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## **The fight for family planning in Spain during late Francoism and the transition to democracy, 1965-1979**

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### **Abstract**

This paper examines the funding and early development (1965-1979) of the Spanish family planning movement. This movement was composed of two branches: one medical, the other feminist. In spite of their different roots, the two branches had complementary interests, and during the years 1976-1979 they cooperated in the dissemination of contraception and sexual education, the establishment and consolidation of private and public family planning centers and the promotion of a new, more egalitarian (woman) patient-doctor relationship. The movement's final achievement was the legalization of the sale and advertisement of contraception in 1978, followed by the incorporation of family planning in the Spanish public health care system. This research is based on oral history interviews with feminist activists and doctors involved in the movement, print media from the period, and archival material.

Contraception was forbidden in Spain throughout the Franco dictatorship. Specific regulations date from January 1941, when a law on "the protection of natality, against abortion and contraceptive propaganda" was passed. In the Spanish penal code, contraception and abortion were considered offences of similar gravity and, together with infanticide, came under a category of crimes against the person. Only in 1978, three years after the dictator's death and during the transition to democracy, was the prohibition on the sale and advertisement of contraception lifted.<sup>1</sup>

Franco's legislation on contraception and abortion was a product of the regime's National Catholic ideology. Its objective was, on the one hand, to enhance natality in a country mutilated by the civil war, and on the other, to promote a gender regime in which women's bodies were a symbolic and material site for the

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<sup>1</sup>Agata Ignaciuk and Teresa Ortiz-Gómez, *Anticoncepción, Mujeres y Género. La "Píldora" en España y Polonia (1960-1980)* (Madrid: Los Libros de la Catarata, 2016).

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reproduction of the new Spanish nation.<sup>2</sup> Throughout the dictatorship period, banning the sale and advertisement of contraception and threatening anyone involved in the “crime” of “not-spontaneous” abortion with imprisonment, proved ineffective. Recent feminist scholarship on the history of Spain under Franco has demonstrated that individual women and couples utilized various birth control methods, including illegal abortions, from the very beginning of Franco’s rule in 1939.<sup>3</sup>

Although the model of “true Catholic womanhood”<sup>4</sup>—a selfless housewife and mother—was pervasive during the two decades following the civil war, the influence of this ideal weakened through the 1960s and 1970s, a time when socio-cultural and economic changes were starting to take effect and considerable numbers of women were entering universities and paid employment.<sup>5</sup>

Attempts by women and couples to control their fertility reflect the existence of an “alternative popular morality”, directly opposing the models promoted by

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<sup>2</sup>Gloria Nielfa Christobal, *Mujeres y Hombres en la España Franquista: Sociedad, Economía, Política, Cultura*, ed. (Madrid: Editorial Complutense, 2003); Aurora G. Morcillo, *The Seduction of Modern Spain: The Female Body and the Francoist Body Politic* (Lewisburg: Bucknell University Press, 2010).

<sup>3</sup>According to Anna Cabré, Andreu Domingo and Teresa Menacho, “Demografía y Crecimiento de la Población Española durante el Siglo XX,” *Mediterráneo Económico* 1, (2002): 121-38, the average number of live births per women of fertile age (Fertility Synthetic Index) even dropped in relation to previous decades (3.21 in 1935, 2.46 in 1950). As in other countries, these figures only increased during the 1960s baby-boom (2.53 in 1955, 2.93 in 1965). From then on, a rapid decline started (2.88 in 1970, 2.78 in 1975, 2.22 in 1980). See also, Clive Beadman, “Abortion in 1940s Spain: the Social Context,” *Journal of Gender Studies* 11, no.1 (2002): 55-66; Inmaculada Blasco Herranz, “Actitudes de las Mujeres bajo el Primer Franquismo: la Práctica del Aborto en Zaragoza durante los años Cuarenta,” *Arenal* 6, no.1 (1999):165-80; Ignaciuk and Ortiz-Gómez, *Anticoncepción, Mujeres y Género*.

<sup>4</sup>Aurora G. Morcillo, *True Catholic Womanhood: Gender Ideology in Franco's Spain* (Chicago: Northern Illinois University Press, 2000).

<sup>5</sup>On social changes during late Francoism, see Nigel Townson, ed., *Spain Transformed. The Late Franco Dictatorship, 1959-75*, (London: Palgrave, 2010) and Monica Threlfall, “Feminist Politics and Social Change in Spain,” in *Mapping the Women's Movement: Feminist Politics and Social Transformation in the North*, ed. Monica Threlfall (London: Verso, 1996), 115-51.

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Church and State.<sup>6</sup> This alternative morality came to the fore in public debates concerning birth control in the mid-1960s, in response to the introduction of the pill to the Spanish market. Promoted as *anovulatorios*, oral contraceptives were officially classified as therapeutic drugs for the treatment of gynecological problems and sterility. Discussions on the moral and medical aspects of *anovulatorios*, initiated in both medical and Catholic circles, soon began to appear in newspapers and general interest magazines, where they remained despite solidification of the Catholic Church's prohibition of the pill as a birth control method in Pope Paul VI's 1968 Encyclical, *Humanae Vitae*.<sup>7</sup> While the hierarchy of the Spanish Catholic Church adhered to the Encyclical, a number of Catholic authors maintained a public defense of *anovulatorios*, declaring them morally acceptable tools for married Catholics and demanding the legalization of contraception and, at times, abortion.<sup>8</sup> These media discussions reflect the broader drive for social change occurring in Spanish civil society during the last two decades of Franco's regime, which exhibited increasing social and legislative tolerance from the mid-1960s onwards without renouncing the ongoing repression; this continued until the dictator's death in November 1975.<sup>9</sup>

The aim of this paper is to examine the development of social mobilization and activism in favor of birth control in Spain, focusing on the period from the emergence of contraception as a subject of public debate in the mid-1960s, to

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<sup>6</sup>Beadman, "Abortion in 1940s Spain," 56. See also Leslie Reagan, *When Abortion was a Crime: Women, Medicine and Law in the United States, 1867–1973* (Berkeley: University of California Press, 1997).

<sup>7</sup>Ignaciuk and Ortiz-Gómez, *Anticoncepción, Mujeres y Género*; Teresa Ortiz-Gómez and Agata Ignaciuk, "'Pregnancy and Labour Cause more Deaths than Oral Contraceptives: The Debate on the Pill in the Spanish Press in the 1960s and 1970s,'" *Public Understanding of Science* 24, no.6 (2015): 658-71; Karina Felitti, "El Mundo Católico Ante la Paternidad Responsable," in *La Revolución de la Píldora. Sexualidad y Política en los Sesenta* (Buenos Aires, Edhasa, 2012), 153-88.

<sup>8</sup>For instance, Elisa Lamas, "Una Madre de Familia Numerosa Medita acerca de la *Humanae Vitae*," *Destino*, August 17, (1968): 22-23; Enrique Miret Magdalena, "La Iglesia y la Natalidad," *Triunfo*, July 11, (1964): 32-33; "Letters to editor," *Destino*, August 31, (1968): 3-7. See also Ortiz-Gómez and Ignaciuk, "Pregnancy and Labour".

<sup>9</sup>Townson, *Spain Transformed*; Antonio Cazorla Sánchez, *Fear and Progress: Ordinary Lives in Franco's Spain, 1939–1975* (Chichester: Wiley-Blackwell, 2010).

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shortly after the legalization of the sale and advertisement of contraception in 1978.<sup>10</sup>

During this period, contraception and abortion rights were publicly debated in many Western countries. Britain, France, Italy, West Germany, Canada and the US, all witnessed liberalization of legislation in this matter before the end of the 1970s, the contribution of feminist and family planning movements being decisive in these processes.<sup>11</sup> However, while the histories of birth control movements in Western European and North American contexts have received ongoing academic attention, non-democratic contexts, including the Spanish case, have not undergone sufficient scrutiny.

The beginnings of family planning activism in Spain are identified in the existing literature with feminist activism for contraception and abortion during the second half of the 1970s.<sup>12</sup> However, we argue that—in a manner similar to events

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<sup>10</sup>According to Alison E. Woodward, Jean-Michel Bonvin and Mercè Renom, eds., *Transforming Gender and Well-Being in Europe. The Impact of Social Movements* (Farham: Ashgate, 2011) three pre-conditions for social mobilization are: the dissatisfaction of different social groups; material and symbolic resources for carrying out specific demands; and a structure that affords opportunity.

<sup>11</sup>Luciana Percovich, ed., *La Coscienza nel Corpo. Donne, Salute e Medicina negli Anni Settanta*, (Milano: Franco Angeli, 2005); Ignaciuk, Ortiz. *Anticoncepción*; Bibia Pavard, *Si Je Veux, Quand Je Veux: Contraception et Avortement dans la Société Française (1956–1979)* (Rennes: Presses Universitaires de Rennes, 2012); Marie Françoise Lévy, “Le Mouvement Français pour le Planning Familial et les Jeunes,” *Vingtième Siècle. Revue d'histoire* 75 (2002): 75-84; Kate Fisher, “The Delivery of Birth Control Advice in South Wales between the Wars,” in *Oral History, Health and Welfare*, eds. Joanna Bornat, Robert Perks, Paul Thompson and Jan Walmsley (London: Routledge, 2000), 249-69; Johanna Schoen, *Choice and Coercion: Birth control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005); Ellen Chesler, *Woman of Valor: Margaret Sanger and the Birth Control Movement in America* (New York: Simon and Schuster, 2007); Cathy Moran Hajo, *Birth Control on Main Street: Organizing Clinics in the United States, 1916–1939* (Chicago: University of Illinois Press, 2010); Manon Parry, *Broadcasting Birth Control: Mass Media and Family Planning* (New Brunswick: Rutgers University Press, 2013).

<sup>12</sup>Silvia Lúcia Ferreira, “El Movimiento Feminista y la Salud de las Mujeres: La Experiencia de los Centros de Planificación Familiar (Cpf) en Catalunya (1976–1982),” *Revista Estudios Feministas* 16, no.3 (2008): 785-807; Maritxell Ferré Baldrich, “Los Centros de Planificación Familiar (Cpf) en Cataluña: Logro del Movimiento Feminista en la Transición, in *No es País para Jóvenes. Encuentro de Jóvenes Investigadores en Historia Contemporánea*, ed. Alberto González González (Vitoria: Instituto Valentín de Foronda, 2012), 1-21.

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in Italy and France—family planning activism in Spain was originally initiated in medical circles during the late 1960s, before exploding in the following decade thanks to the commitment of radical women's organizations and their cooperation with liberal medical professionals.<sup>13</sup>

Our analysis focuses on the first stage of this movement, from its birth at the beginning of the 1970s until 1980, shortly after its first goal—the decriminalization of contraception—had been accomplished. During most of this time, unity was a fundamental strategy for the Spanish feminist movement; the main locus of open conflict was the issue of exclusive feminist militancy vs. “double militancy” in the feminist groups and clandestine democratic political parties. The next decade the Spanish feminist movement witnessed an explosion of plurality.<sup>14</sup> Following decriminalization of contraception in October 1978, the family planning movement underwent substantial changes. While the institutionalization of family planning brought recognition for both medical and feminist family planners, feminist radical activists shifted their focus to campaigning for the decriminalization of abortion, finally attained in 1985.<sup>15</sup>

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<sup>13</sup>Percovich, *La Coscienza*; Agata Ignaciuk, “Discursos Feministas sobre el Aborto y la Anticoncepción en Italia (Años Setenta) y Polonia (Años Noventa)” (MA diss., Universidad de Granada, 2009); Pavard, *Si Je Veux*; Lévy, “Le Mouvement”; Carmen Suárez Suárez, *Feministas en la Transición Asturiana (1975–1983). La Asociación Feminista de Asturias* (Oviedo: Ediciones KRK, 2003); Mary Nash, *Dones en Transició. De la Resistència Política a la Legítimat Feminista: Les Dones en la Barcelona de la Transició* (Barcelona: Ajuntament de Barcelona, 2007).

<sup>14</sup>The national feminist congress of December 1979 in Granada is considered a milestone for this explosion of plurality: Mary Nash, *Dones en Transició. De la Resistència Política a la Legítimat Feminista: Les Dones en la Barcelona de la Transició* (Barcelona: Ajuntament de Barcelona, 2007), 163; Conxa Llinàs Carmona, *Feminismes de la Transició a Catalunya: Textos y Materials* (Barcelona: Horsori, 2008), 63-111; Meritxell Ferré Baldrich, “Pensament i Acció del Moviment Feminista a Catalunya durant la Transició Democràtica (1975–1985),” (PhD diss., Universitat Rovira i Virgili, 2013), 182, 415-416; Francisco Arriero Ranz, *El Movimiento Democrático de Mujeres. De la Lucha contra Franco al Feminismo* (Madrid: Libros de la Catarata, 2016), 29, 170-71, 181, 229-230.

<sup>15</sup>On campaigns for the decriminalization of abortion in Spain, see Larissa Jamie Slovin, “Re-Interpreting Spanish Feminism: Strength and Influence in the Campaign for Abortion Reform” (BA diss., Wesleyan College, 2008); Ana Maria Prata Pereira, “Women's Movements, the State, and the Struggle for Abortion Rights: Comparing Spain and

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Our study is based on oral sources, archival documents and the Spanish press. We carried out oral history interviews with key people—ten female, one male—involved in the Spanish family planning movement in Madrid, Granada and Seville. During the 1970s and 1980s, all but four interviewees were active in the feminist movement. Five informants were gynecologists (four women, one man), one worked as a nurse, three were female university students (one a medical student) and one was an Englishwoman working for the British Family Planning Association and International Planned Parenthood Federation, Europe Region (London). All interviews were conducted between 2009 and 2010, nine by Teresa Ortiz-Gómez, one by Agata Ignaciuk and two by Eugenia Gil García, a member of our research team.<sup>16</sup> Apart from extensive documentation from the personal archives of the informants, we have also utilized the records of the British Family Planning Association (Wellcome Library, London) and the International Planned Parenthood Federation, Europe Region. Furthermore, we examined the Spanish daily press and general interest magazines (including *ABC*, *La Vanguardia*, *El País*, *Triunfo*, *Cuadernos para el Diálogo*, *Cambio 16*, *Destino*) along with medical and sociological literature from the 1960s and 1970s.

In what follows, we firstly analyze medical activism for family planning in the late 1960s and early 1970s, materialized in the establishment of clinics providing birth control within Spanish public hospitals. Secondly, we examine the involvement of feminist and women's health activists in the delivery of family planning advice and methods in Madrid and Barcelona throughout the 1970s, mostly before contraceptive methods were legalized late in 1978. Finally, we sketch the early effects of this decriminalization on birth control provision and on the family

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Portugal in Times of Democratic Expansion (1974–1988)” (PhD diss., University of Minnesota, 2007).

<sup>16</sup>This study has been developed in the context of two research projects on the history of contraception during Francoism and the transition to democracy: *La Constitución de la Planificación Familiar en España durante los últimos años del Franquismo y en la Transición Democrática*, HAR2008-05809-HIST) and *ASYS: Anticoncepción, Sexualidad y Salud: Memorias de Vida y Prácticas Sanitarias en España durante el Franquismo y la Transición Democrática*, HAR-2012-39644-C02-01, funded, respectively, by the Spanish Ministry of Science and the Spanish Ministry of Economy.

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planning movement itself; as during the period under discussion the primary focus of the movement was family planning, we only briefly touch upon abortion activism before 1978.

### **“Before 1978 we moved about with fear”: Medical Activism for Family Planning**

Medical family planning activism in Spain began in the first outpatient clinics created in public hospitals at the beginning of the seventies, several years before Franco's death in 1975, and well before the legalization of contraceptives in 1978. The original aim was to provide birth control counseling to women with general health problems. The first such clinics were founded within university hospitals in Spain's largest cities: Barcelona's *San Pau* Hospital in 1971, Madrid's *La Paz* Hospital in 1972 and the *Clinic* Hospital in Barcelona in 1972, followed by smaller university cities such as Granada (1975), Zaragoza (1975), Valladolid (1976) and Seville (1978).<sup>17</sup> These activities were amongst many examples of health activism in Spain during the transition to democracy, when health professionals and social agents (such as political parties, trade unions, neighborhood associations, and others) lobbied for reform of the health care system.<sup>18</sup>

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<sup>17</sup>Eugenio Castells, *El Derecho a la Contracepción* (Barcelona: Rol, 1981); Antonio Miñano Navarro, *Situación actual de la Planificación Familiar en Zaragoza*. (Zaragoza: Instituto Fernando el Católico, 1980); “Memoria de la Consulta de Planificación Familiar Adscrita al Departamento de Obstetricia y Ginecología del Hospital Universitario de Valladolid” (1978), unpublished report donated by Dr. Antonio Albert; Asunción Villatoro, gynecologist, interview by Teresa Ortiz-Gómez 1, Madrid, May 19, 2010; Sergio Fernández Penela, gynecologist, interview by Eugenia Gil-García, Madrid, September 15, 2009; Esteban Rodríguez-Ocaña, Agata Ignaciuk and Teresa Ortiz-Gómez, “Ovulostáticos y Anticonceptivos. El Conocimiento Médico sobre la Píldora en España durante el Franquismo y la Transición Democrática (1940–1979),” *Dynamis* 32, no.2 (2012): 467-94; Eugenia Gil-García, Teresa Ortiz-Gómez, and Agata Ignaciuk, “El Movimiento de Planificación Familiar en Sevilla durante la Transición Democrática,” in *Investigación y Género. Logros y Retos. Actas de III Congreso Universitario Nacional Investigación y Género* (Sevilla; Unidad de Igualdad Universidad de Sevilla, 2011), 726-36.

<sup>18</sup>On health care and democratic reform in Spain, see Angélica Fajardo Alcántara, “El Proceso de Especialización en Medicina Familiar y Comunitaria en España” (PhD diss., Universidad de Granada, 2007).

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These first outpatient family planning clinics maintained a similar organizational pattern. Their names were not directly connected to contraception—a “puerperal clinic” in *La Paz*, a “sterility clinic” in Granada, a “family orientation surgery” in Zaragoza, for example—and their primary target patients were women who had been treated for difficult pregnancies or labors in the same hospital. The clinics were frequently managed by young female doctors in Spain in the mid-1970s, women doctors accounted for 10.6 percent of medical professionals and numbers were rising, although there were significant variations between regions, towns and specialties. In the Southern Spanish Andalucía region, where Granada and Seville are situated, the proportion of women doctors was 9 percent. The most feminized specialties were pediatrics and gynecology.<sup>19</sup> In 1972, less than 3 percent of female doctors in Madrid specialized in gynecology, while the figure was slightly higher in other university towns like Granada and Barcelona (5 and 6 percent respectively).<sup>20</sup> Gynecology residents often completed their education and early practice in harsh conditions. Internship was especially difficult for women medical students in Madrid, where distinguished professors of gynecology maintained misogynist attitudes, defining the female body in terms of reproduction as its biological destiny and identifying femininity with motherhood: ideological notions shared with Franco's regime.<sup>21</sup>

Women doctors in charge of the first outpatient family planning clinics were afforded considerable autonomy. While some were pushed towards contraception by higher-ranking male colleagues, others had a personal vocation for the field and sought specific training abroad before commencing family planning practice. This was the case for Asunción Villatoro, a pioneer of the family planning movement in Spain. In the summer of 1969, twenty-six year old Villatoro completed her medical

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<sup>19</sup>Teresa Ortiz-Gómez, “La Mujer como Profesional de la Medicina en España Contemporánea (1898–1981),” *Dynamis* 5-6 (1986): 343-66.

<sup>20</sup> *Ibid.*

<sup>21</sup>Tim Mitchel, “Authoritarian Medicalization and Gynephobia under Franco,” *South Central Review* 21, no.2 (2004): 1-14; Agata Ignaciuk, Teresa Ortiz-Gómez and Esteban Rodríguez-Ocaña, “Doctors, Women and the Circulation of Knowledge of Oral Contraceptives in Spain, 1960s–1970s,” in *Gendered Drugs and Medicines. Historical and Socio-Cultural Perspectives*, eds. Teresa Ortiz-Gómez and María-Jesús Santesmases (Farnham: Ashgate, 2014), 133-52.



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studies at the University of Barcelona. The following year, having undergone some clinical training in pediatrics, she attended a course in London on family planning by the International Planned Parenthood Federation. Her decision to redirect her professional interest towards gynecology and family planning was motivated by the women who came to her, either as patients or mothers of patients, demanding information on how to prevent new pregnancies, a topic Villatoro felt she knew too little about but considered an essential part of medical practice:

Women [attending the pediatrics' clinic] were asking me about that [how not to get pregnant again], but I had not received any training on that. ...And I was very concerned about that topic, and I guess I must have talked about it with Elvira [a young female doctor and friend], and I learned it was banned. And she told me, "listen, I was offered an International Planned Parenthood Federation grant to participate in a course about contraception in London". And I went to England...And I came back convinced that there was a task to do. And I was very, very motivated. I felt I wanted to do it, with that situation; women have to stand up, have to be "whole" people.<sup>22</sup>

While it was not unusual for women to demand contraceptives from their doctors, few medical professionals were willing to provide their patients with information about effective methods.<sup>23</sup> The main motivations for those doctors who did offer some kind of contraceptive counseling were preserving the health of women and limiting births in large families; only a small minority did so believing that contraception was a woman's right.

Another young gynecologist, Dr. Amalia Jiménez (b. 1947), was presented in 1975 with the opportunity to run the outpatient "sterility" clinic being established in the Department of Obstetrics and Gynecology of *Hospital Clínico San Cecilio* (henceforth *Clínico Hospital*):

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<sup>22</sup>Villatoro interview. All translations from Spanish are by the authors.

<sup>23</sup> Ignaciuk, Ortiz-Gómez and Rodríguez-Ocaña, "Doctors, Women",

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(Dr.) Paco Vergara [a senior colleague] went to Paris and brought back information about contraceptive methods that were unknown here. In his clinical sessions he showed us the innovations he had brought: vaginal sponges... diaphragms, IUDs. Paco gave us information about all of this and the initiative [for creating the clinic] was his and Don Vicente's [Salvatierra, professor of gynecology and obstetrics]. It was in 1975, because Franco was still alive. The first clinic was clandestine.<sup>24</sup>

Having completed a gynecology residency in Granada, Amalia Jiménez was approached by her professors and encouraged to provide family planning counseling in the newly established, and camouflaged, clinic. At that time she was the only female doctor in the *Clínico's* Department of Gynecology.

Similarly, Silvia de los Reyes was appointed by Professor José María Bedoya, head of the department of gynecology and obstetrics, to organize the outpatient family planning clinic at Seville's *Virgen Macarena* University Hospital in 1978. As she recalls, Professor Bedoya "always thought that a woman communicated better with other women", and de los Reyes was given a free rein.<sup>25</sup> The involvement of women doctors in the provision of family planning services was not unique to Spain, being a common practice in European countries and the United States during the twentieth century, and particularly evident in the British National Health Service during the 1960s and 1970s.<sup>26</sup>

The outpatient clinics in Barcelona, Granada and Seville were departures from the norm within the Spanish medical landscape. Their creation was a direct result of the personal and professional initiatives of progressionist male directors of obstetrics and gynecology departments to provide women with family planning methods and counseling. Although support for contraception and doctor's

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<sup>24</sup>Amalia Jiménez, gynecologist, interview by Teresa Ortiz-Gómez, Granada, January 12, 2010.

<sup>25</sup>Silvia de los Reyes, gynecologist, interview by Eugenia Gil-García, Seville, December 15, 2009.

<sup>26</sup>Lesley A. Hall, "Suitable Work for a Woman. Women Doctors and Birth Control in the Inception of the NHS," *Clio Medica* 61 (2001): 127-48; AUTHOR 1, "Book Chapter 1."

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involvement in its provision increased amongst Spanish medical professionals throughout the 1960s and 1970s, many doctors continued to express extreme hostility towards the provision of family planning in public hospitals.<sup>27</sup> This resistance was not only the result of ideology preventing the more conservative doctors from accepting the very idea of family planning, but also related to economic factors: public clinics provided free services which women might otherwise secure from private gynecological practice.<sup>28</sup>

The Granada and Seville outpatient hospital clinics were soon being visited by women from within the hospital (female employees, medical students) and beyond, who had learned of their existence by word of mouth and were keen to access services such as prescriptions for oral contraceptives and medical examinations. They were also drawn by the fact the staff treated women with respect and understood their desire for contraceptives, something rather unusual in both private and public gynecological clinics of the time, where women were expected to attend when ill or pregnant, and young, single and healthy women were not welcome.<sup>29</sup> In a context where gynecological practice in general tended to be condescending, if not positively hostile towards unmarried women having sexual relations, and where many doctors were reluctant to provide contraceptive advice even to married women, outpatient hospital family planning clinics provided a safe space and an attractive alternative to private medicine.<sup>30</sup>

Although statistical data from these clinics are scarce, the available figures demonstrate their popularity. Between 1976 and 1978, an average of 130 new and 200 revisiting women attended the outpatient family planning clinic of the

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<sup>27</sup>For instance, in May 1976 a number of Barcelona doctors asked the local Medical Association to defend the promotion of Family Planning and its inclusion in the National Health Service. Montserrat Roig and Julia Luzán, "Anticoncepción. Mesa Redonda," *Triunfo*, August 7 (1976): 31. Ignaciuk and Ortiz-Gómez, *Anticoncepción, Mujeres y Género*, 86-106.

<sup>28</sup>De los Reyes interview.

<sup>29</sup>Reyes Hernández, nurse, interview by Teresa Ortiz-Gómez, Granada, January 5, 2010. See also Comisión por la Planificación Familiar de la Asociación Española de Mujeres Universitarias, "La Planificación Familiar" (paper presented at the meeting *Ciclo sobre Familia y Salud Mental*, Gran Hospital de Madrid, July 10-11, 1976). Also, Elena Arnedo, interview by Teresa Ortiz-Gómez, Madrid, May 7, 2010.

<sup>30</sup>Ignaciuk, Ortiz-Gómez and Rodríguez-Ocaña, "Doctors, Women".

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University Hospital of Valladolid—a town with 300,000 inhabitants—each month.<sup>31</sup> In 1979, an average of 330 women a month attended the family planning clinic of the *Clínico* Hospital in Granada, a town with approximately 250,000 inhabitants.<sup>32</sup>

Between 1972 and 1978, the daily routine in these pioneering clinics frequently required staff to circumvent hospital directives and contemporary legal norms, especially when counseling healthy women for whom contraception was not therapeutically justifiable. As demand for the services was too high to be met within established timetables, staff almost always needed to work (unpaid) overtime.<sup>33</sup> As can be concluded from our sources, despite this heavy workload, the practice was attractive from a professional perspective for a number of reasons. One was job satisfaction: many medical practitioners had become involved in family planning due to a strong sense of social commitment, while others developed such a sense of commitment during their experience in the clinics. The chance to be involved in an advancing medical field with global recognition from such organizations as the International Planned Parenthood Federation (IPPF) and, even more importantly, the World Health Organization (WHO), must also have been appealing.<sup>34</sup>

University clinic personnel were conscious of the risks involved in their work. Dr. Amalia Jiménez repeatedly described the clinic she administrated in the *Clínico* Hospital in Granada as “clandestine.”<sup>35</sup> Dr. Asunción Villatoro, who worked in the external family planning clinic in Barcelona’s *Clinic* Hospital, discussed the tensions that could develop between gynecologists over legal issues:

Before 1978–1979 we moved around with fear. We moved around with fear. And, when we were giving pills, or inserting IUDs, we were careful not to write it down directly in the patient’s medical history. In the *Clínica* (...) during a clinical session a superior told me “doctor, you know that in this

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<sup>31</sup>“Memoria.”

<sup>32</sup>Federico Goyarts, *Centros de Planificación Familiar en España 1982* (London: IPPF Europe Region, 1981), 6. Population data comes from *Censos de Población y Padrones de Habitantes*, Instituto Nacional de Estadística (I.N.E.), years 1976 and 1980.

<sup>33</sup>De los Reyes, Fernández Penela, and Jiménez interviews.

<sup>34</sup>Villatoro, Jiménez, and Fernández Penela interviews; “Memoria.”

<sup>35</sup>Jiménez interview.

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country it is illegal to insert an IUD". And I said "professor, the world is progressing thanks to people who don't agree with the norms. There are ways to justify an insertion of an IUD." (...) I was in Professor Conill's department and he supported me. But yes, there were these frictions.<sup>36</sup>

Such differences, however, rarely affected daily practice in the clinics. For some professionals, supporting women's right to birth control even extended to assisting women who turned to public hospitals following induced abortions. As feminist gynecologist Elena Arnedo (1941–2015) recalled, many Madrid-based doctors turned a blind eye to illegal abortions, which they "finished" without notifying the authorities.<sup>37</sup>

Some of the health professionals staffing the early hospital clinics were also involved (or became involved later) in family planning activities beyond the hospital, collaborating with feminist activists campaigning for the legalization of contraceptives, and participating in the first family planning associations and networks. For instance, Dr. Amalia Jiménez played a significant role in establishing the Andalusian Family Planning Association, Dr. Elena Arnedo was chairwoman of the Castilian Family Planning Association and Dr. Asunción Villatoro was the promoter and initial chairwoman of the first Spanish Family Planning Federation (FEPF), conceived as both an umbrella organization and a stimulus to family planning activism. Primarily a collaborative space linked with IPPF-Europe Region, the FEPF revealed significant organizational difficulties which ultimately impeded its consolidation: the organization only operated between December 1977 and mid-1980.<sup>38</sup>

Differences among professionals involved in family planning activities also became evident on other levels. The first national symposium on family planning,

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<sup>36</sup>Villatoro interview.

<sup>37</sup>Arnedo interview. On this kind of collaboration in Valencia and Seville, see José Ángel Lozoya Gómez, *El Aborto: Historias de Combate y Resistencia. El Caso de la Clínica Los Naranjos* (Sevilla: Fundación Iniciativa Social, 2014).

<sup>38</sup>On the FEPF, see Teresa Ortiz-Gómez et al., "Activismo Feminista y Movimiento Asociativo por la Planificación Familiar en España", in *Transmisión del Conocimiento Médico e Internacionalización de las Prácticas Sanitarias: Una Reflexión Histórica*, eds. M<sup>a</sup> Isabel Porras Gallo et al. (Ciudad Real: UCLM, 2011), 141-47.

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organized by the *Dirección General de Sanidad* [Directorate General for Health], was held at Mahón, Mallorca in June 1977. Medical professionals from various specialties, along with sociologists, statisticians and lawyers, were brought together to outline a new policy for the field of family planning. None of the most notable pioneering activists in the field, whether doctors or feminist advocates, were invited to the meeting, demonstrating a lack of recognition which caused great discontentment and frustration.<sup>39</sup>

### **“A New Sexual Ethics”: Feminist Family Planning Activism**

Between the establishment of Franco's regime in the 1940s and its decline in the early 1970s, an organized Spanish feminist movement was virtually nonexistent. This situation began to change slowly in the 1960s, coinciding with the founding of the first women's groups focusing on women's rights and the extensive circulation of literature on “women and society” in Spain.<sup>40</sup> One of the earliest women's groups was the *Movimiento Democrático de Mujeres* (MDM) [Women's Democratic Movement], created in 1964 by the then illegal Spanish Communist Party (PCE). The MDM—along with the few other legal and illegal independent women's organizations, including the Spanish University Women's Association, *Asociación Española de Mujeres Universitarias* (AEMU)—took little interest in women's health issues and family planning until the mid-1970s.<sup>41</sup>

After Franco's death in November 1975, women's groups reinforced their organization and public presence. The national conference for women's liberation

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<sup>39</sup>Penela interview; Julia Luzán, “Planificación Familiar a la Española,” *Triunfo*, July 9 (1977), 42-44. “Comienza en Mahón el I Seminario sobre Planificación Familiar,” *El País*, June 14 (1977), accessed May 10, 2016, [http://elpais.com/diario/1977/06/14/sociedad/235087202\\_850215.html](http://elpais.com/diario/1977/06/14/sociedad/235087202_850215.html); As far as we know, all of its participants were men.

<sup>40</sup>These include Mireia Bofill i Abelló et al., *La Mujer en España* (Barcelona: Ediciones de Cultura Popular, 1967); María Campo Alange et al., *Habla la Mujer: Resultado de un Sondeo sobre la Juventud Actual* (Madrid: Edicusa, 1967); Evelyne Sullerot's *Mujer, Sexo y Sociedad Industrial* (Madrid: Cid, 1966). The books by Campo Alange et al. and Sullerot explicitly addressed the topic of women's right to contraception.

<sup>41</sup>Gloria Nielfa Cristóbal, “El Debate Feminista durante el Franquismo,” in “Mujeres y Hombres,” 269-297; Monica Threlfall, “Feminist Politics”; Arriero Ranz, *El Movimiento*.

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in Madrid (*Jornadas por la Liberación de la Mujer*) in December 1975 and the Catalan conference on women (*Jornades Catalans de la Dona*) in May 1976 exemplify this intensification of activity. Specific groups (called *comisiones*) were established at both meetings to fight for “free contraceptives, free sexuality separated from procreation and the right to abortion.”<sup>42</sup> From this point on, reproductive rights in general, and the legalization of contraception and abortion in particular, became common goals for all ideological branches of the Spanish feminist movement, and action towards achieving this goal multiplied and intensified.

By the beginning of the 1970s, consciousness-raising groups had begun to appear in Spain, inspired by American and Italian radical feminism.<sup>43</sup> One such group—which came to be known as *Frente de Liberación de la Mujer* (Women's Liberation Front, henceforth FLM)—was established within the AEMU, in Madrid, where they found a legal coverage to meet, talk and develop their activities.<sup>44</sup> The FLM, an anti-capitalist and independent women's liberation group, accepted and practiced a double militancy in order to challenge class and patriarchy, the two main systems of women's oppression.<sup>45</sup> FLM's members organized themselves into *comisiones*, one being named the *Comisión por la Anticoncepción y el Aborto* (Contraception and Abortion Group), which had a significant impact on some long-term members of the AEMU for whom the “right to one's body” they advocated was a completely new and shocking concept.<sup>46</sup>

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<sup>42</sup>Ferreira, “El Movimiento Feminista.”

<sup>43</sup>Pilar Toboso, “Las Mujeres en la Transición. Una Perspectiva Histórica,” in *El Movimiento Feminista en España de los Años 70*, eds. Carmen Martínez Ten, Purificación Gutiérrez López, and Pilar González Ruiz, *El Movimiento Feminista* (Madrid: Cátedra, 2009), 71-99; Llinàs Carmona, *Feminismes de la Transició*, 27-32; Linda G. Levine and Gloria F. Waldman, *Feminismo ante el Franquismo. Entrevistas con Feministas de España* (Miami: Universal, 1980), 52.

<sup>44</sup>Pilar Jaime, university student and feminist activist, interview by Teresa Ortiz-Gómez, London, July 26, 2009.

<sup>45</sup>Celia Amorós, “Debates Ideológicos en el Movimiento Feminista durante la Transición Española,” in *El Movimiento Feminista*, eds. Carmen Martínez Ten, Purificación Gutiérrez López and Pilar González Ruiz (Madrid: Cátedra, 2009), 196-197. Arriero Ranz, *El Movimiento*, 205-80.

<sup>46</sup>Jaime interview.

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After an initial phase of collective in-depth study and debate, the *Comisión* members decided to engage in more intensive activism and changed their name to the less provocative *Comisión de Planificación Familiar* (Family Planning Group, henceforth CPF). Pilar Jaime, Elena Arnedo and Delia Blanco, some of the FLM funders and members of the CPF, recalled their impatient eagerness to put their political and feminist views on contraception into practice:

So then, in the Front, a few of us got a bit tired of abstraction and the philosophical approach to the topic, and decided we had to do something immediately. And then we started, without being really organized, to give small talks, and so forth. (...) And well, for me it was clear that the most urgent thing was for women to be able to control [their fertility], otherwise there was no freedom, no work, nothing at all.<sup>47</sup>

But we couldn't go to a church or to a parish and say "look, we are from the Abortion Commission, and we came to do this and that". Instead, we said "we are from the Family Planning Group, and we came to talk to women" and, well, it was much easier for women to come and listen. It was much easier to organize it with the priests. But we couldn't have done this, if we had come along saying "we are from the Abortion Commission."<sup>48</sup>

As in the USA and France, the titles that organizations chose and the way they described their activities were part of a strategy of social positioning, designed to connect with broad sectors of the public.<sup>49</sup> The CPF justified the adoption of its new name by citing "the context of the ignorance around the topic".<sup>50</sup>

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<sup>47</sup>Arnedo interview.

<sup>48</sup>Jaime interview.

<sup>49</sup>As examples, for changes in the names of Margaret Sanger's organizations, see Parry, "Broadcasting Birth Control"; for name changes in the French family planning movement, see Christine Bard and Janine Mossuz-Lavau, eds. *Le Planning Familial: Histoire et Mémoire (1956–2006)* (Rennes: Presses Universitaires de Rennes, 2006), 11-15

<sup>50</sup>Comisión, "Planificación Familiar."



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CPF began disseminating information about contraceptive methods and feminism in working-class neighborhoods such as *Entrevías*, *Vallecas* and *El Pozo*, parishes, medical schools and public gynecological clinics in Madrid, , often accompanied by male doctors.<sup>51</sup> Local social leaders who opposed the Francoist regime would often provide the space and resources required:

We were going together [with Dr. Angel Sopeña] to give talks in different neighborhoods. Do you know what it meant to them? He was such a wise person, such a good person, this elderly doctor. [He was] so adorable. The two of us, in those neighborhoods. The two of us, walking to some parish lost in there, to give our talks. And I gave talks in churches, in church pews. In parishes, in nurseries, in schools. In the small rooms of parish halls, where neighborhood associations had their offices. (...) All of that meant for us a space where [our activity] made sense. Because we talked to them about feminism, we talked to them about women's liberation, about women's rights, about abortion. Basically, we talked about everything, and also about contraceptive methods.<sup>52</sup>

These activities were supported by working-class priests, grassroots Christian movements, housewife and neighbor associations, and leftist and antifrancoist militants. All these groups played a vital role in the construction of democratic citizenship in Spain during the 1960s, 1970s and the transition to

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<sup>51</sup>Feminist and women's health groups from other Spanish towns such as Valencia and Barcelona also carried out these activities, see, respectively, Leonor Taboada, "Consuelo Catalá: Una Voz Inconfundible del Feminismo," *Mujeres y Salud* 33 (2012): 6-9 and Eva Gou, *La Conquesta de la Llibertat de les Dones: Història d'un Compromís amb la Planificació Familiar* (Prat de Llobregat: Ajuntament del Prat de Llobregat, 2007), 35.

<sup>52</sup>Jaime interview. Angel Sopeña (1913–1991), gynecologist and assistant professor at the Faculty of Medicine of the Madrid Complutense University, was also a member of the Spanish communist party, illegal until 1977. Carmen Martínez Ten, "Fallece el Ginecólogo Ángel Sopeña, un Defensor de la Liberación de las Españolas," *El País*, May 30 (1991), accessed June 21, 2016, [http://elpais.com/diario/1991/05/30/sociedad/675554409\\_850215.html](http://elpais.com/diario/1991/05/30/sociedad/675554409_850215.html)

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democracy, and framed free access to birth control as a democratic right.<sup>53</sup> They enabled feminist groups such as FLM to reach a broad range of women and bestowed a kind of social and moral acceptability on their actions.

The Family Planning Group also delivered talks in upper-class neighborhoods in the center of Madrid, seeking public recognition and a media response that would include women's views on contraception in a debate dominated by male experts: Catholic priests and gynecologists.<sup>54</sup> In 1975, prior to Franco's death, they organized a well-received presentation on family planning at the International Institute in *Miguel Angel* Street, where the headquarters of the AEMU was situated. Elena Arnedo, the organizer and lecturer, together with Santiago Dexeus, a famous gynecologist and family planning activist from Barcelona, considered this to have been a 'milestone' in family planning activism, which, to the surprise of the participants, was not banned by the authorities.<sup>55</sup>

Lack of criminal prosecution, the favorable social reception their activities received and consciousness of their political importance prompted the Family Planning Group of the FLM to open their own family planning center, considered to be the first feminist clinic of this kind in Spain.<sup>56</sup> The center—established in a flat in

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<sup>53</sup> According to Arriero Ranz, "El Movimiento," many of these groups were fueled by the PCE. On the social role played by civil society and ordinary citizens in the Spanish transition to democracy, see Pamela B. Radcliff, *Making Democratic Citizens in Spain: Civil Society and the Popular Origins of the Transition, 1960–78* (Basingstoke: Palgrave MacMillan, 2011). On the contribution of Christian movements, see Oscar Martín García and Damián González Madrid, "The Social Factory of Democracy in Underdeveloped Spain," *Democratization* (2013): 1-21.

<sup>54</sup> Ortiz-Gómez and Ignaciuk, "'Pregnancy and Labour'"

<sup>55</sup> Arnedo interview. The AEMU headquarters were established on the premises of the former *Instituto Internacional* for women's education, established in 1903 in Madrid by the Bostonian protestant educator, Alice Gordon Gulick. "Historia del Instituto Internacional," accessed June 1, 2016, <http://www.iie.es/historia-del-instituto/>

<sup>56</sup> Javier Martínez Salmeán, "La Problemática de la Planificación Familiar," in *I Semana de Estudios Sexológicos de Euskadi Vitoria 9–14 April 1979* (San Sebastián: Hordago, 1979), 207-35; Isabel Parra, "El Control de la Natalidad," in *La Mujer Española: De la Tradición a la Modernidad (1960–1980)*, eds. Concha Borreguero, Elena Catena, Consuelo de la Gándara, and María Salas (Madrid: Tecnos, 1986), 62-70; Suzel Bannel and Mabel Pérez Serrano, "Mujer y Salud," in *Españolas en la Transición: De Excluidas a Protagonistas (1973–1982)*, ed. Asociación de Mujeres en la Transición Democrática (Madrid: Biblioteca Nueva, 1999), 303-24. Also in 1976, female university students

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a middle class neighborhood of Madrid, near *Cuatro Caminos* Square—operated without a license to open: the founders, being assured of the political significance of their initiative and its importance for women's liberation, were more concerned with securing the necessary setting and materials:

And so we decided to open the center. It was the most important thing. If women could not control their sexuality, it was difficult for them to continue studying, it was difficult for them to continue growing personally and professionally, it was difficult for them to be autonomous, it was difficult for them to choose.<sup>57</sup>

We were not worried by the fact that we opened the clinic without a license, we did not even think about requesting one. They would not have given it to us anyway. The only thing that mattered was to find the flat. And to have enough money, enough instruments, a couple of examination beds and a couple of speculums. Everything else, the paper work, I don't remember talking about it.<sup>58</sup>

The center was not given an official name, probably due to the clandestine nature of its existence, but it soon became known as *Centro de Mujeres Federico Rubio* [Federico Rubio Women's Center, CMFR], in reference to the street it was on. Interestingly, the street had been named in honor of the nineteenth-century male doctor and liberal deputy Federico Rubio (1827–1902), who specialized in surgical gynecology. It was not long before many women arriving at the clinic were asking for “doctor Rubio.”<sup>59</sup>

The CMFR opened in autumn of 1976 thanks to numerous small donations from the founders' friends and families, and, above all, to a considerable donation by María Teresa García-Urriaga, the wife of a well-known Mexican businessman who

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established a family planning “service” (*servicio de planificación familiar*) in Barcelona. This only lasted a few months. See Roig and Luzán, “Anticoncepción”.

<sup>57</sup>Delia Blanco, feminist activist, interview by Teresa Ortiz-Gómez, Madrid, July 27, 2010.

<sup>58</sup>Arnedo interview.

<sup>59</sup>*Ibid.*

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established himself in Spain in the mid-1960s.<sup>60</sup> This was used to pay the rent for several months, and buy second-hand furniture and instruments. The center functioned without disruption for over a year and a half.

Like feminist health clinics established in the United States during the 1970s, the center was managed by its founding female activists and practiced a woman-centered style of care.<sup>61</sup> It was staffed by both male and female health professionals, FLM activists without previous medical training, and female medical students, all on a voluntary basis. Contraceptive and gynecological assistance were provided, as well as basic feminist self-examination and self-genital exploration training. Clinic staff would accompany women to London each week, where abortions were carried out in a private surgery the group had been collaborating with since 1972.<sup>62</sup>

Although the *Federico Rubio* family planning center was open to all women, it mainly catered for working class women from Madrid's poor neighborhoods and single, heterosexually-active female students, who did not have access to sympathetic gynecologists. The clinic's clientele also included women from towns and villages close to Madrid, such as León, Burgos, Segovia, Ávila, Toledo etc.<sup>63</sup> Word-of-mouth and direct recruitment during public talks prompted women to attend the center in large numbers, where "there was always a queue", "the staircase was full of people" and consultations frequently lasted until 11 p.m.<sup>64</sup>

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<sup>60</sup>Ibid; Javier Martínez Salmeán, "Historia de la Anticoncepción en España: Del Franquismo al Siglo XXI," in *Evolución de la Anticoncepción en España: Sociedad, Salud y Medios de Comunicación*, ed. Equipo DAPHNE and Schering (Madrid: Aula Médica, 2005): 1-21 (13), ascribes the donation to a "progressionist (male) banker."

<sup>61</sup>Sandra Morgen, "Into Our Own Hands: Feminist Health Clinics as Feminist Practice," in *Into Our Own Hands*, 70-105; Wendy Kline, *Bodies of Knowledge: Sexuality, Reproduction, and Women's Health in the Second Wave* (Chicago: University of Chicago Press, 2010); Judith A. Houck, "The Best Prescription for Women's Health. Feminist Approaches to Well-Women Care," in *Prescribed: Writing, Filling, Using, and Abusing the Prescription in Modern America*, eds. Jeremy A. Greene and Elizabeth S. Watkins (Baltimore: Johns Hopkins University Press, 2012), 134-56

<sup>62</sup>Blanco interview; Arnedo interview; Concha Martín Perpiñán, gynecologist, interview by Teresa Ortiz-Gómez, Madrid, July 14, 2010; Carmen Martínez Ten, medical student (later gynecologist) interview by Teresa Ortiz-Gómez, Madrid, April 13, 2010.

<sup>63</sup>Blanco, Arnedo, and Jaime interviews.

<sup>64</sup>Blanco and Jaime interviews respectively.

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Women attending the center benefitted from a unique style of practice, radically different from standard gynecology at that time. The intention was not only to provide women with contraception, but also teach them the basic notions of feminism and provide knowledge of the female body and sexuality. Each gynecological consultation was preceded by a collective talk about feminism, sexuality, contraceptive methods and genital anatomy and physiology. They practiced self-exploration and used their own bodies as props to demonstrate the technique to women, a style of practice that medical student volunteers applied in their subsequent professional contexts:

After the women had had the interviews, I took my clothes off and showed them how to self-examine their breasts, and I explained what a vagina looked like, with labia, labia minora, and where the clitoris was located. (...) It worked, but I always ended up very tired, because I was spending four hours naked.<sup>65</sup>

So, when I started to practice my specialty [at the hospital, in 1978], I was able to place IUDs, I was helping to examine women and also helped with self-exploration. I learned all about it at *Federico Rubio*: what it was like for women to see the cervix, to explain that it was fine [to look at it]. I remember women saying "but I don't want to see myself" [laughs]. (...) This first history-taking, when I started working at the council [health center], I took this history-taking model with me. And I implemented it at the places I worked.<sup>66</sup>

The method of medical history-taking employed at the clinic was considered by *Federico Rubio* staff to be one of their most significant achievements. They were

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<sup>65</sup>Blanco interview. Self-exploration was practiced in many feminist circles in Spain. Although most activists did not trace a specific genealogy of this practice, Leonor Taboada, in her 1978 book *Introducción al self-help*, recalled being inspired to take up the practice by the US women's health movement. Self-exploration is also mentioned in: Lozoya Gómez, *Aborto*, 61-62; Taboada, "Consuelo Catalá".

<sup>66</sup>Martínez Ten interview.

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conscious and proud of its novelty and radical difference from the model commonly used in the health system.

The female medical students who worked at *Federico Rubio* were part of the generation of women who began to enroll at universities in significant numbers during the seventies. Many studied medicine and a number of these chose obstetrics and gynecology as their specialty. While only a small fraction of female gynecologists in Spain became involved in the women's health movement—as was also the case in the USA—those who did participate were deeply affected by the experience, gaining the tools they needed to recognize and interpret the signs of discrimination from which they had suffered.<sup>67</sup> They also gained professional experience inaccessible through regular medical education and developed their own style of practice, inspired by feminism and the life experiences and needs of their female patients and colleagues.

Another field of action for feminist family planning activists was disseminating their ideas at disciplinary congresses and professional meetings. Under the new name of *Comisión por la Planificación Familiar* [Family Planning Group] of the AEMU, the group participated in a cycle of conferences on mental health organized at Madrid's *Gran Hospital* in May 1976. They presented a paper on their ideas and activities within a historical and international perspective. In it, they defined family planning as a way of strengthening heterosexual relationships, separating sexual pleasure from reproduction:

Family planning is something more, much more than the rational ordination and control of births. Family planning is a new sexual ethics, a totally different and revolutionary form of understanding interpersonal relations, taking as a starting point a healthy, non-traumatized identity, free of guilt in relation to our own body and other people's bodies.<sup>68</sup>

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<sup>67</sup>Sandra Morgen, "Women Physicians and the Twentieth-Century Women's Health Movement in the United States," in *Women Physicians and the Cultures of Medicine*, eds. Ellen Singer More, Elizabeth Fee and Manon Parry (Baltimore: Johns Hopkins University Press, 2009), 160-183.

<sup>68</sup>Comisión, "Planificación Familiar."

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The *Comisión's* definition accentuated very different elements from those underlined by contemporary Spanish doctors advocating and practicing family planning. For instance, doctors at the *Valladolid* hospital's clinic, in a quote for the World Health Organization's 1971 report on family planning, emphasized that one of the primary objectives of family planning was the ability "to decide on the number of children and the best moment to have them, in order to promote the health and well-being of the family and efficiently contribute to human development."<sup>69</sup> Asunción Villatoro, in her talk on the organizational aspects of a family planning center, delivered at a symposium on human fertility in November 1976 in Barcelona, also appealed to the WHO's definition of health and the role family planning played in this.<sup>70</sup>

The *Comisión*, in line with their anti-capitalist and feminist ideals, went as far as declaring that "family planning must be a decisive weapon used to destroy the institution of the family."<sup>71</sup> This was apparently deemed either too radical or strategically inadequate at the time, however, as it was crossed out in the copy of the document we accessed.<sup>72</sup>

During a multidisciplinary seminar dedicated to social communication in Madrid in 1978, the *Comisión* presented a new paper focusing on the woman-doctor relationship, in which they criticized traditional gynecological practice and proffered their alternative model of care.<sup>73</sup> Authors criticized mainstream gynecology for treating women as "inherently ill, or prone to illness", and for expecting women to be passive and surrender to "the doctor: shaman, father and god, who makes the decisions and plans but keeps the women ignorant".<sup>74</sup> At the

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<sup>69</sup>"Memoria", 1. The definition was the same in the WHO's 1971 first report on family planning: *Planificación de la familia en la acción sanitaria. Serie de informes técnicos* (Geneva: WHO, 1971), 476.

<sup>70</sup>Asunción Villatoro, "Organización de un Centro de Planificación Familiar." Unpublished talk delivered on 27 November 1976, donated by Asunción Villatoro.

<sup>71</sup>Comisión, "Planificación Familiar," 2.

<sup>72</sup>Ibid.

<sup>73</sup>Centro de Mujeres de Federico Rubio, "La Comunicación Médico/Mujer en una Consulta Ginecológica," in *Alternativas Populares a las Comunicaciones de Masas*, ed. José Vidal Beneyto. (Madrid: Centro de Estudios Políticos y Constitucionales, 1979), 495-500.

<sup>74</sup>Centro de Mujeres de Federico Rubio, "Comunicación Médico/Mujer," 496-97.

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*Federico Rubio* center there were “no patients, only women who were seeking information”, and the volunteers attempted “to make women perceive their sexuality and maternity as a part of their daily lives, as things that they must understand, reflect and decide upon”.<sup>75</sup> They also argued against impersonal gynecological practice, in which women were treated only for physiological problems, their social and family context ignored. At their center women were treated as “whole persons”, encouraged to share and discuss their life experiences.<sup>76</sup>

The family planning feminist activists in Madrid used such professional and interdisciplinary meetings as spaces in which to mobilize and disseminate their ideas and alternative models of practice. With the integration of family planning into the National Health Service in mind, they wanted to reach and spread their ideas amongst medical professionals and academics, both male and female.

### **Legalization of contraception and its earliest consequences**

During the first years of the transition to democracy (from 1976 to 1980) there was frenetic activity in the field of family planning, including the creation of the first short-lived Spanish Family Planning Federation in February 1978, demonstrations in most towns calling for the legalization of contraception, and the publication of books on self-help, self-exploration and contraception.<sup>77</sup> Women from the feminist movement close to the center-right and left-wing parties lobbied to include women's rights and the legalization of contraceptives in their political agendas.<sup>78</sup> There was also an intensification of relations with the international family planning movement, especially the European branch of the International Planned Parenthood Federation and the British Family Planning Association, whose

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<sup>75</sup>Ibid.

<sup>76</sup>Ibid.

<sup>77</sup>Examples of such publications include: Leonor Taboada, *Cuaderno Feminista. Introducción al Self Help* (Barcelona: Fontanella, 1978); Santiago Dexeus and Margarita Riviere, *Anticonceptivos y Control de Natalidad* (Barcelona: La Gaya Ciencia, 1978), Asunción Villatoro and Magda Oranich, *Qué es el aborto* (Barcelona: La Gaya Ciencia, 1977). On the FEPP: Ortiz-Gómez et al., “Activismo Feminista”.

<sup>78</sup>Threlfall, “Feminist Politics,” 118-19.



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representative Maggie Jones visited Spain (Madrid and Barcelona) at least two times in 1977 and 1978.<sup>79</sup>

In April 1978, the newly constituted and democratically elected Spanish parliament initiated the process of legalizing the sale and distribution of contraceptives, which concluded in October that same year. Contraception became legal six months later, even before the new Spanish Constitution was approved; the speed and smoothness of the parliamentary process reflect the broad social consensus on the issue, fueled by almost a decade of social, medical and feminist activism in favor of family planning provision and propaganda. The decriminalization law also decreed that a network of public "family orientation centers" (*Centros de Orientación Familiar*, henceforth COF) should be established to provide birth control assistance.<sup>80</sup>

Shortly afterwards, the *Federico Rubio* Women's Center closed its doors.<sup>81</sup> Incompatibilities with the new central-right Government and its feeble implementation of birth control assistance in the public health care system, together with difficulties applying their style of practice in a context of overwhelming demand, forced this decision.<sup>82</sup> Doctors from the family planning movement and some of *Federico Rubio's* staff, both medical and non-medical, went on to participate in the new public and private family planning centers that proliferated in Madrid, Barcelona, Seville, Granada, Salamanca, Pamplona and many others Spanish towns and villages. Alongside the COFs, public family planning centers were created by city councils, provincial governments and the newly created Ministry of Health. Feminist activists and political parties established their own private family planning centers. The involvement of political parties with these clinics was viewed by feminist

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<sup>79</sup>Maggie Jones, British family planning worker, interview by Agata Ignaciuk, London, September 9, 2010; Maggie Jones, "Report on the Visit of Maggie Jones, FPA Press and Publications Department, to Family Planning Workers in Spain, 29 April – 6 May 1978", British Family Planning Association Papers, Wellcome Library in London, SA/FPA/C/B/2/20/1.

<sup>80</sup>Ignaciuk and Ortiz-Gómez, *Anticoncepción, Mujeres y Género*.

<sup>81</sup>Maggie Jones, "Report on the Visit."

<sup>82</sup>"Cerrado el centro de planificación de Federico Rubio," *El País*, October 8, 1978, accessed December 2, 2015, [http://elpais.com/diario/1978/10/28/sociedad/278377214\\_850215.html](http://elpais.com/diario/1978/10/28/sociedad/278377214_850215.html)

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activists, as well as international witnesses, as a way of bringing family planning into the political mainstream.<sup>83</sup>

The earliest data on the development of family planning clinics in Spain come from 1982 and reveal the dynamic growth of the heterogeneous network of facilities providing birth control counseling. In the province of Madrid during 1982 there were forty-six family planning centers: eighteen run by councils, four by the women's sections of neighborhood associations, two by cooperatives, seven by private societies, one by the Ministry of Health and three by public hospitals.<sup>84</sup> In Andalusia in 1984 there were 142 public family planning centers, and fifteen hospital family planning clinics. Most of these were included in the Andalusian health care system, thirty-one being funded by either provincial or municipal governments.<sup>85</sup>

The composition of these newly created centers was heterogeneous. All were run by doctors, mostly gynecologists, together with administrative personnel; other staff members might include nurses, midwives, psychologists, social workers and sexologists.<sup>86</sup> Some of the pioneering medical and feminist family planning activists also participated. In Madrid, part of the former *Federico Rubio* staff became involved in *Instituto de Medicina Social* (Social Medicine Institute) and *Centro Pablo Iglesias*, both founded in Madrid around 1978, under the sponsorship of the communist (PCE) and the socialist party (PSOE) respectively. Elena Arnedo, one of the founders of CPF and *Federico Rubio* and a member of the PSOE, was involved in *Centro Pablo Iglesias*, and Concha Martín Perpiñán, Carmen Martínez Ten and Angel Sopeña worked together for a time at the *Instituto de Medicina Social*.<sup>87</sup> Dr. Asunción Villatoro, head of the outpatient services at *Clinic* between 1972 and 1973 and at Barcelona's *San Pau* Hospital from 1975 to 1979, was involved in the first such

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<sup>83</sup>Arnedo interview; Maggie Jones, "Report on the Visit," 2.

<sup>84</sup>Pepa Cruz Cantero, "Los Centros de Planificación Familiar, su Incidencia Social y los Cambios de Actitudes y Prácticas Relativas a la Planificación: Un Estudio de Casos" (MA diss., Universidad Complutense de Madrid, 1984), 330-33.

<sup>85</sup>Federico Goyarts and Concha Martín, "Falling Fertility in Spain's Third World," *People* 12, no.3 (1985): 22-24, 22.

<sup>86</sup>Goyarts and Martín, "Falling Fertility".

<sup>87</sup>Arnedo and Martín Perpiñán interviews.

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center for Barcelona city council in 1979 (*Centre Torre Llobeta*). The center, established according to feminist family planning principles by the women's health group DAIA, also relied on the collaboration of members of the neighborhood associations' women's committees.<sup>88</sup> In 1979, Dr. Amalia Jiménez, head of the outpatient family planning clinic in *Clínico* Hospital in Granada, also started to work in the first walk-in family planning center in the province of Granada, funded by the Ministry of Health's local office (*Delegación Provincial de Sanidad*).<sup>89</sup> Most feminist-oriented women centers, including those in Seville, País Vasco, Navarra, and Cataluña—whether privately funded or sponsored by city halls and local governments—managed to maintain the ethos of women-centered practice, feminist training talks, sexual education and even the practice of self-exploration.<sup>90</sup> Some of these centers employed *consultoras* [female counselors], women with a deep connection to local life and the feminist movement, who acted as mediators between women and medical cultures.<sup>91</sup> Collaboration between male and female health professionals and lay feminist activists was generally fluid, although tensions regarding recognition of authority and of technical and feminist expertise were also present.<sup>92</sup>

The early 1980s was a turning point in the Spanish family planning movement. Before the decriminalization of abortion in 1985, most of the new centers continued referring women to abortion clinics abroad. While this practice remained unofficial, the clinics openly provided post-abortion monitoring and contraceptive counseling to women returning from foreign abortion clinics. As institutionalization began, feminist activists focused on campaigning for the

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<sup>88</sup>DAIA stood for *Dones per el Autoconeixement i la Anticoncepció* (Women for Self-knowledge and Contraception). Ferré Baldrich, "Centros de Planificación," 6-7.

<sup>89</sup> Ortiz-Gómez et al., "Activismo Feminista".

<sup>90</sup>Mari Luz Esteban Galarza, "La Atención Específica a las Mujeres. 15 Años de Centros de planificación familiar." *OP. Cuadernos de Salud Pública*, 15 (1994):1-42; Villatoro interview.

<sup>91</sup> Gou, *Conquesta de la Llibertat*, 41-43; Ferré Baldrich, "Centros de Planificación."

<sup>92</sup>Villatoro interview; Ferré Baldrich, "Centros de Planificación", p. 6. Disagreement and the divergent interests of different sectors of the family planning movement were also behind the failure of the Spanish Family Planning Association, which dissolved in 1980. Ortiz-Gómez et al., "Activismo Feminista".

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legalization of abortion and establishing clinics where abortions could be carried out in acceptable conditions, thereby negating the need to travel abroad.

## **Conclusions**

Family planning activism was initiated in Spanish medical circles at the end of the 1960s. During the final years of the dictatorship and following Franco's death in 1975, activities initially confined to outpatient hospital clinics in Madrid and Barcelona exploded into a social movement, a product of the dynamic collaboration between progressionist doctors and feminist activists, some of whom were also gynecologists. The decriminalization of contraceptives—the movement's main goal—was one of the earliest laws passed by the first democratic Spanish parliament, thanks to the support of vast sectors of the democratizing society, including actors such as women's organizations, neighborhood associations and center and left-wing political parties.

The relationship between medical professionals and feminists involved in the fight for family planning was marked by both cooperation to accomplish their common goals—the legalization and universalization of access to contraception—and inherent differences relating to their underlying ideologies. At the center of this conflict was the feminist critique of medicalization and the hierarchical relationship between gynecologists and women patients, in a context where the highly masculinized and conservative gynecological profession had sustained its gender ideology of motherhood as women's only "natural" destiny. This critique connected with the postulates and arguments formulated by the contemporary Italian, French and American women's health movement. Spanish feminist activists' understanding of family planning as a "new sexual ethics" was deeply rooted in the epistemology of the body born with the international women's health movement. Doctors involved in the early family planning movement, however, were motivated to undertake the new practice through their sense of social commitment, support from the IPPF, and by the WHO's recognition of the importance of family planning.

These ideological differences did not impede personal alliances between feminist activists and (male and female) liberal doctors, which enabled activities

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such as delivering talks about contraception in working-class neighborhoods or providing assistance and post-abortion counseling at the family planning centers to be carried out.

While some female doctors involved in family planning activism rejected feminist militancy, others pursued it through their work in the early clinics and beyond, to the legal family planning centers established after the decriminalization of contraception in 1978. These female feminist doctors played a key role in disseminating new, more respectful and egalitarian models of doctor-woman and doctor-patient relationships, initially implemented in feminist clinics and subsequently transferred to those sponsored by city councils, political parties, local associations and, finally, by the national health service.

The transfer of a new model of the (woman) patient-doctor relationship was one of the movement's most important accomplishments, alongside the rapid legalization of contraceptives and the establishment and consolidation of private and public family planning centers. On a more general level, by enabling an effective separation between sexuality and reproduction, the movement contributed to the creation and generalization of new gender models for women.

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