go area and then the rest was possible if the mood was up to it.' She did not find the method completely satisfactory in that:

You were having it [sex] at your dry time of the month when you neither had the inclination nor the physical body symptoms that would make it easy for you to have sex. So it wasn't a good thing at all. I, I did not find it a good thing.

The scientific nature of the Billings Method was also off-putting to some women and cycle-charting could be onerous. Carol (b.1954) who found out about the Billings method on her pre-marriage course, described it as 'undignified and ridiculous ... and it didn't work apart from anything else'. Eibhlin (b.1943) was told about the Billings Method by her friend who was a nurse. Eibhlin described the method as 'it was to do with mucus and stuff and that was kind of complicated for me'. She explained:

I had a friend [...] and she was advising me because I had them pretty near together. I had one a year after the other like, you know. The first two, the first two there was only a year between them. And then the next one, there was two years so, it was like that. She was telling me about this Billings method and everything but I never really did it. I didn't really have much patience for that kind of ... kind of stuff and there was very little contraception there. So it was kind of just to hope for the best, you know?

Bridget (b.1945) used the safe period to work out when she and her husband should abstain from sex. She had heard about the Billings

method but, 'it seemed to me to be very complicated. So, I mean, I didn't even enter into the discussion'. She added that 'it was just too formal or something, or do you know?'

Others found that calendar-based methods worked for them. Nellie (b.1944) began using the safe period as she got older as a result of concerns about the increased likelihood of having a baby with Down's Syndrome. She explained, 'You just had a thing about ... you'd know when you'd be menstruating so you could have a fair idea'. Similarly, Sarah (b.1947) who grew up on a farm in the north of the country, found out about the Billings method at the pre-marriage course she attended with her fiancé in the early 1980s. She recalled, 'You kept a kind of chart of the monthly cycle, and the changes, and you knew then you were ovulating. That was kind of it, it worked all right'. Frances (b.1952) from the north of the country, used the Billings method and found 'Family planning for me was very simple, because I really and always had very regular menses, so I never had any problem with that'. Of course, calendar methods were also useful for couples who were trying to conceive a child. Bernadette (b.1947) from the rural west of Ireland, went to her doctor to seek advice on family planning as she was hoping to conceive. She began to use the temperature method to try 'to make out when you were ovulating in the month'.

Natural methods were also preferable for some respondents because they were in line with Church teachings. Eamonn (b.1933) from the rural south-west of the country, married his wife in 1961 and after having three children, they used the Billings method. He described this as:

So you weren't altogether starved of sex. There were certain days you refrained, and you paid close attention to the body heat and so on that it all entails. And it does work. If used properly, it does work. So if you want to go according to the Church, that's the way you go.

For Eamonn, this was the only method of family planning that was acceptable to him because it was in line with the Church's teachings on the use of contraception. Christina (b.1935) and her husband used the safe period after having six children, for economic reasons, because they felt that they would not have been able to 'afford many more' but also because it was in line with Church teaching and 'being a Catholic, I don't think if there was [artificial contraception] I would've used it'. Others used the Billings method as a result of an unsatisfactory experience with other forms of contraception. Maria (b.1957) used the contraceptive pill but found the method unsatisfactory because of the side effects she experienced. She and her husband later used condoms, as well as the Billings method to try and minimise the use of condoms, which they did

not find completely satisfactory, and spermicides ‘when you were being extra cautious’.

The withdrawal method was referred to by a number of respondents, and also depended on a considerate husband. In her 1969 book *Marriage Irish Style*, Dorine Rohan included a quote from a woman who stated, ‘We have had four children in five years, and we don’t want any more for the moment – but my husband is very decent, he uses the withdrawal method’.⁵⁰ Alice (b.1944) and her boyfriend sometimes used condoms but often ‘he just used the *coitus interruptus*. That’s the most dangerous thing, my God’. As well as being risky, Alice felt that the method was ‘inhuman as well. It really just interferes with kind-of...’. Similarly, Teresa (b.1946) described the withdrawal method as ‘that was an awful thing’ and that she ‘knew the risk was very high’. Alice and Teresa’s comments perhaps could be read to be alluding to how the withdrawal method interfered with sexual pleasure. In her study of the birth control practices of men and women in England and Wales born in the early twentieth century, Kate Fisher found that some women reported that use of the withdrawal method diminished their sexual pleasure.⁵¹ Yet, in the Irish context, there were few other options. Irene (b.1942) and her husband also used the withdrawal method to try and space their pregnancies because ‘There was nothing else, like, you know?’ The withdrawal method may have been used by couples who did not mind an unplanned pregnancy. Jacinta (b.1954) and her husband used the withdrawal method to space their second-last and final children. Aware of the risks involved with this method, Jacinta stated, ‘We didn’t mind if it didn’t work because we didn’t mind getting pregnant again, you see’.

Breastfeeding was another natural form of birth control, however, it only worked as a method of family planning for as long as the mother was feeding the child. Writing to the *Sunday Independent* in 1966, a mother of five from Limerick advocated breastfeeding as a method of family planning, stating ‘If a mother nurses her baby for nine months (and what better method exists for both child and mother?) there is a time lag of twelve months almost. I know – it happened to me with five of them!’.⁵² However, a response to this letter, while congratulating the mother of five ‘on her ability to nurse her family’ stated that ‘unfortunately, a great many mothers, much as they would like to, find it impossible to do this’.⁵³ Similarly, as Caitriona Clear notes, Irish mothers consciously turned away from breastfeeding in the 1940s and 1950s, due to the

⁵⁰ Dorine Rohan, *Marriage Irish Style*, p. 67. ⁵¹ Fisher, *Birth Control*, pp. 171–2.

⁵² ‘Mother of five replies’, *Sunday Independent*, 24 July 1966, p. 17.

⁵³ ‘Birth control...’, *Sunday Independent*, 7 August 1966, p. 15.

constraints of work (particularly for farming women) and home life.⁵⁴ However, oral history evidence from one of her informants born in 1928 in Mayo suggests that some women were aware that breastfeeding might suppress ovulation and practised it to space their pregnancies.⁵⁵ A small number of interviewees in my study recalled using breastfeeding to space their pregnancies. Mary Margaret (b.1945) from a city, had four children with four years between each. She explained that she 'never in my life, practised safe sex. I never took a pill, never had a condom, never in my life did I take to anything like that. Never. Not even once'. Instead, she explained, 'I breastfed my children, and it gave me space. And then I was careful. I knew I was ... I knew you could get pregnant so. And I was careful and I had four years between each one of my children'. In this instance, the use of 'careful' by Mary Margaret inferred that she was aware of her cycles and the days she was fertile, and avoided sex on these days.⁵⁶ Jacinta (b.1954) from Dublin also found that breastfeeding helped her to space her children but when she wanted to have a longer space, she needed to switch to another method:

I had Niamh when I was twenty-three. I didn't even know that your periods stop when you're pregnant. I knew nothing really. Whatever I'd read. I knew very little. Now, I know your periods can come back when you are breastfeeding. Mine didn't. So I would have breastfed her for a year and a half and that worked for us contraception wise without us even knowing it. Then I realised this works. So we had Mary at twenty-five, Susan at twenty-seven, and Paula at thirty. But I was actually breastfeeding as contraception.

After the birth of their four children, Jacinta and her husband decided they needed to take a break and used the withdrawal method for five years before the birth of their fifth child. Edward (b.1950) who lived in a city in the west of Ireland explained that his wife breastfed their second child 'for over a year and then a few months after that she got pregnant'.

For respondents born in the 1940s, it is evident that there was a wider range of family planning methods used, and family sizes were on average smaller than the respondents born in the 1930s. Table 3.2 illustrates

⁵⁴ Caitriona Clear, 'The decline of breastfeeding in 20th century Ireland' in Alan Hayes and Diane Urquhart (eds.), *Irish Women's History* (Dublin: Irish Academic Press, 2004), pp.187–98, on pp. 193–7.

⁵⁵ Clear, 'The decline of breastfeeding', p. 195.

⁵⁶ The term 'being careful' could sometimes refer to the withdrawal method but in this case, Mary Margaret was clear that this meant she monitored her cycles.

the persistence of calendar methods such as the safe period, temperature method and Billings method, but also that many individuals used a range of methods during their reproductive years. Natural methods remained popular; 21 out of 45 respondents born in the 1940s (46%) mentioned using calendar methods with 7 (15%) mentioning use of the withdrawal methods. Artificial methods were more popular among this cohort: 14 (31%) used the pill, 9 (20%) used condoms, 5 (11%) used the coil.

For respondents born in the 1950s and who mostly married in the 1970s and 1980s, it is evident that a wider range of methods were used, with higher rates of the pill, male and female sterilisation and condoms and reduced use of natural methods. As Table 3.3 illustrates, respondents born in the 1950s onwards tended to use artificial methods more than natural methods of contraception in comparison with the older interviewees. In particular, the contraceptive pill, which will be discussed in Chapter 4, was more widely used among women in the cohort born in the 1950s. Of the 33 respondents born in the 1950s, 18 (54.5%) reported using the pill during their marriage and 11 (33%) reported using condoms. Only 7 (21%) mentioned using calendar methods. This increase in the use of artificial methods was likely due to increasing availability, but also, as Chapter 5 will show, decreasing adherence to Church teachings among younger respondents. Permanent methods of contraception such as vasectomy and tubal ligation were also more common among the younger cohort; these methods will be discussed more in Chapter 9.

3.4 Access to Artificial Contraceptives

Class and location inevitably had an influence on individuals' birth control options. In 1973, an article in *Woman's Way* by Monica McEnroy stressed that 'rich women make their own arrangements and have no trouble getting a prescription for the pill signed regularly, or a diaphragm fitted by a gynaecologist. In rural Ireland difficulties are frequently solved by travelling to the nearest area where medical practice is competitive'.⁵⁷ Similarly, a woman writing to Mary Kenny's newspaper column in 1970 alluded to the difficulties faced by women who were less well-off, stating 'Because we have Medical Cards we cannot demand these things, but we know for a fact there are some well-off women able to get

⁵⁷ Monica McEnroy, 'Family planning prohibited', *Woman's Way*, 9 November 1973, pp. 12–13.

them without any bother and they snigger when they see us pregnant so often while they themselves pretend to be goody-goodies'.⁵⁸

It is clear, that for the majority of men and women living in Ireland in the 1960s and 1970s, access to artificial contraception was difficult and depended significantly on class and location. Carmel and Martin (b.1952) who both lived in a small town explained:

MARTIN: We didn't know people who would be bringing in that sort of thing.

CARMEL: So, I mean –

MARTIN: It's not that would have been objected to, we just genuinely didn't know anybody-

CARMEL: You just wouldn't have known where to get your hands on something like that.

MARTIN: You may as well have been looking for cocaine, or something.

Martin's comparison of contraceptives to cocaine highlights the illegality and illicit nature of artificial contraceptives such as condoms. Similarly, Maria (b.1957) who married her husband in 1976, expressed the problems they had in getting access to contraception:

Because of the whole contraception thing, the difficulty around that. It was so hit and miss. Even when we were a few years married it was still so difficult, the availability of contraception, unless you were on the pill. That was the only thing. I mean, condoms were only available maybe in the family planning clinic.

As Maria's testimony shows, access to contraception was challenging, and this meant that those without the means to obtain artificial contraception, often had to resort to natural methods if they wanted to engage in family planning. Class, without doubt, was an important factor for oral history respondents' choice of family planning method, but location also had an important bearing.

As Chapter 1 has shown for the early twentieth century, there was a trade of contraceptives between Ireland and the UK. More broadly, the UK, as a result of its proximity to Ireland, was a market for reproductive healthcare and support, since at least the early twentieth century.⁵⁹ From 1968, with the introduction of the Abortion Act, Irish women also began to travel, primarily through 'abortion corridors' such as Liverpool and London, for terminations.⁶⁰ Oral history evidence also

⁵⁸ 'Woman's Press,' *Irish Press*, 9 November 1970, p. 8.

⁵⁹ See: Earner-Byrne, 'The Boat to England'.

⁶⁰ See: Earner-Byrne and Urquhart, *The Irish Abortion Journey*; Ann Rossiter, *Ireland's Hidden Diaspora: The Abortion Trail and the Making of a London-Irish Underground, 1980–2000* (IASC Publishing, 2009); Deirdre Duffy, 'From feminist anarchy to decolonisation: Understanding abortion health activism before and after the repeal of the 8th amendment', *Feminist Review*, 124 (2020), pp. 69–85.

highlights the reliance of some individuals on friends posting them supplies over or they themselves smuggling back supplies from the UK. Dennis (b.1937) explained that access to condoms was ‘from England or ... Put it this way. You got them through dodgy sources. You didn’t know what you were getting’. Richard (b.1954) from the rural west of Ireland remembered ‘one of the guys in school used to supply them in secondary school. Yeah and he had to do a demo one day and (laughs). That was it. But um yeah. That was – it was – that’s how it was at the time’. Ted (b.1951) who lived in a rural area in the west of Ireland, also reflected on the challenges he faced in getting access to condoms. He explained at one point his wife Maria would cycle ‘fifteen miles each way to a distant village to get the condoms from a friend. Possibly her friend’s husband, who was American, had got the condoms from the States or through his job, as he worked at the airport’.

Indeed, several interviewees recalled the dirty humour that tended to surround condoms. This may have contributed to a sense of stigma and shame around their use. Jacinta (b.1954) explained:

It was more the lads going up north or over to England or something like that. That’s when it was all ... Then there’s all smutty talk about it, really, when you get them that way. Send the lads and they’d come back with condoms and be delighted with themselves. It made things worse, didn’t it?

Martina (b.1955) told me that ‘And I mean, at that time, condoms were a joke. Do you know what I mean? They were treated as a joke rather than something serious. Because people were so ... I don’t know what the word is. Ignorant. There was a lot of ignorance around, you know?’ Martina and Jacinta’s testimonies suggest that the use of humour perhaps enabled individuals to talk about a secretive issue but that this helped to further stigmatise the problem. Ellen (b.1949) remembered the first time she heard about ‘French letters’ as a young woman:

I remember working in the hotel, and we had a French guest staying, and when they went away they wrote to one of the women, and the lads were having her ‘Oh miss, you got two French letters in the post this morning’. All this. And I didn’t know what French letters were, but I knew by the way they were talking about them that they were something. I wouldn’t go home and ask my mother about it, so it was a long time before anybody told me what they were. I used to hear... You learned a lot from, as we said, from dirty jokes. The way these double meaning kind of jokes, and you kind of started thinking. You’d say ‘What did they mean by that?’ And you’d probably put your own interpretation and things were maybe not always the right way.

In addition, a number of respondents joked about condoms in the oral history interview itself.⁶¹ Rosie (b.1938) told me ‘a lot of people didn’t like con – the, you know, just going to bed with your shirt on. I hear people saying that, or your pajamas’s on, or whatever (laughing)’. Similarly, Colm (b.1940) recalled a conversation with a friend, stating:

COLM: And he would’ve said to me it’s ... You probably heard it, there’s an old’ saying. ‘It’s not the same’, he says. ‘It’s the same’, he says, ‘as washing your feet with your socks on’.

LAURA: Oh. (laughs) Okay, right.

COLM: (laughs). That’s the way he put it.

These jokes perhaps allude to the idea that condoms in some way inhibited sexual pleasure by reducing sensitivity. The respondents’ laughter also perhaps is indicative of an emotional response to an uncomfortable topic.⁶² One respondent, also felt that condoms were unsatisfactory because they reduced the spontaneity of sex. Edward (b.1950) told me ‘We’d use them but like you know, it’s kind of – oh hold on a minute, you know. [...] And you start you know and then you realise this is going to go a bit further tonight, you now, hold on and that kind of kills it you know. So, we didn’t really want that’. He later had a vasectomy which he and his wife found more satisfactory as a form of family planning.

Caps or diaphragms were less commonly used methods of contraception among oral history respondents, with some commenting on the interruptive nature of these devices. Mairead (b.1953) who grew up in Dublin, used a cap which she obtained from the Well Woman centre in the late 70s before she got married. She explained to me how the method was not entirely suitable because ‘it was a messy old thing’ and that because you had to put it in before intercourse, it meant that ‘It would be kind-of elective. (laughs). Elective sex, like elective sections’. Similarly, Julie (b.1947) from the rural west of Ireland, also used a combination of the diaphragm and condoms with her husband, but found these methods unsatisfactory, stating, ‘It’s a strain on a relationship in a way. Because it seems to be the time that you’re fertile that you’re actually more receptive to the relationship’. Intra-uterine devices were also less common across the whole cohort. Úna (b.1946) had a coil

⁶¹ Kate Fisher’s respondents also utilised similar humour in relation to condoms. Fisher, *Birth Control*, p. 171.

⁶² Stephanie Panichelli-Batalla, ‘Laughter in oral histories of displacement: “One goes on a mission to solve their problems”’, *Oral History Review*, 47:1, pp. 73–92, on p. 88.

fitted in her late thirties when she had completed her family. Two other respondents expressed that they had a coil fitted but found it uncomfortable and had it removed. Ann (b.1948) had a traumatic experience with an IUD which she had fitted in 1986. As a result of an infection, she had to have a hysterectomy. Two other respondents had concerns that these methods were abortifacients and stated that this put them off using them.

In addition to class, location also had an important bearing on access to contraception. It is clear that individuals who lived in urban areas with family planning clinics which emerged between 1969 and 1978 could more readily access artificial contraception. However, this really depended on class, as Chapter 6 will illustrate, and the majority of clients at the family planning clinics in their early years tended to come from middle-class backgrounds. Arguably, cities would have also had a higher number of GPs meaning a better chance of finding one who would prescribe the pill.

For those who lived in the border towns, it was possible to obtain contraceptives from chemists in Northern Ireland. As Nuala O'Faolain wrote in her 1996 memoir, *Are you somebody?*:

When Edna O'Brien's first books came out they were a catalyst for women to exchange confidences, and I learnt that quite a few people went to Belfast to get condoms. Condoms, hats, cheap butter: that was the extent of it.⁶³

Maurice (b.1942) who grew up in the north of the country, married in 1971. He recalled going up to Northern Ireland to buy condoms, stating that 'there was no trouble buying them in the North. You only had to find a Protestant pharmacist. (laughs)'. However, he reflected that the condoms were not openly displayed and that 'You had to work up the courage to ask. But once I was married it was easy to work up that courage'. David (b.1948) and his wife Jean (b.1953) lived in a small town close to the border. David explained:

But you were lucky in that you had Derry, Strabane available for condoms and things like that. It's really what you could do. And yeah, people would have made use of the fact that they lived convenient to Derry and Strabane.

Diane (b.1949) also grew up and lived in a small border town. Diane felt that it was widely known that contraceptives could be obtained in the north, stating 'Well, when you live where we live in a border town, you shop in the north so easily that it was very common knowledge'. She explained that her husband used to go over the border to purchase condoms from a chemist there:

⁶³ O'Faolain, *Are You Somebody?* p. 60.

Oh, I think it was a very common pastime, yeah. I think it was a common pastime, and a common place to go and get them. I think lots of people went over to Northern Ireland.

Jim (b.1933) from Dublin, who lived in a border town, travelled to the north in the early 1980s to obtain condoms, stating, 'I mean, going over the border was very easy'. Northern Ireland's reproductive health services were also used by the Irish Family Planning Association in its early years when women were sent to the Royal Victoria Hospital in Belfast for IUDs.⁶⁴ Moreover, when David (b.1948) from a border town decided to have a vasectomy in the 1990s, he obtained this in Northern Ireland.

3.5 England: 'A Heathen Place'

The UK, and particularly England, was generally viewed as being more permissive in relation to sexual matters than Ireland. As Jennifer Redmond has suggested, 'The perception that Britain was a sexually advanced place in which looser morals were common appears to have been widespread, if inaccurate'.⁶⁵ Emigration from Ireland to the UK had a long history. It increased during the twentieth century and became an issue of moral and political concern after the foundation of the Irish Free State in 1922.⁶⁶ Colm (b.1940) from the rural Midlands, was one such migrant. He went to London in 1961 for a few years where he worked in a car factory. He said to me that in London, he felt that in relation to attitudes to sex, 'over there, it was anything goes. Do you know? And, and looking back on it, they were right,' and that his time in London had a significant impact on his knowledge. 'Let's put it this way, you came back a lot wiser than you went over'. Several of the respondents who spent time in England also reflected on the freedom that anonymity in England gave them. Rosie (b.1938) who grew up in the rural Midlands, emigrated to London in 1958, aged twenty:

Loved it, because I tell you something, you could be free. You could stand on your head and nobody would care a damn. Where Ireland it was so restrictive in those years. It was the '50s. And very restrictive.

Rosie found that attitudes were more permissive in England, mentioning that there were unmarried mothers in her office workplace. Moreover,

⁶⁴ 'Ireland's only family planning clinic', *Woman's Choice Weekly*, 9 June 1970, p. 55. Courtesy of Susan Solomons.

⁶⁵ Jennifer Redmond, *Moving Histories: Irish Women's Emigration to Britain from Independence to Republic* (Liverpool University Press, 2020), p. 130.

⁶⁶ Redmond, *Moving Histories*, p. 19.

it was in London that she found out about contraception for the first time. When asked whether she had heard anything about contraception before she moved to England, she said, laughing, 'Not at all. I heard it in London'.

Respondents who spent time in England reflected on the difference in attitudes. Jacinta (b.1954) worked in England for a summer and reflected on how attitudes to sex were different there among people of her age group:

I was working all summer over in England and it was a completely different attitude, they were all using them. While we were trying not to do it, they were all using condoms. Nineteen, twenty, whatever age we were. That age. They were all using condoms in England. Ireland was inclined to think: look at England, going down this awful route.

However, reflecting on these attitudes today, she expressed, 'England was a much better country at the time when you think about it. We were so held back when I think about that'. Marian, (b.1935) from the rural north of Ireland, described the difference between Ireland and emigrants' destinations:

England was different to Ireland. As a friend of mine said when she went to America she said the things that were a sin in Ireland weren't a sin in America ... As regards family and family planning and all that.

Ann (b.1945) from a town in the southwest felt that in her home town:

they were more worried about what the neighbours would say. They governed their lives like, 'Don't show that. Don't tell that'. Whereas in England you were anonymous. And I think that's why people liked it so much because they could be more themselves without being judged all the time.

As Jennifer Redmond's work has shown, life in British cities was depicted as having 'a deleterious effect on both male and female emigrants because, as they came mostly from rural backgrounds, they were thus ill-equipped for the freedoms and pitfalls it contained.'⁶⁷ Angela Macnamara's views on England are typical of such ideas. In an article which appeared in 1963 in *Woman's Way* she wrote: 'Many an Irish girl abroad has been introduced to the evils of contraception under the guise of "the modern way of life". Her innocence and ignorance are mocked and exploited. Without realising it, she falls victim to a way of life leading insidiously away from God and everything she valued at home'.⁶⁸

⁶⁷ Redmond, *Moving Histories*, p. 112.

⁶⁸ Angela Macnamara, 'Science and Control', *Woman's Way*, 30 November 1963, 55.

Clodagh, (b.1940) from the rural Midlands, went to England aged 18 to work for a period as a teacher in a private Church of England school. The nun principal from her old secondary school, 'was very upset that I went to England to – a heathen place, it wasn't good anyway'. The nun 'got me a job at home, a substitute again for someone on maternity leave' in her old secondary school so Clodagh returned home before completing a full year in England. Carmel (b.1952) remarked that people viewed England as 'a bad place to have to go to, and bad things happened there. The majority of the population being Protestant then didn't help. They didn't seem to think there was any Catholics there at all'. Similarly, her husband Martin (b.1952) reflected that 'People thought it was a location of sin'. Carmel and Martin found attitudes to be different in England and even lived together, something which they felt they would have been unable to do at home. Yet, the pretence that they were living separately had to be maintained when Carmel's mother visited from Ireland.

Some interviewees also reflected on the perception that there were more permissive attitudes to sex and contraception among English women. Dennis (b.1937) who grew up in a village in the south-west of Ireland, recalled a friend of his who went to England in 1955, telling him:

DENNIS: 'Do you know what?' He says, 'The girls in England, when they go out with you, they carry a condom in their handbag'. He said, 'Jesus', he said. (laughs).

LAURA: It must have been shocking.

DENNIS: That was a shock for him to find that she was ready for it and he was kind-of scratching his head, 'What have we missed on this', or whatever.

There was also a sense from some female respondents that being in England changed others' perceptions of them in relation to morality and family planning. Alice (b.1944) who grew up in the rural west of Ireland, for instance stated:

I remember going to England, and I came back, people thought that if you were in England you were game for anything.

Similarly, Hannah (b.1950) from a small town in the west of Ireland told me:

And of course, if you're in England, people automatically assumed... I remember meeting the mother of one of my close friends, still friends with her today, 'Oh you were one of the cute ones'. She said to me. I said, 'What do you mean?' 'Oh, you never got pregnant'.

Of course, in England, contraception was legally available. However, it was not always straightforward for women to obtain the pill from their

doctor, particularly if they were unmarried.⁶⁹ Nevertheless, with regard to condom access, England appeared much more liberal. Elaine (b.1950) from the rural west of Ireland, spent five years in England, marrying her husband over there in 1972. She stated, ‘You could be going up the street at night and the newspaper shops would be open and you could buy anything you wanted. We used to buy a bundle and bring them home’. Similarly, Richard (b.1954) recalled visiting the UK in the late 70s and expressed his amazement at seeing ‘condom machines everywhere’. He said, ‘I kind of said, “oh God. I can’t believe this!” I said “Look at all this uh... Johnnies – you just throw in a coin and off you go!” (laughs). So it was, it was, very different’. Indeed, in England, condoms were readily available through slot machines from the late 1920s. As Claire Jones has shown, at least 166 machines were placed all over London between 1929 and 1950, providing consumers with access to condoms at any time of the day and meaning no personal interaction between the seller and consumer.⁷⁰

3.6 Smuggling Contraceptives

Condoms were commonly brought back from England by Irish emigrants and holidaymakers. Clare’s (b.1936) husband bought condoms in England which they used for contraception. Clare was concerned about the health risks of other types of contraception and felt that with condoms ‘at least you were sticking as close to nature as possible’. Hannah (b.1950) grew up in a small town in the west of Ireland and worked in England in the 1970s. She brought condoms back for a friend of hers:

I do remember a girlfriend who was married and had, maybe she had three children at this time, but she asked me to bring ... you couldn’t obviously get the pill for her, but to bring Durex home for her and I’d never bought them before and I remember going in and buying them, and I used to have a free flight home and I looked very young, so they never asked to look into the suitcase. Full of these condoms.

Sally (b.1956) from the rural east also recalled friends bringing condoms back from England for her:

We always knew, if say if one of the girls was going over to England to visit her sister, and this is about from 16 to 18. We never had much money, but whatever

⁶⁹ Cook, *The Long Sexual Revolution*, pp. 273–88.

⁷⁰ Jones, *The Business of Birth Control*, pp. 178–81.

we had, we'd give them money to buy condoms, to bring them back. To try and keep ourselves safe.

Paula (b.1955) and her husband, who lived in a city in the west of Ireland, used condoms after they got married in 1976 before they had their first child in 1978. Paula described the process of obtaining condoms from her friend's husband:

At this stage, we were using condoms which were not available. So, '76, '77. Yeah. So, I'd say it to my friend that I'd gone to college with, I'd say, 'Listen, we don't have any condoms. And I don't know how to get them'. ... Her partner, he orders them. He'll sort it out for you. So he was sending away, I think to the UK for them ... Then there was no mobile phones then obviously and hardly house phones. So, I'd meet up with my friend and she said, 'We'll meet you outside the corner of High Street'. And he'd give him the packet. It was an exchange.

Paula explained that the handover of the condoms occurred between the two men, rather than the women and 'very discreetly the package would be handed over. Then we'd go off to Dublin to their flat and have a nice weekend with the condoms that they had provided via courier service, of course via the UK'.

Condoms were also sent by post from England, however, until 1973 and the McGee case, these could be intercepted by customs officers. Ann (b.1945) from a town in the southwest of Ireland recalled asking a good friend of hers in England to 'send me on some French letters'. She explained:

I got them a couple of times, okay? But this particular time I got a letter from the customs stating, 'Under section something of the something something Act, we have confiscated your parcel'. And would I like to be at the opening of it in Dublin. So, I'd say there was a lot of lads had a good time. (laughs).

Daithi (b.1950) from a small town in the west of Ireland worked in England in the early '70s and would bring condoms back for his friends. He recalled one occasion where:

I was stopped once, and I did actually have them in my car in the boot, and I'm not too sure what happened to them. I don't know if they were taken off me, or, but they were certainly spotted by the guys.

Myra (b.1947) from a small town in the south-east of the country explained that her sister-in-law would post over condoms to Myra and her husband. Prior to that the couple had relied on 'minding ourselves'. However, her sister-in-law sent over such a large supply that Myra asked "How long does she think we want them for?" We used to be giving them to the rest of the family, that's what we used to be doing'. However,

access to condoms did not mean that individuals necessarily knew how to use them. Margaret (b.1954) and her husband obtained condoms on their honeymoon:

And so when we went on our honeymoon to Jersey, we came home with the case half full of condoms. (laughs). Every other day I was sitting, either him or me was going into another chemist. We didn't know what they were or how you use them properly.

Christopher (b.1946) was over and back to England for work during the 1960s and 1970s and would purchase condoms there and bring them back. He also brought back supplies for his neighbour. He recalled his neighbour asking him if the condoms could be washed and reused. None of the respondents who brought condoms back from England remarked on feeling afraid about possible prosecution. It was not just condoms that were obtained in England. Siobhan (b.1942) from a town in the Midlands, who worked in Dublin, recalled hearing about some women who obtained the cap in England. However, doing so was a secretive practice and not something that people publicised:

Well, people went, a lot of people, you know you'd hear them say that, 'She went over to England to get that'. But it was always kind of hush, hush. You know, there was no major discussion about it.

Moreover, a number of respondents reported on knowing women who travelled to England for abortions in the 1970s and 1980s. Evidently, Ireland's proximity to the UK meant that those with the means or contacts could obtain birth control there.

3.7 Responsibility for Family Planning and Decision-Making

In a 1979 interview, Frank Crummey, one of the founders of Family Planning Services, suggested that it was women who were predominantly taking responsibility for obtaining contraception from family planning clinics:

The big change I see is among the women in Ireland. It's they who are doing all the getting, who'll come and ask, who'll say if they have a problem. Men still won't come into the clinics. Also Irish women are beginning to insist on getting something out of sex which their mothers didn't. In some ways this shocks their husbands.⁷¹

⁷¹ Rosita Sweetman, *On Our Backs: Sexual Attitudes in a Changing Ireland* (London: Pan Books, 1979), p. 157.

Crummey's statement here is revealing in that it suggests not only that it was women, rather than men, who were taking responsibility for family planning, but also alludes to a generational shift in terms of attitudes to sexual pleasure. Fisher has suggested that from the 1920s to the 1950s in England and Wales, birth control was seen as a male duty, with some men in her study viewing the management of family limitation as an expression of their dominance within all spheres of the marriage.⁷² However, studies of birth control practices in other contexts for the later period have complicated this picture. For instance, Caroline Rusterholz has shown that in Switzerland from around 1955 to 1970, birth control was rarely viewed as solely a male responsibility within married couples. Instead, birth control was either a shared spousal responsibility or a female responsibility, depending on the knowledge each spouse had.⁷³ However, in her study of Ukraine for the same period, Yuliya Hilevych found that while couples in both cities in the study conformed to the idea of women being sexually ignorant and men taking responsibility for family planning, there were regional differences.⁷⁴

The oral history evidence for this study suggests that as with knowledge around sex and reproduction, information on family planning was spread between women and responsibility for family planning largely lay with the female partner. Jeremiah (b.1942) from a small town in the north of the country explained that it was his wife who 'got whatever had to be got ... I never bought any of that, no'. He believed that his wife 'was better informed than I was', remarking that in general 'I think girls generally, you are a bit more, alert and alive to do it'. Similarly, Ellen (b.1949) from the rural south-east, who had six children, had responsibility for obtaining condoms, however, she would not go into her local chemist to buy them.

It may have been that owing to a lack of contraceptive options, and given that female-centred methods were most commonly used, that women ended up being the ones to take responsibility. Eugene (b.1939) from the rural Midlands, for instance, indicated that it was his wife who was knowledgeable:

Sure, we knew nothing – well Ann knew all, when it was safe, she knew the details yeah about the periods you know she knew about the safe period, you know she knew, knew all that.

⁷² Fisher, *Birth Control*, pp. 189–237. ⁷³ Rusterholz, 'Reproductive behavior', p. 56.

⁷⁴ Yuliya Hilevych, 'Abortion and gender relationships in Ukraine, 1955–1970', *The History of the Family*, (2015), 20:1, pp. 86–105.

Siobhan (b.1942) also alluded to the fact that it was up to her to find out information on family planning. She said: 'We went to a few [talks on the safe period]... well, I went, Jim wouldn't'. She felt 'it was up to me, but the thing is that if I hadn't decided myself after the fourth, the fifth ...', implying she would have continued having children. This attitude appears to have persisted among some of the younger respondents. Noel (b.1952) from a city in the west of Ireland felt that the issue of family planning was his wife's responsibility: 'It's like everything else, the men stayed back and stayed out of it and put all the responsibility on the women. Generally'. Similarly, Nicholas (b.1953) also from a city in the west of Ireland expressed 'I always ... I, I would have said ... I've thought about this of course, there was a lot, a strong, very much an onus on the woman to family plan'. Nicholas' wife went to her GP to obtain the pill after the birth of their three children. Nicholas maintained 'The reality is that a man did not involve himself in family planning'.

Respondents who discussed pre-marital sex suggested that it was the man in the relationship who took responsibility for birth control. Paula (b.1955) from a city in the west of Ireland, explained how she went away for a weekend with her boyfriend, who was not from Ireland 'And he had known about the situation in Ireland. So he had come armed. Okay? He brought his condoms'. Similarly, Evelyn (b.1940) who grew up in Dublin, said that with regard to relationships she had before marriage, the 'men that I had sex with, they took precautions. So I hadn't had to bother my head'. However, she felt that after marriage, it was a joint responsibility.

Decision-making around how many children to have was a complex matter and depended on the dynamics of the individual relationship and the personalities of the individuals involved. In some cases, this was negotiated between the couple, who then came to an agreement. Marian (b.1935) who lived in a city in the west of Ireland, had three children, and used the term 'we' to describe the use of contraception in her marriage:

MARIAN: Yeah we went on the pill and we used condoms as well at one time or other.

LAURA: Yeah. And did you talk much with your husband about it or did you decide yourself that you wanted to space the ...

MARIAN: He didn't want ... I suppose we agreed to it between us.

Similarly, Myra (b.1947) from a small town in the south-east of the country recalled a discussion with her husband:

when I had the third one, he says to me, 'You're not having any more'. I said, 'I'm not Charlie, because I don't want any more'. But he didn't mind, but some fellas were still that way, you will have how ever many children you will have. I have friends that have seven and eight children.

In Myra's case, while her husband suggested that she shouldn't have any more children, she saw it ultimately as her decision. Such testimonies illuminate Irish women's growing agency around contraceptive practices.

3.8 The Impact of Lack of Access to Contraception

Writing to Mary Kenny's column in the *Irish Press* in 1970, a 26-year-old woman with three children under the age of three from Killarney explained the strain that lack of access to contraception was having on her marriage. The woman had consulted her doctor about the safe period and was told that her periods were too irregular to use this method effectively. She then asked for the contraceptive pill but 'was refused in no uncertain terms'. The woman's dilemma was representative of that of many mothers of this generation. She wrote:

I love my babies dearly, but simply cannot face another pregnancy for two or three years at least. My husband is a very good husband and father and we love each other very much, but the way things are right now I feel like walking out and never coming back. I am sleeping in the babies' room for the last three months. I am simply terrified of getting pregnant again. Now please don't think my husband is a sex maniac. No he is not and neither am I, but our love life (I prefer the word love to sex) has always been wonderful. Now whenever he comes near me or gets tender or loving in any way I walk away from him, what else can I do? Oh! If only we could have love even now and again without fear of pregnancy how happy our marriage would be. The tension is driving us both mad and I dread what will happen if things go on this way.⁷⁵

Lack of access to reliable contraception had a profound impact on men and women in Ireland of fertile age in the 1960s and 1970s. More widely in this period, there was an increasing public acknowledgement of the ways that lack of access to contraception could jeopardise the harmony of a marital relationship. Without reliable contraception, the fear of pregnancy was a regular concern for couples. Worry from month to month and the impact of this anxiety on individuals' sex lives were common themes in the oral history interviews and in the contemporary press. After having five pregnancies, Siobhan (b.1942) explained that 'I didn't want any more children' and told me 'I just didn't like sex anymore. I was put off it completely'. Siobhan said she would refuse to have sex with her husband. She viewed this as her decision stating, 'Well it was up

⁷⁵ 'Woman's Press,' *Irish Press*, 9 November 1970, p. 8.

to me ... I made the decision and I said this, 'I would refuse or whatever'. Siobhan expressed that she did not mind being pregnant or giving birth, but found the balance of childrearing which fell to her to be a strain, 'because in those days, men, it was all left up to you, really, you know?'

Pierce (b.1948) who lived in Dublin after getting married, remarked on how lack of access to a reliable form of contraception caused significant stress for he and his wife. Pierce and his wife had four children. He recalled that with 'the first ones you'd want to have the family anyway like you know? Two or three, or maybe four. But then the trouble starts, you see. When you want to stop ... there's no stopping'. He and his wife used the rhythm method to try and space their pregnancies and to avoid having any more children after the birth of their fourth child, but Pierce remembered these periods when they were trying to avoid pregnancy as 'being fairly stressful because we were never sure whether, em, this - this rhythm worked or not, you know?' He described these periods of time as 'difficult' stating 'But I remember a lot of stress at the time, and Mary being worried about getting pregnant'.

Similarly, Maria (b.1957) summed up the anxiety she felt about getting pregnant as follows:

After our third child because, really, I mean, I was neurotic, I'd say, really, about not becoming pregnant. And as I said, knicker watching, watching for spots of blood with the period.

She told me:

And then you'd go to the loo and you'd be expecting your period and then the toilet paper would say, 'Oh, God no'. I remember times going out into the kitchen and we would be saying, 'Is it pink? Is there a sign of red in it?' This kind of thing, you know? Like when people ... when I hear people nowadays complaining about period cramps, they were the most fabulous feeling I ever got. Because I knew it was a period coming quickly.

Colm (b.1940) from the rural Midlands similarly explained the stress and worry experienced by women without access to contraception: 'Going from one month to the other. You know? One month, "Oh, thank God I'm not pregnant." Do you know? It's a terrible way to live'. Lizzie (b.1946) from the rural west of Ireland, had one daughter at the age of 39, followed by a number of miscarriages afterwards. She had no access to contraception. She alluded to the impact that lack of adequate contraception had on her marriage stating: 'I think there would have been a lot more happier marriages if people had contraceptives and a lot better'. She felt that had individuals had access to contraception:

They would have concentrated on the relationship instead of having always this worry and you felt the pressure, not that you were pressurised, because you let your body go, but you still had this in the back of your head in case I become pregnant. And yet you couldn't take the pill because it was against your religion. How silly were we?

In comparison to her experiences of sex during her marriage, Teresa (b.1946) felt that post-menopause her sexual experiences differed because 'it's great now at this stage in my life that we can be sexually active and not worry about pregnancy'.

A study by Karl Mullen, a Dublin gynaecologist, in 1967 surveyed 500 cases of marital stress found that 20% of stress in marriage was 'clearly associated with fertility control'. According to the article in *Woman's Way*, 'Dr. Mullen described a typical case: 'the wife who dreaded the nights and slowly became isolated from her husband. She became a very lonely person'. Mullen believed, however, that by 1972, women were less guilt-ridden than they had been when he undertook the study five years previously.⁷⁶ The impact of worrying about pregnancy was also referred to in the contemporary press. A father of five writing in the *Sunday Independent* in 1966 outlined the impact of lack of contraception on women's mental health, suggesting that the major cause of mental stress in many young Irish mothers was the fear of pregnancy and the impact that subsequent pregnancies would have on running the house. In the author's view:

She doesn't want any more children, yet, she lies in dread from month to month. If she does become pregnant, there is a complete escalation in the problems in the home. Trying to cope with six children while almost physically fit is one thing. Trying to cope while carrying a seventh is a completely different matter. And so it goes on to the eleventh and twelfth.

The man and his wife had practised the rhythm method but in their case it had not worked, meaning they had five children in seven years.⁷⁷ Margaret Lynch from Cork, writing to the *Sunday Independent* in 1966 in response to this letter stated 'Mothers of growing families do grumble about the little time there is to relax, but all the young mothers I know agree that this tension would be almost non-existent if the fear of pregnancy could be eliminated, for a time, at least.'⁷⁸ The strain of the 'safe period' was frequently discussed in *Woman's Way* magazine too.⁷⁹ In addition, a man interviewed by Dorine Rohan in 1969 suggested that fear of pregnancy led to marital infidelity. He told Rohan that 'A lot of

⁷⁶ Tom Myler, 'Women who live in fear', *Woman's Way*, 7 December 1973, p. 44.

⁷⁷ 'Family planning', *Sunday Independent*, 17 July 1966, p. 8.

⁷⁸ 'Birth control...', *Sunday Independent*, 7 August 1966, p. 15.

⁷⁹ For example, 'Marriage guidance: the safe period', *Woman's Way*, 6 October 1967, p. 45.

the lads who are married are out every night with girls because their wives won't let them near them for fear of more kids, and I don't blame them. We've been on the pill for three years and only for it I'd probably be out after the women too'.⁸⁰

Betty Hilliard's study of married women in Cork similarly found that the fear of pregnancy had an important impact on the respondents' enjoyment of sex.⁸¹ Likewise, Dolores, a district nurse in a Cork town in the mid-1950s who was interviewed for Máire Leane's study, spoke of the impact of lack of contraception on the women she met and how fear of pregnancy inhibited sexual enjoyment.⁸² Similarly, Kate Fisher's study of England and Wales found that some respondents linked their 'fear of pregnancy and the inadequacies of contraceptive methods to their lack of sexual satisfaction'.⁸³ *Woman's Way* regularly published on the impact of lack of access to contraception on 'ordinary' women. In one article in 1972, a woman called Joan was featured. Joan stressed the anxiety she felt as a result of her fear of repeated pregnancies:

Another child would be disastrous because we just cannot afford it what with the high cost of living, not to mention being too busy to think. Because of the fear of pregnancy, we don't even sleep together. Consequently we are not living a normal married life, a natural life. It's as simple as that.⁸⁴

The article also included the testimony of Esther who was described as a young mother with five children under the age of six, who stated, 'Frankly, I am waiting for the day when I can go into a chemist shop or a family planning centre and get just what I want'.⁸⁵

Oral history testimonies also allude to the stress experienced by women with a lack of effective contraception. Helena (b.1945) worked as a hairdresser as a young woman. She said that contraception 'was one of the subjects that was nearly always on the go' with her customers 'and you see when they're coming in pregnant again, and there would be such anger in them. (laughs). Oh, they would be so angry. Geared towards the church and the husband. Yeah'. Sally (b.1956) from the rural east of the country told me that in order to prevent pregnancy she 'just tried avoiding having sex, or if anybody was going to England, you'd give them money for condoms. It was just horrible'. The anxiety took its toll on Sally. She told me 'We lived from month...[to month]. I nearly would grow old with a hump on my back, waiting and seeing if I'd get a period'.

⁸⁰ Rohan, *Marriage Irish Style*, pp. 99–100.

⁸¹ Hilliard, 'The Catholic Church', pp. 36–7. ⁸² Leane, 'Embodied sexualities', p. 45.

⁸³ Fisher, *Birth Control*, p. 213.

⁸⁴ Tom Myler, 'Women who live in fear', *Woman's Way*, 7 December 1973, p. 44.

⁸⁵ *Ibid.*, p. 44.

Sally felt that her first marriage broke down largely as a result of the strain caused from a lack of access to contraception. Sally did not feel that her experiences were unusual. She stated:

but life did revolve around it. Like you know, I'm sure there was many a woman sitting at the table having her breakfast, or her dinner, and these thoughts, 'Am I pregnant?' And I know from some of the girls that lived up on the council estate at the back of our house, up in the park, the father from England and the father, some of the fathers came home for two weeks in August, and say the month of September, October, the women were always worried whether they were pregnant or not. The husbands were gone back and wouldn't see them for another year. But if they got away with it and weren't pregnant, it must have been the most joyous occasion.

3.9 Conclusion

This chapter has outlined the key family planning practices of oral history respondents born in the 1930s–1950s. Due to the lack of legal access to contraception as well as the condemnation from the Catholic Church of artificial methods of family planning, the majority of men and women born in the 1930s and 1940s who were interviewed as part of this study, tended to rely on natural methods of birth control. Class and location had a significant impact on choice of contraceptive method. Ultimately, this chapter has shown the endurance of natural/calendar-based methods during the period. With artificial contraception being illegal up until 1979, and the majority of those interviewed identifying as Catholic, this was the main method available to individuals. However, for participants born in the 1940s and 1950s, it appears that while these methods persisted, individuals were gradually beginning to exert more resistance in relation to contraception. In particular, individuals exercised ingenuity in obtaining contraceptives from England, or as the following chapter will show, through obtaining the contraceptive pill from a sympathetic doctor. The reliance on England for contraceptives such as condoms which could be ordered by post, but the characterisation of England as a 'permissive' society, highlights the hypocrisy of the Irish situation in relation to contraception. Women, rather than men, were for the most part responsible for family planning within the married couple.

From the 1960s, women's magazine, pre-marriage courses and booklets were sources of information on family planning, however, these forums tended to focus on natural methods for the most part. Information was also passed on by word-of-mouth. Discussions around the satisfaction of various types of contraceptives also reveals that by the 1960s and 1970s, although there wasn't a sexual revolution in Ireland, individuals were

beginning to recognise the importance of a healthy sex life to marital harmony. The chapter has also emphasised the impact that lack of access to contraception had on individuals, particularly women. While many respondents had a stoic attitude towards having children and accepted this as being part of the purpose of marriage, many women suffered considerable stress and anxiety over the issue. Many of these patterns persisted into the 1980s. Chapter 9 will show how, even after the legalisation of contraception in 1979, individuals still struggled to gain access to effective contraception, in spite of the increasing availability of artificial methods and permanent methods such as sterilisation.