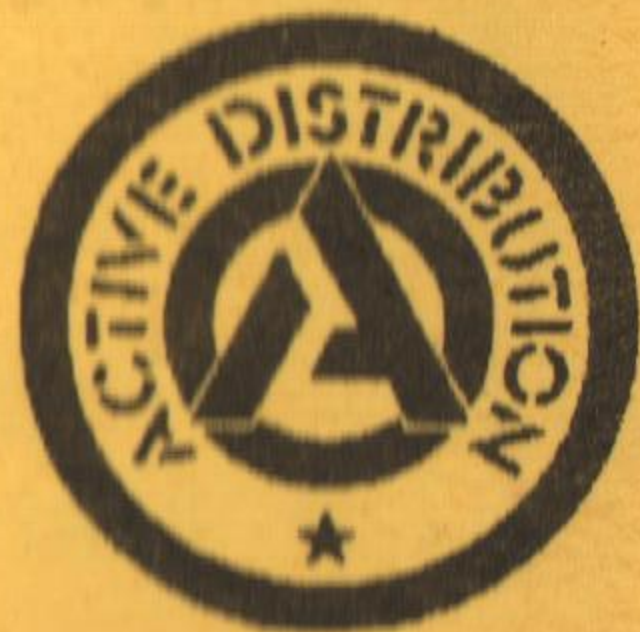




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Some thoughts on women's
health + sexuality.

Viva Voce is used to mean 'word of mouth'. This fits in with what this zine has been about for us.

We don't think there is enough sharing of experiences by women + challenging their silence is part of our political struggle

This zine is partly about us trying to reclaim + add to the tradition of women passing on information about their health, sexuality + lives

We hope both women + men read this

You can write to the two women who mostly wrote + compiled this zine at
viva voce wimmin@yahoo.co.uk

or send letters/zines/money to
viva voce c/o book collective, Cowley
club, 12 London Road, Brighton, BN1 4JA
U.K.

£2/
\$3.

Obviously we left the important bit 'til last when we have a serious deadline as one of us is leaving the country for a long while and the other is going up North - so even after hours and hours of chats and rants we've probably still missed things out.

We recognise that what we've written about is coming from our own experience and that each woman's experience will be different depending on her culture, background, class, age, priorities... But we hope these



differences will challenge, writing, talking and starting to peel back the layers and talk about the things we've our lives. All written about

not stop us sharing, writing, talking and We feel we are just back the layers and things that affect the things we've need to be seen in

the context of a much broader political struggle, one that involves taking direct action to challenge the power structures evident around us and to work and live in solidarity with political struggles around the world.

ideas for next zines - loads of thought around sexuality, issues around mental health, more direct action, STD's + more DIY remedies, look at AIDS, alternative to the pill, more on cyclical changes.

Lots of this info. comes from 'Witches, Midwives + Nurses' available from re-pressed. SEE BACK

I think that you need to look back at the last several hundred years to understand why women know so little about their bodies and how to heal. In Europe the witch hunts spanned over four centuries (from 14th to 17th) from Germany to England. In the late fifteenth and early sixteenth centuries there were thousands and thousands of executions, usually live burnings at the stake. People have estimated up to 9 million people were killed during this time, with 85% of them being women and children. The witches were the women healers and evidently feared for their knowledge and power.

The stakes of the struggle were high: Political and economic monopolization of medicine meant control over its institutional organizations, its theory and practice, its profits and prestige.

In Europe there was the Malleus Maleficarum or Hammer of Witches that was written in 1484, by men under Pope Innocent VIII. This was the unquestioned authority on how to conduct the witch hunts.

The witch-hunts were well-organized campaigns, initiated, financed and executed by Church and State.

In locale and timing, the most virulent witch hunts were associated with periods of great social upheaval shaking feudalism at its roots—mass peasant uprisings and conspiracies, the beginnings of capitalism, and the rise of Protestantism.

fragmentary evidence—which feminists ought to follow up—suggesting that in some areas witchcraft represented a female-led peasant rebellion.

CRIMES OF WITCHES

accusations emerge repeatedly in the history of witchcraft throughout northern Europe: First, witches are accused of every conceivable sexual crime against men. Quite simply, they are "accused" of female sexuality. Second, they are accused of being organized. Third, they are accused of having magical powers affecting health—of harming, but also of healing.

As for female sexuality, witches were accused, in effect, of giving contraceptive aid and of performing abortions:

It was witches who developed an extensive understanding of bones and muscles, herbs and drugs

In the thirteenth century Europe medicine became established as a secular science and a 'profession'. They trained in universities, which women were banned from and therefore legally barred them from practice.

in the periods we have studied, that, if anything, it was the male professionals who clung to untested doctrines and ritualistic practices

were taught to treat most ills by "heroic" measures: massive bleeding, huge doses of laxatives, calomel (a laxative containing mercury) and, later, opium.

these "cures" were often either fatal or more injurious than the original disease.

So thoroughly was she discredited among the emerging middle classes that in the 17th and 18th centuries it was possible for male practitioners to make serious inroads into that last preserve of female healing—midwifery. Nonprofessional male practitioners—"barber-surgeons"—led the assault in England, claiming technical superiority on the basis of their use of the obstetrical forceps.

Female midwives in England organized and charged the male intruders with commercialism and dangerous misuse of the forceps. But it was too late

When women had a place in medicine, it was in a people's medicine. When that people's medicine was destroyed, there was no place for women—except in the subservient role of nurses.

We are aware that women have been part of political struggles around health over the last few centuries, like the Popular Health Movement, but have found it hard to find much info on this. It was not until the seventies that much radical information about health got produced and distributed to lots of women.

This massive leap in consciousness in the early seventies was part of the broader women's liberation movement, where thousands of women in the US and Europe started to reclaim some of this knowledge that had been stolen from their ancestors. It's the action of these women and the ideas and the writing that they produced that was the real inspiration for this zine.

The women created health collectives where they met regularly, shared experiences, looked at each others bodies, did self exam with speculums, did breast self exam, learnt to recognise infections and treat them with DIY home remedies using herbs and oils, learnt to do abortions and eventually open feminist health clinics, that are still there today.

Any emotional release from this was seen as secondary.

Books like 'Our Bodies Ourselves' by the Boston Women's Health Collective and 'New View of a Women's Body' by the Feminist Federation of Health Collectives contain such vital information. Still things did get missed out and I think that a lot of experiences were from a white middle class view, and not enough consideration was given to women of different races and class. There has to be room to talk about the fact that women do have different experiences of their health and that they may be treated differently by doctors within a racist, capitalist medical system.

I've been to several workshops now when this info. on women's anatomy + cycles has been shared. It's so incredible how few women know it + how so many are shocked that they don't. It's not until you see it all do you realise how little you know. I always leave feeling touched by how powerful all this is. This zine touches on a few topics but leaves so much more to be explored + shared.

The Popular Health Movement

These excerpts are really interesting because they show women organising and creating their own alternatives to the male elitist medical system that had engrained itself in American society by the 1800s - ~~1900s~~ It seems quite difficult to find information about these grassroots groups in history (if anyone has info please send!) which isn't surprising -

Long live Ladies Physiological Societies

The Popular Health Movement

The Popular Health Movement of the 1830's and 40's is usually dismissed in conventional medical histories as the high-tide of quackery and medical cultism. In reality it was the medical front of a general social upheaval stirred up by feminist and working class movements. Women were the backbone of the Popular Health

Movement. "Ladies Physiological Societies," the equivalent of our know-your-body courses, sprang up everywhere, bringing rapt audiences simple instruction in anatomy and personal hygiene. The emphasis was on preventive care, as opposed to the murderous "cures" practiced by the "regular" doctors. The Movement ran up the banner for frequent bathing (regarded as a vice by many "regular" doctors of the time), loose-fitting female clothing, whole grain cereals, temperance, and a host of other issues women could relate to. And, at about the time that Margaret Sanger's mother was a little girl, some elements of the Movement were already pushing birth control.

The Movement was a radical assault on medical elitism, and an affirmation of the traditional people's medicine. "Every man his own doctor," was the slogan of one wing of the Movement, and they made it very clear that they meant every woman too. The "regular," licensed, doctors were attacked as members of the "parasitic, non-producing classes," who survived only because of the upper class' "lurid taste" for calomel and bleeding. Universities (where the elite of the "regular" doctors were trained) were denounced as places where students "learn to look upon labor as servile and demeaning" and to identify with the upper class. Working class radicals rallied to the cause, linking "King-craft, Priest craft, Lawyer-craft and Doctor-craft" as the four great evils of the time. In New York State, the Movement was represented in the legislature by a member of the Workingman's Party, who took every opportunity to assail the "privileged doctors."

The peak of the Popular Health Movement coincided with the beginnings of an organized feminist movement, and the two were so closely linked that it's hard to tell where one began and the other left off. "This crusade for women's health [the Popular Health Movement] was related both in cause and effect to the demand for women's rights in general, and the health and feminist movements become indistinguishable at this point," according to Richard Shryock, the well-known medical historian. The health movement was concerned with women's rights in general, and the women's movement was particularly concerned with health and with women's access to medical training.

Feminist researchers should really find out more about the Popular Health Movement. From the perspective of our movement today, it's probably more relevant than the women's suffrage struggle. To us, the most tantalizing aspects of the Movement are: (1) That it represented both class struggle and feminist struggle: Today, it's stylish in some quarters to write off purely feminist issues as middle class concerns. But in the Popular Health Movement we see a coming together of feminist and working class energies. Is this because the Popular Health Movement naturally attracted dissidents of all kinds, or was there some deeper identity of purpose? (2) The Popular Health Movement was not just a movement for more and better medical care, but for a radically different kind of health care: It was a substantive challenge to the prevailing medical dogma, practice and theory. Today we tend to confine our critiques to the organization of medical care, and assume that the scientific substratum of medicine is unassailable. We too should be developing the capability for the critical study of medical "science"—at least as it relates to women.

FROM WITCHES, MIDWIVES AND HEALERS: BARBARA EHRENREICH
DEIRDRE ENGLISH

HIS STORY OF SEXUALITY - DEFINATELY NOT OURS

Within the context of the repression of women by the state and the church for the last several hundred years, women have been really been fucked over by famous gynaecologists and doctors who have theorised and postulated about women's sexuality. These men have had a big influence on the information that gets out, which has created a society with very limited ideas on how women should enjoy and view their sexuality. Despite all this theorising I do not doubt that women kept sharing information and exploring their bodies but with so much of this sharing based on oral traditions some of that information has been lost for sure. So these doctors ideas have affected how women have been treated medically, as well influencing the education and info given to women by doctors, psychiatrists, teachers etc.

On a personal level I know this, as a young women growing up I was told nothing about my body and the pleasure of exploring my sexuality. I mean why is this information not commonly talked about in schools or with parents, this is a vital part of the education that children should hear. Having listened to and read so many women's experiences I know that most women have not had access to the right information to enjoy their sexuality fully. And it's not even just that. The medical, church and state's oppression of sexuality has created a society where women haven't been able to enjoy their sexuality openly.

Viewing how the concept of women's sexuality has changed ties in greatly with how women were viewed by the medical establishment and society as a whole. Apparently in the C17th women having orgasms was an accepted notion but by the late C18th women had been relegated to weak and inferior beings by the philosophers and doctors of the time. Pregnancy and menstruation were seen as illnesses, which prevented women from properly participating in society. The medical doctors were pushing hard to replace the women healers and to create a client base dependent on them. The whole idea that middle class women were infirm and needed to be under close supervision of a doctor was part of this. Women who were poor and crucial for the economy were obviously excluded from this idea that women were weak and fragile.

Over the next hundred years women's anatomy started to be redefined and the once acknowledged idea of the clitoris and female orgasms began to disappear. Anatomists' started to see the clitoris as part of the urinary and reproductive systems and drawings started to become more simplistic, in some cases the clitoris was unlabelled and in part still is. It was in these oppressive Victorian times that Sigmund Freud was able to have such a large influence. He pushed the idea that clitoral stimulation was immature, and that the most important way of having sex (obviously in terms of male preference) was vaginal penetration as that was mature and feminine. Freud saw the clitoris as a 'pile of pine shavings' useful only to 'set a log of harder wood on fire' (the vagina). Because of this many women have been made to feel inadequate by freudian trained doctors/psychoanalysts, because they have only climaxed through clitoral stimulation. Some women who only responded clitorally were labelled frigid and neurotic. One of his theories was that all women suffered from penis envy, and that if a woman

emulates men too much because of this penis envy, they may become 'homosexual'. Pretty obvious how Freud viewed women's sexuality.

A debate raged between professionals over where exactly the focus for sexual response was in women. In the 1950's Alfred Kinsey did a massive research project interviewing 17,000 case studies on personal sexual habits. He started to challenge Freud's idea that 'mature' women should not focus on their clitoris and as part of his research, with female volunteers, he tried to find out whether the vagina or clitoris was more sensitive. Kinsey used a probe to stimulate women, so to keep that 'scientific' objectivity and concluded that the vagina was not sensitive at all. This was the mistake as the urethral sponge inside the actual vagina is only stimulated by deeper pressure, which the probe was unable to do.

The famous study by Masters and Johnson in the 60's, where they watched and made notes of many women masturbating was interesting but their mistake was to only accept women who could bring themselves to orgasm clitorally, as they thought that this was the hallmark of normal sexual response. I mean this was quite significant because it was a very new concept that women actually masturbated. Their findings released a flood of literature extolling the virtues of the clitoris, which was good in many ways, but at the same time it just went to other extreme. There was still very little thought to women experiencing various types of orgasms and it not being restricted to men, or their 'clitoris' or 'vagina'.

Ok I know this seems laborious but I think it is interesting to see why there are so many misconceptions. I mean these people were influential in their time and their ideas did trickle down to influence women's understanding of their bodies. It wasn't until 1980 when Beverly Whipple, Alice Ladas and John Perry published the book 'G spot and other recent discoveries about human sexuality' that the erogenous zone in the vagina was really talked about. In the 50's Dr Ernst Grafenberg had talked about it but left it unlabelled, which was why the three called the area the G Spot. (If you look at our article on female ejaculation you will find diagrams of the urethral sponge, renamed by feminists, but is also known as the G-spot). Stimulating this spot with deep pressure can cause orgasm and sometimes female ejaculation, these were very new concepts. I mean they weren't, they had been deliberately ignored within professional medical circles, but had been talked about for thousands of years before and were obviously the real experience of millions of women who knew their bodies. I've actually read a revised edition of the G Spot and it includes many letters that they received after the publication of the first edition. Its so crazy reading about the experiences of women who have been totally ignorant of their bodies or not been able to talk about what they liked sexually for fear of being seen as abnormal. Women who stopped themselves from coming in fear of 'wetting' themselves, men who have left women due to ignorance and misunderstandings, women who had spent their lives repressing their feelings about other women. There were so many stories where doctors had abused this situation, psychologically by making women feel inadequate as well as performing unnecessary operations.

Reading feminist definitions of the female anatomy and how they have challenged the mainstream model has really helped me understand my sexuality more or at least begin to unravel some of the societal crap I have absorbed. To begin with they challenge the idea of vagina and clitoris and redefine the clitoris as a massive powerful structure that includes the urethral sponge (inside the vagina) as well as the visible glans (that many people assume to be the whole clitoris). In their definition of the whole clitoris they include eighteen parts and all these are sensitive and play a role in orgasm. This widens the concept and shows you just how restricted the clitoris v's vagina debate was. As part of the general consciousness raising groups of the women's liberation movement feminists started to challenge medical ideas of their bodies. In particular in the US nine women got together to share ideas, showing each other their cunts and started to redefine the clitoris. They spent ages finding old texts (in particular Mary Sherfey's version of the clitoris from the 60's), looked at each other intensively, took photographs and one of the illustrators Suzann Gage did an anatomy course so they could get the most in-depth picture of the clitoris to date.

All the anatomy diagrams that we have included in this zine are done by these women. I have such an amazing amount of respect for these women, to sit down and redraw the anatomy without any 'expertise', and then to get this information out. It has had an incredible influence on my life, and on many other women who have eventually found this information. On a personal level it didn't stop there though, I think it just added to a whole load of thinking around who I was. For me it was also redefining my sexuality. The fact that I need to find time and space to be sexual on my own, that I want to be sexual with men and women, the fact that I want to explore my sexuality not always in terms of having sex, to play and fantasise. Reclaiming some of this knowledge was an important beginning.

Although feminists have redefined this information it is still marginal and has not at all been absorbed into the mainstream. (no surprise).

And women within different races and classes will experience this oppression differently. I think politically its important to create more access to available information and to open up discussion on women's sexuality by and for women, talking about our similarities and our differences

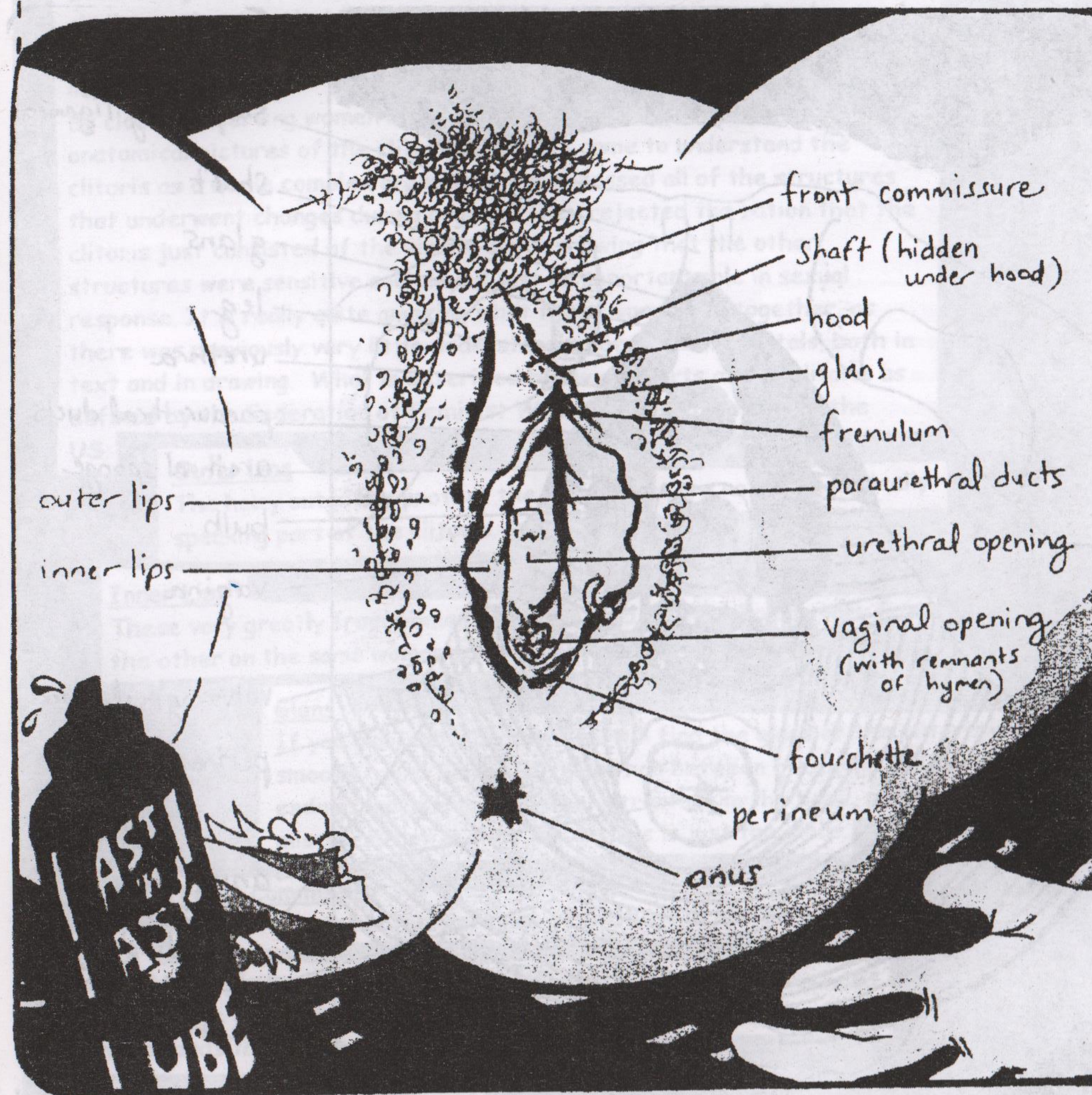


FIGURE 2: THE VISIBLE PARTS OF THE CLITORIS

From 'The Clitoral Truth'
Some of the first diagrams to show the clitoris as a huge complex structure.

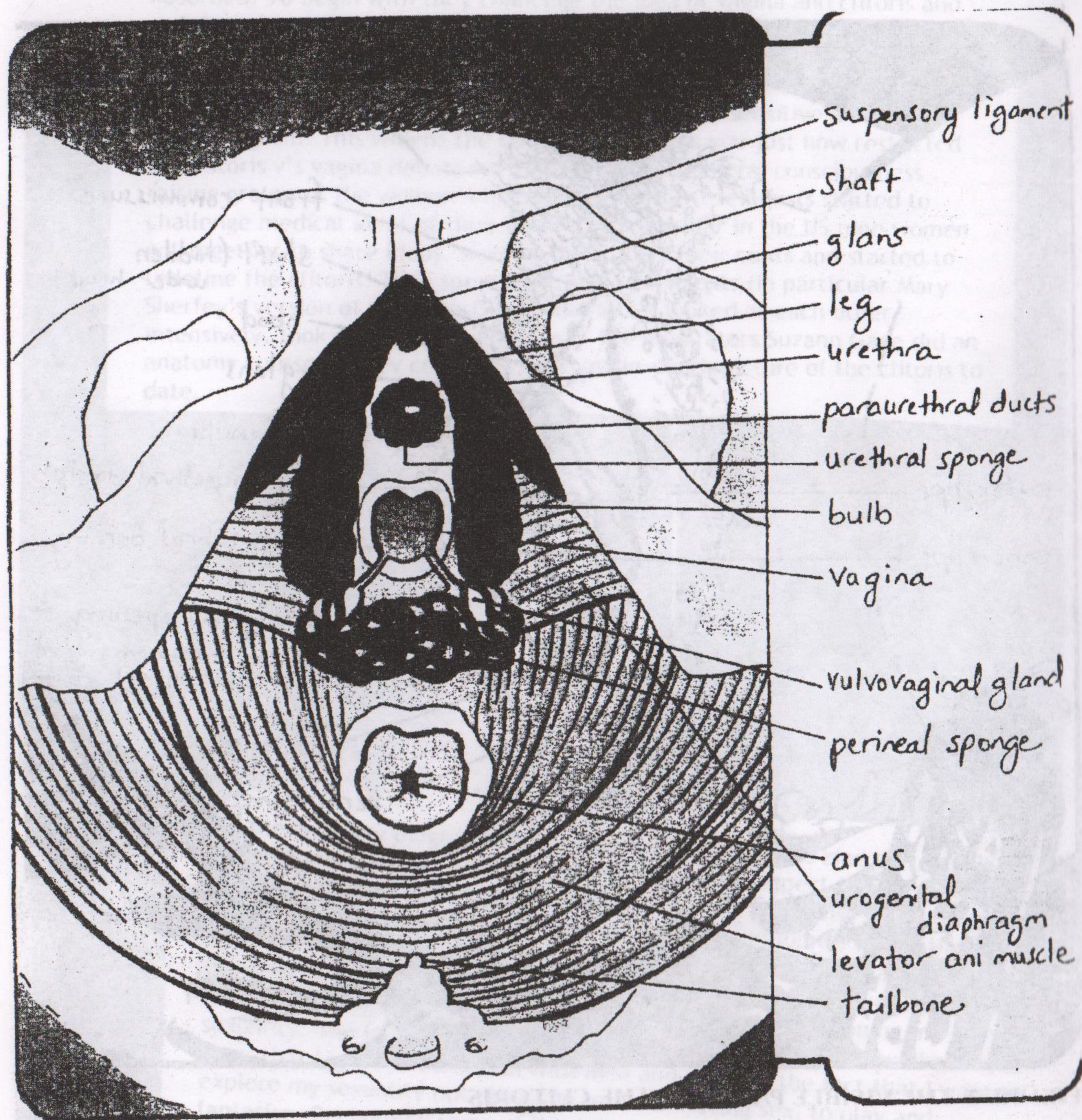


FIGURE 3: THE HIDDEN PARTS OF THE CLITORIS (FULL ON VIEW)

Redefining the Clitoris

Even though every clitoris has common features it is important to challenge the view that all women's genitals are the same, and understand that they vary in size, shape, colour, and texture, like every other part of our bodies.

By closely observing women masturbating and looking at previous anatomical pictures of the clitoris feminists came to understand the clitoris as a whole complex organ that encompassed all of the structures that underwent changes during orgasm. They rejected the notion that the clitoris just consisted of the visible glans, showing that the other structures were sensitive and played just as important role in sexual response. It is really quite amazing what these women did together, as there was previously very little understanding of women's genitals, both in text and in drawing. What is described below are parts of the clitoris as defined by the Federation of Feminist Women's Health Centres in the US.

Outer Lips

The hairy outer lips protect the clitoris but are not physiologically speaking part of the clitoris.

Inner Lips

These vary greatly from woman to woman, and also one lip can vary from the other on the same woman (colour, size, texture).

Glans

If you pull back the hood you will find the glans of the clitoris which is a smooth round bump. The glans has between 6000 and 8000 sensory nerve endings more than any other structure in the body, male or female. A misconception is that the clitoris is just the glans.

Front Commissure

Point where the outer lips meet at the base of the pubic mound.

Shaft

Connects the glans with the legs. This is hidden under the clitoris hood. When you are aroused it will feel like a hard ridge that rises from the glans towards the pubic mound.

Suspensory Ligament

This shortens and pulls the glans back underneath the hood during sexual excitement where it will stay until orgasm. The glans can still be felt but not as easily.

Hood

This is formed by the meeting of the inner lips and covers the shaft and the glans.

Frenulum

The inner edges of the inner lips meet just under the glans, forming an upside down V, which is the frenulum.

Fourchette or fork

The bottom edges of the inner lips meet just below the vaginal opening, forming an opaque membrane.

Paraurethral ducts (for more info look at female ejaculation article)

Two tiny openings on either side of the piss (urethral) opening

Urethral opening

Small opening where piss comes out

Vaginal Opening

Clitoral opening to the vagina.

Perineum

Soft bit of tissue between the fork and the anus

Perineal Sponge

Dense network of blood vessels that lie underneath the perineum. During sexual response this fills with blood like the other erectile tissues and becomes hyper sensitive.

Bulbs

Twin bulbs of erectile tissue, lying underneath the inner lips. During sexual response the bulbs fill with blood causing the lips to become swollen.

Vulvovaginal Glands

At the opening of the vagina, they release small amount of fluid when sexually aroused to lubricate.

Urethral Sponge (see female ejaculation article later)

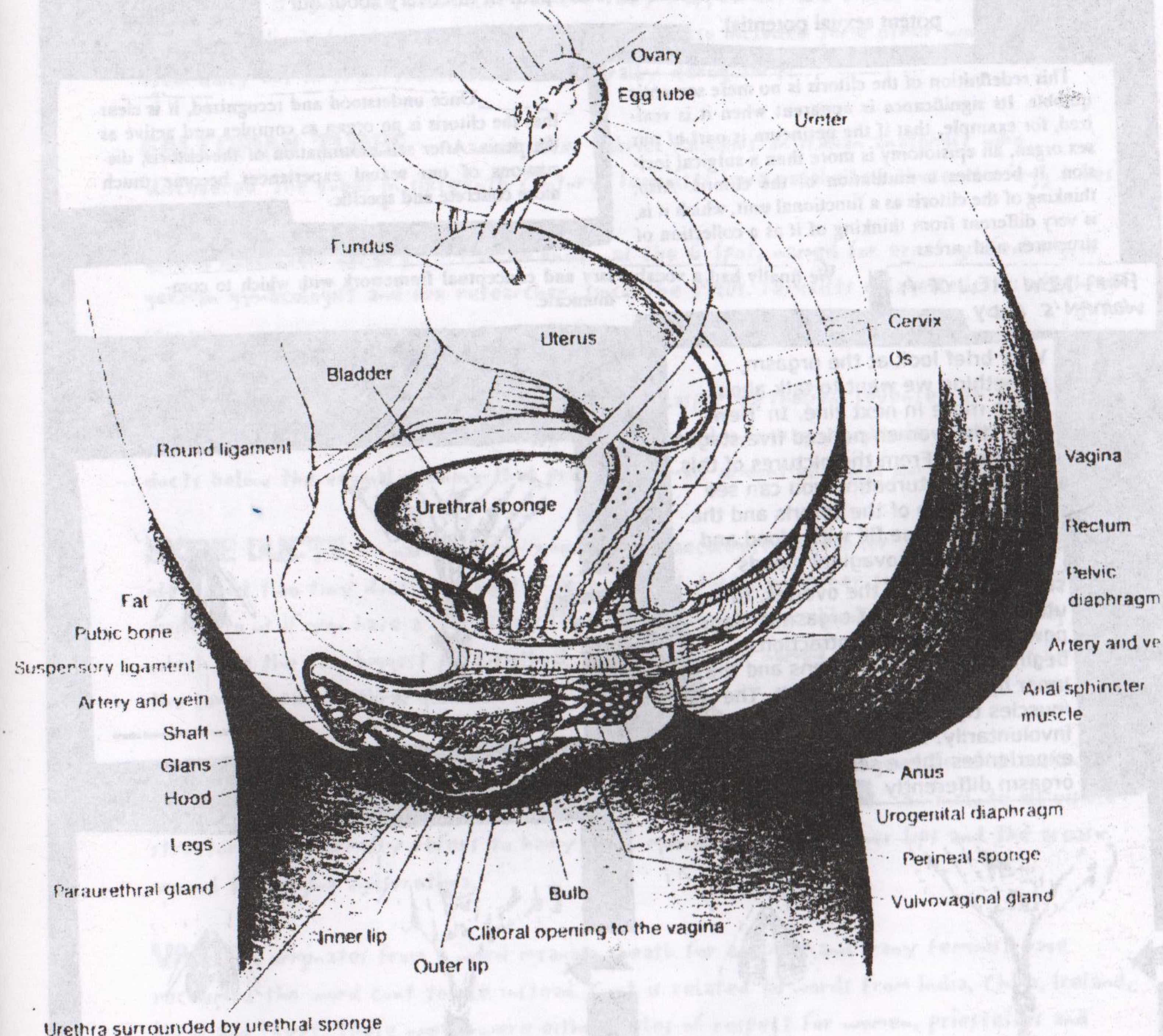
Spongy erectile tissue that surrounds and protects the urethra. It is also known as the g-spot and is highly sensitive.

Pelvic Floor Muscles

These are the several layers of muscle of the clitoris often referred to as the vaginal muscles.

- Urogenital diaphragm - flat triangle shaped muscle, lies under the vaginal (pelvic) opening. Both urethra and vagina pass through this muscle.
- Levator Ani muscle, also called pelvic diaphragm - this is a broad flat funnel shaped muscle that is the bottom of the pelvic floor. Its better known as the pubococcygeus (PC) muscle. The urethra, vagina and anus all pass through this muscle. All the structures of the clitoris rest on this large muscle which tightens the rectum and vagina when contracted. Repeatedly contracting this muscle can strengthen it so possibly increase sexual pleasure and help with urinary incontinence. Useful in gaining the elasticity back after childbirth. (Otherwise known as Kegel exercises.)
- The bulbocavernosus muscke, the ischiocavernosus muscle, transverse perineal muscle, also are muscles of the pelvic floor.

During orgasm, all these muscles, which lie just beneath the top layer of skin, contract in unison, compressing soft engorged tissues of the clitoris between them.



3-9 A cross section of the clitoris

From New View of a Woman's Body.

All of the parts of the clitoris function together to provide sexual pleasure and orgasm, but the clitoris is certainly more than the sum of its parts. Women can experience sexual pleasure and/or orgasm without knowing anything about their anatomy, or indeed, without touching any part of it. But knowing that there is so much more to the clitoris than just the glans should lead us to the path of discovery about our potent sexual potential.

FROM
CLITORAL
TRUTH.

This redefinition of the clitoris is no mere semantic quibble. Its significance is apparent when it is realized, for example, that if the perineum is part of our sex organ, an episiotomy is more than a surgical incision. It becomes a mutilation of the clitoris. Also, thinking of the clitoris as a functional unit, which it is, is very different from thinking of it as a collection of structures and areas.

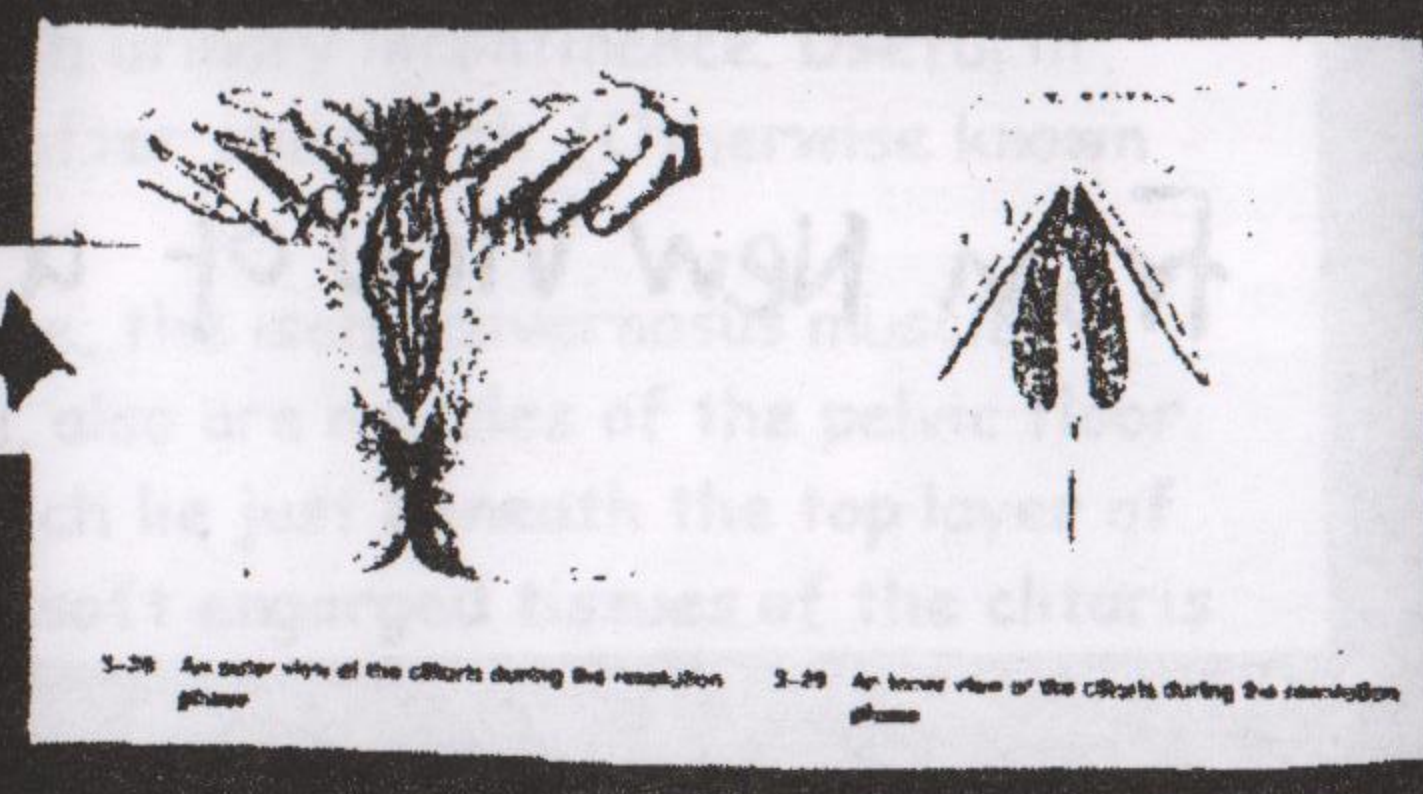
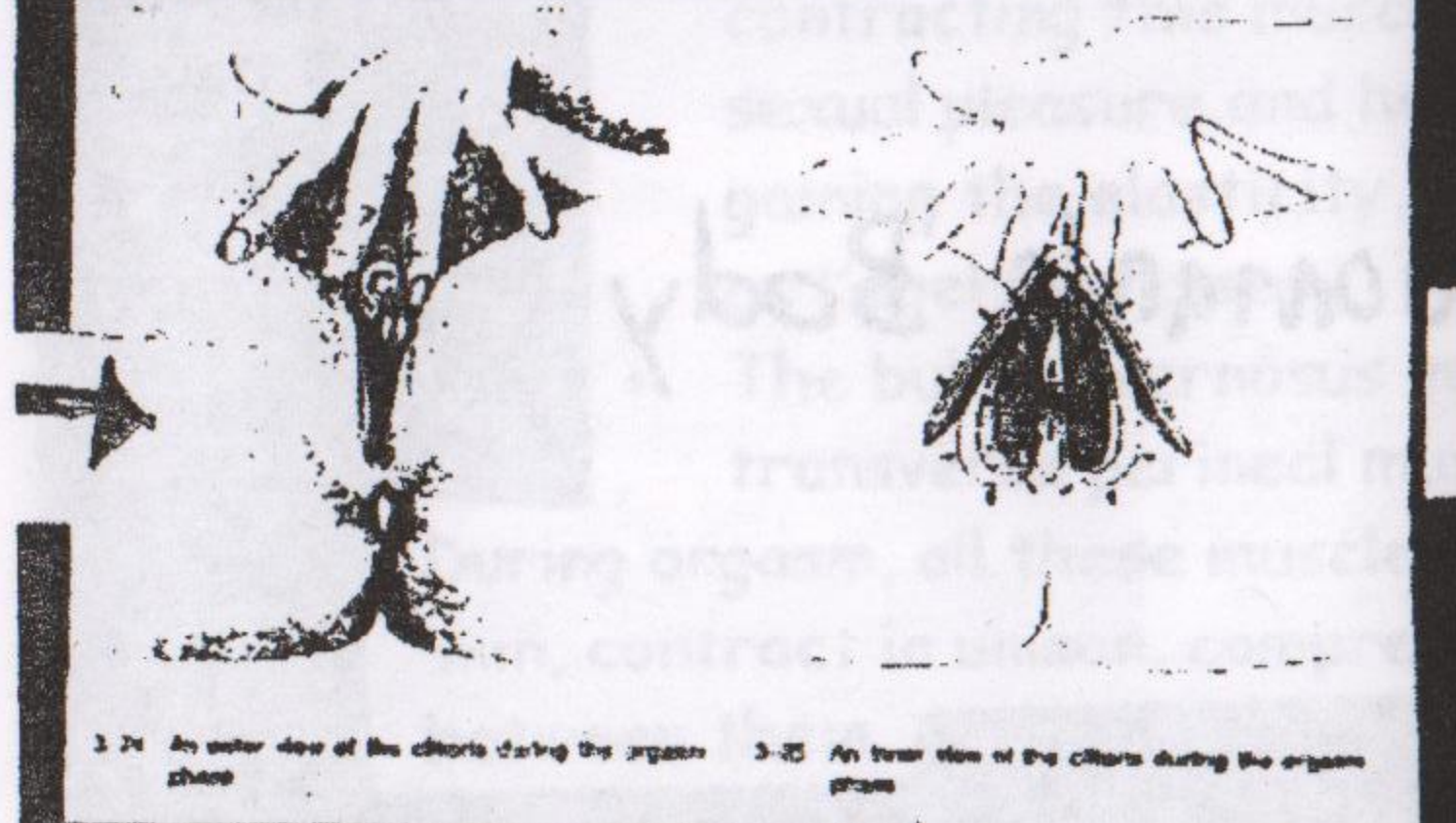
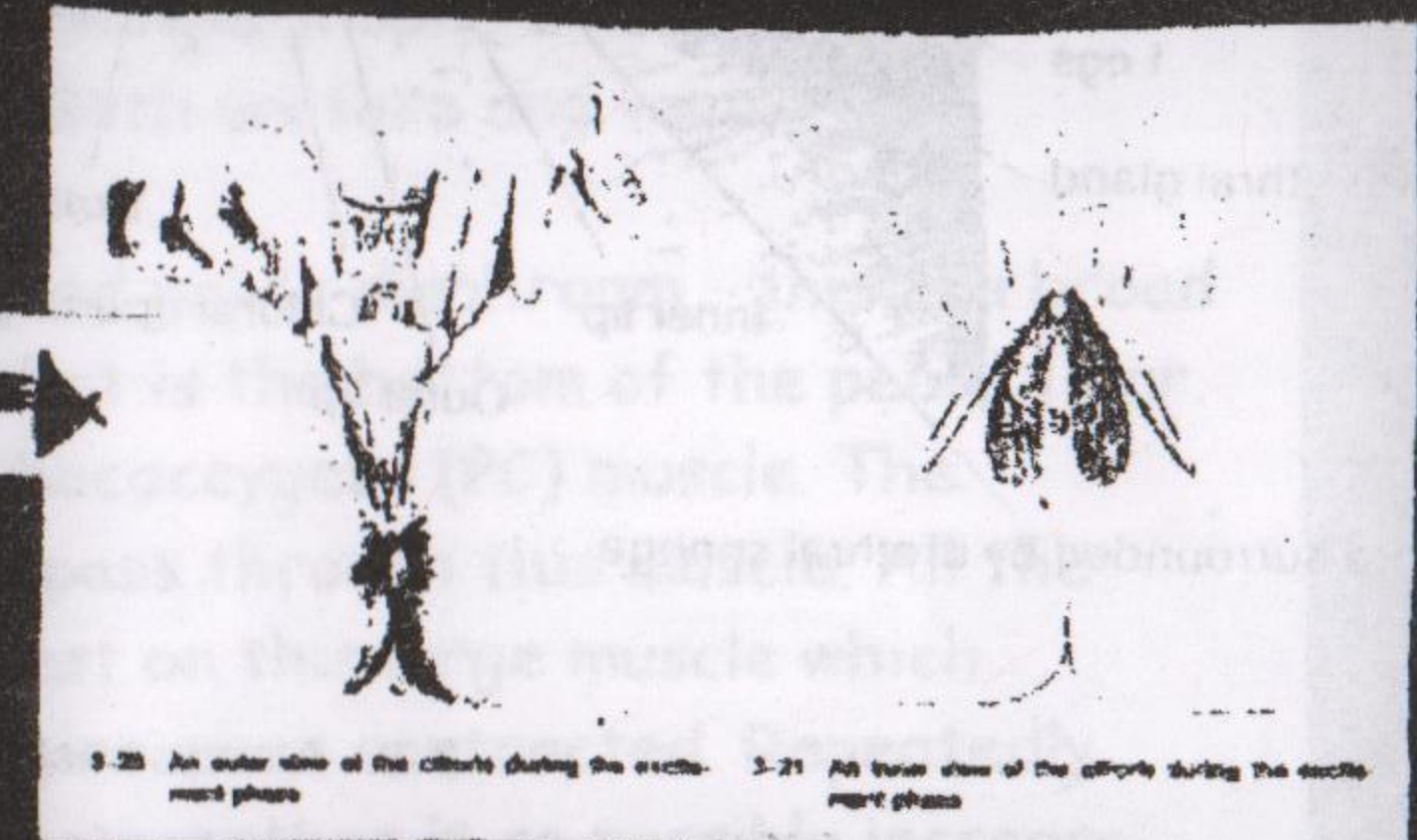
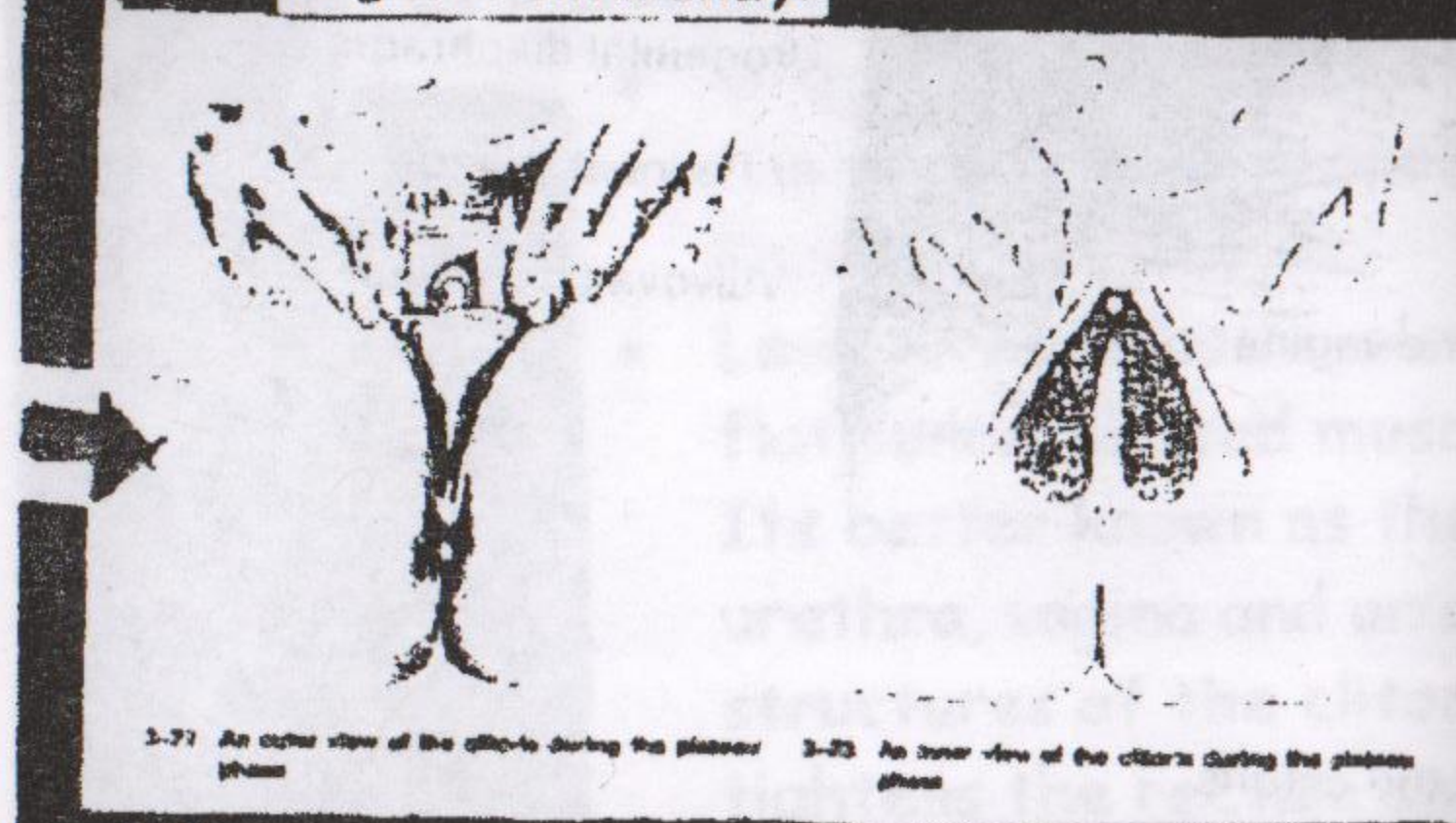
Once understood and recognized, it is clear that the clitoris is an organ as complex and active as the penis. After self-examination of the clitoris, discussions of our sexual experiences become much more concrete and specific.

FROM NEW VIEW OF A
WOMAN'S BODY

We finally had a vocabulary and conceptual framework with which to communicate.

Very brief look at the orgasm, something we want to talk about much more in next zine. In 'New View' the women noticed five stages of orgasm. From the pictures of this woman masturbating you can see how the bulb of the clitoris and the urethral sponge fill with blood and swell. The vulvovaginal glands

secrete fluid, and the ovaries, tubes uterus also swell. At orgasmic stage powerful rhythmic contractions begin. The clitoris shortens and the inner lips tuck in, covering it. The muscles tighten and contract involuntarily. Every woman experiences these sensations of orgasm differently.



These are words that have been taken from the names of male doctors to label parts of our bodies they 'discovered' — ALL WRONG VERY WRONG. As a friend of mine puts it, very eloquently, it's just like colonialism, where they mapped out the world but this time they colonised, divided and renamed our bodies. I have also included some other words that are used daily but in their translation are generally derogatory.

FALLOPIAN TUBES — named after gabriel fallopius an italian anatomist who 'discovered' the tubes in sixteenth century. feminists have relabelled these the 'egg tubes'.

GRAFENBERG SPOT — Can be known as the G-Spot, named for ernst grafenberg, a german gynecologist and sex researcher, since the 1940s. feminists relabelled this urethral sponge.

BARTHOLIAN'S GLANDS - named after kaspar bartholian, seventeenth century anatomist from Copenhagen. These have been renamed vulvovaginal glands, they are two small ducts below the vaginal opening that produce a small amount of liquid during sexual response.

SKENE DUCTS — named after american gynaecologist Alexander J.C Skene in 1880's. He identified two tiny ducts, called the paraurethral ducts, on either side of urethra, which are visible to us if you have a look. They lead to two glands embedded in the surrounding tissues which are the two biggest paraurethral glands, these he named after himself. Now known as the largest paraurethral glands.

PUDENDUM still used in mainstream medicine to describe visible genitals of a woman. Pudendum means shame in latin. An alternative is to use vulva, which can include all visible structures but normally refers to hairy pubic mound, outer lips, inner lips and the areas around the vagina and urethra.

VAGINA originates from a word meaning sheath for a sword and many feminist have reclaimed the word cunt to use instead. Cunt is related to words from india, China, Ireland, Rome and Egypt. These words were either titles of respect for women, priestesses and witches, or derivatives of the names of various goddesses. (from barbara j. walkers 'the women's encyclopaedia of myths and secrets')

LABIA MAJORA - Latin for big lips. These have been renamed outer lips so as not to be misleading as they are not necessarily bigger.

LABIA MINORA - latin for little lips. for obvious reason they have been renamed inner lips as sometimes they are bigger than the outer lips.

Some thoughts on doing self-exam

1 First off make sure you've got a quiet, undisturbed, warm enough space for the time you need. It helps to get everything you might want together so it's easy to hand: speculum, mirror, lamp/ torch, books, loo roll, pen and paper... It's a good idea to have a pee if you need one - using a speculum on a full bladder can feel a bit uncomfortable.

Find a good sitting position on a couch or the floor or a bed leaning against a wall, where your back is well supported using any cushions/bedding you might need. Make sure all of you but especially your abdomen can feel relaxed.

2 You can draw your feet in towards your body and place a mirror between them (your knees falling out as far as comfortable) or balance the mirror against something between your legs. If balancing a mirror either way doesn't work you could try using a long handled mirror or ask a friend to hold it.

Here you can look at your cunt and see the detail of where folds of skin meet, whether your inner or outer lips are larger, what your clitoris, hood, urethra, hymen etc look like. You can explore with your fingers. It's interesting as well just to notice how you feel about what you see. It's also an opportunity to see whether there is any redness, irritation etc? Is there any fluid/discharge at the opening of your vagina, urethra or generally at your vulva? Colour, texture, smell, taste?

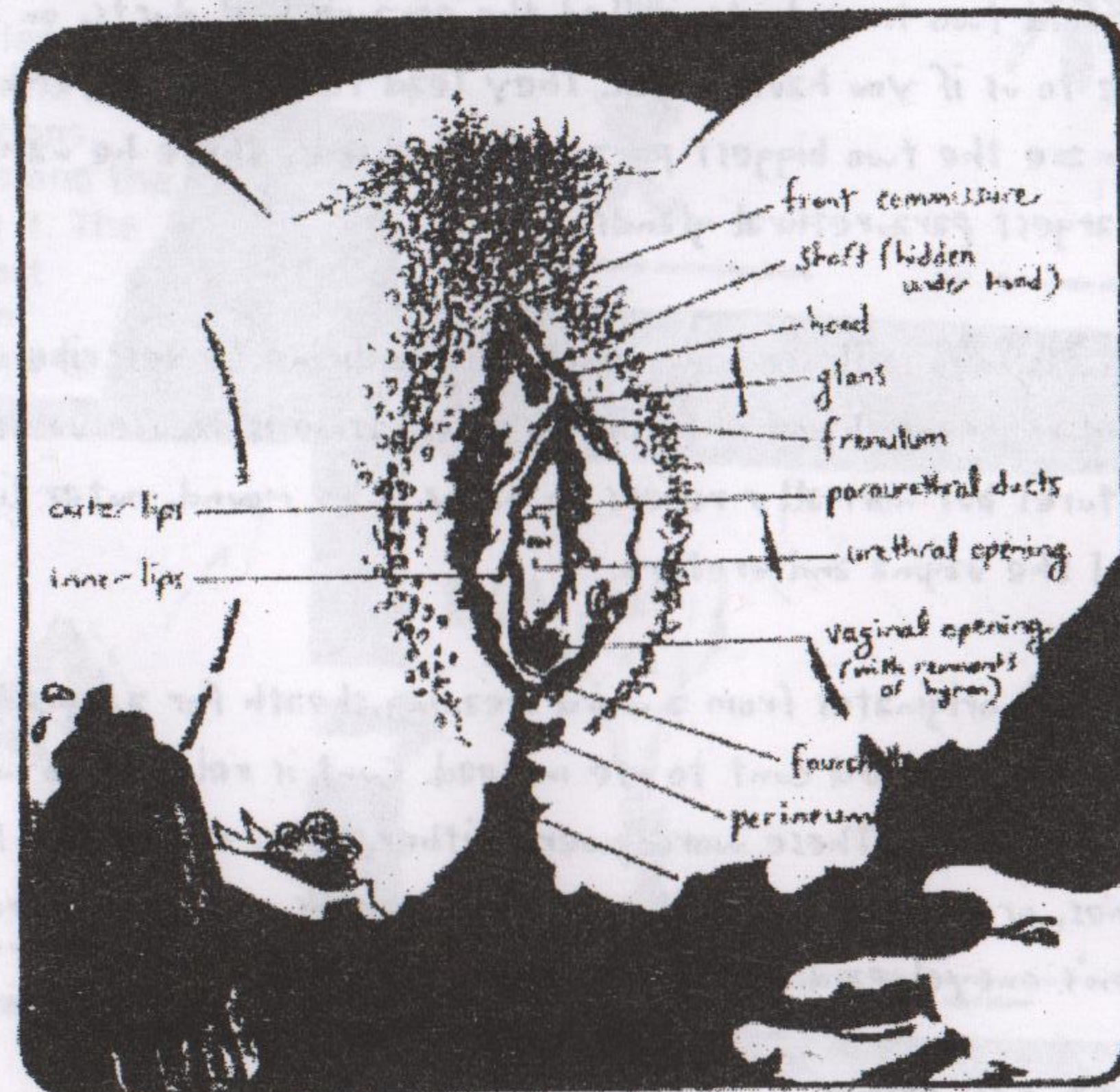
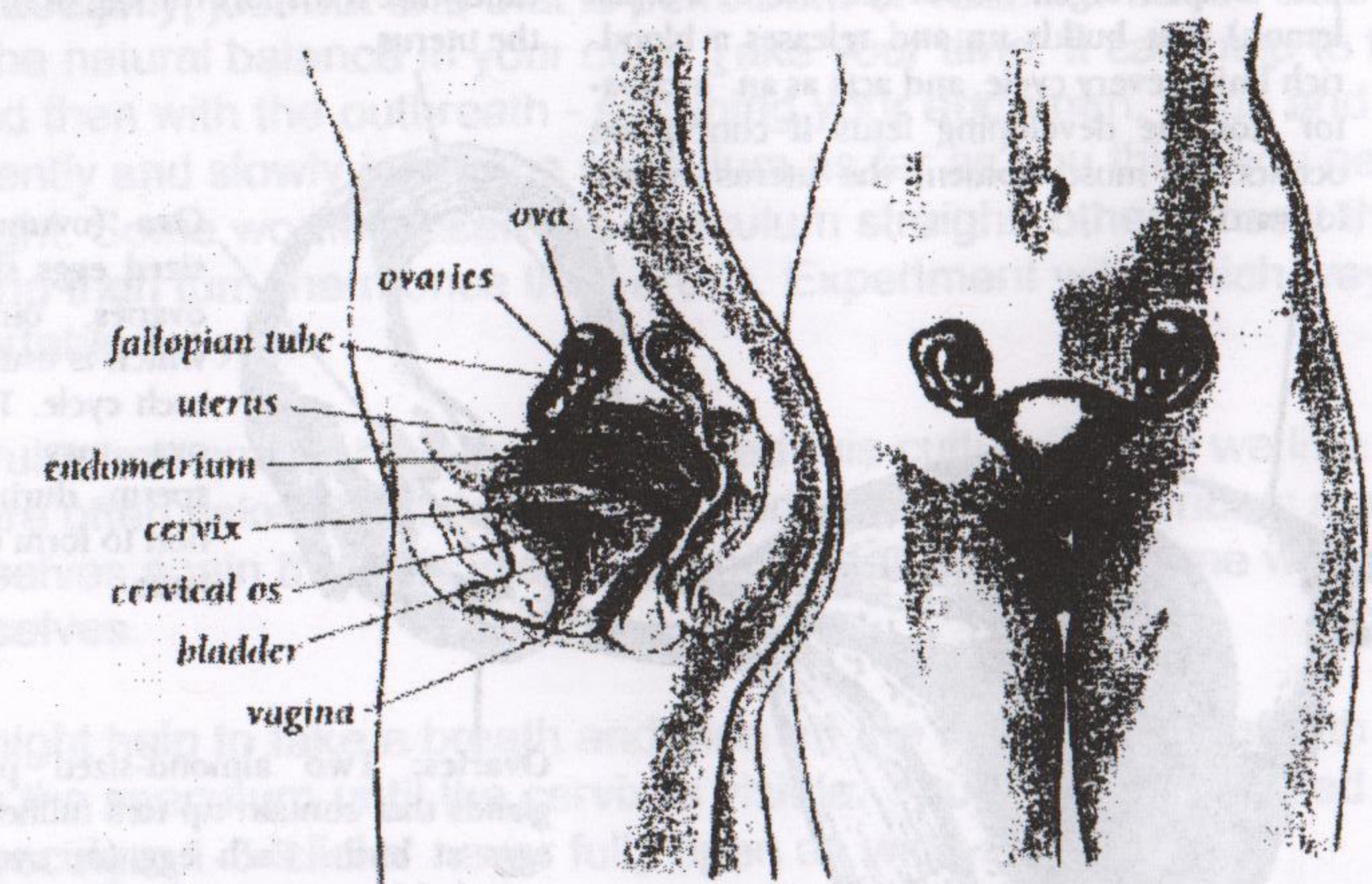


FIGURE 2: THE VISIBLE PARTS OF THE CLITORIS

It feels useful to think about how self-exam is one of the ways we can explore ourselves, be sensitive with ourselves, is a part of our sexuality. This space is ours to do with as we please, as distinct from the more clinical/ medical experiences we may have had.

3 Take a bit of time checking out how the speculum you have opens and stays open and then how you release and close it before it is inside your body. It's worth practising it a few times.



4 Then you can gently insert clean finger(s) into your cunt until you reach your cervix where you can feel it's position - is it high or low? Does it feel soft or firm? Does it feel more open or closed at the os.

The cervix changes throughout the menstrual cycle. Just before ovulation and at ovulation (when an egg is released from the ovary) the uterus moves up inside the body so the cervix feels higher. Some women find it harder to find their cervix with their fingers at this time. The os also opens and cervical fluid secreted at this time is stretchy, clear, slippery- like egg white. You can stretch it between your fingers. It's more alkaline and tastes saltier. After ovulation and moving towards menstruation the uterus moves down inside the body and the cervix feels lower, the os also closes and fluid secretion can be hardly noticeable or can feel dry or stickier/ whiter with a more sour/ sweet taste and is more acidic. Some women have described their lower/firmer cervix as feeling like the end of their nose and their higher/softer cervix around the time they ovulate as feeling more like the closed lips of their mouth.

Sometimes you can feel small bumps on the cervix. These might be what are known as nabothian cysts. For some women these can come and go again. Some women have them all the time and it doesn't concern them. When you come to look at your cervix check these out in case they are something else (like cervical polyps or warts) that might need some kind of treatment.

Noticing how much of your finger(s) has reached inside to meet your cervix and at what angle all helps to get an idea for how far and at what angle to insert your speculum to see your cervix. If you have a choice of size when you buy your speculum then this might also help you decide which is best for you.

CROSS-SECTION OF THE UTERUS

Uterus: The womb. A hollow, muscular, pear-shaped organ (about the size of a small lemon) that builds up and releases a blood-rich lining every cycle, and acts as an "incubator" for the developing fetus if conception occurs. In most women, the uterus curves forward.

Fallopian tubes: The 4-5-inch-long narrow tubes that transport the egg from the ovary to the uterus.

Ova (ovum): Granule-sized eggs stored in the ovaries, only one of which is usually released each cycle. The ovulated ova may unite with sperm during fertilization to form the eventual fetus.

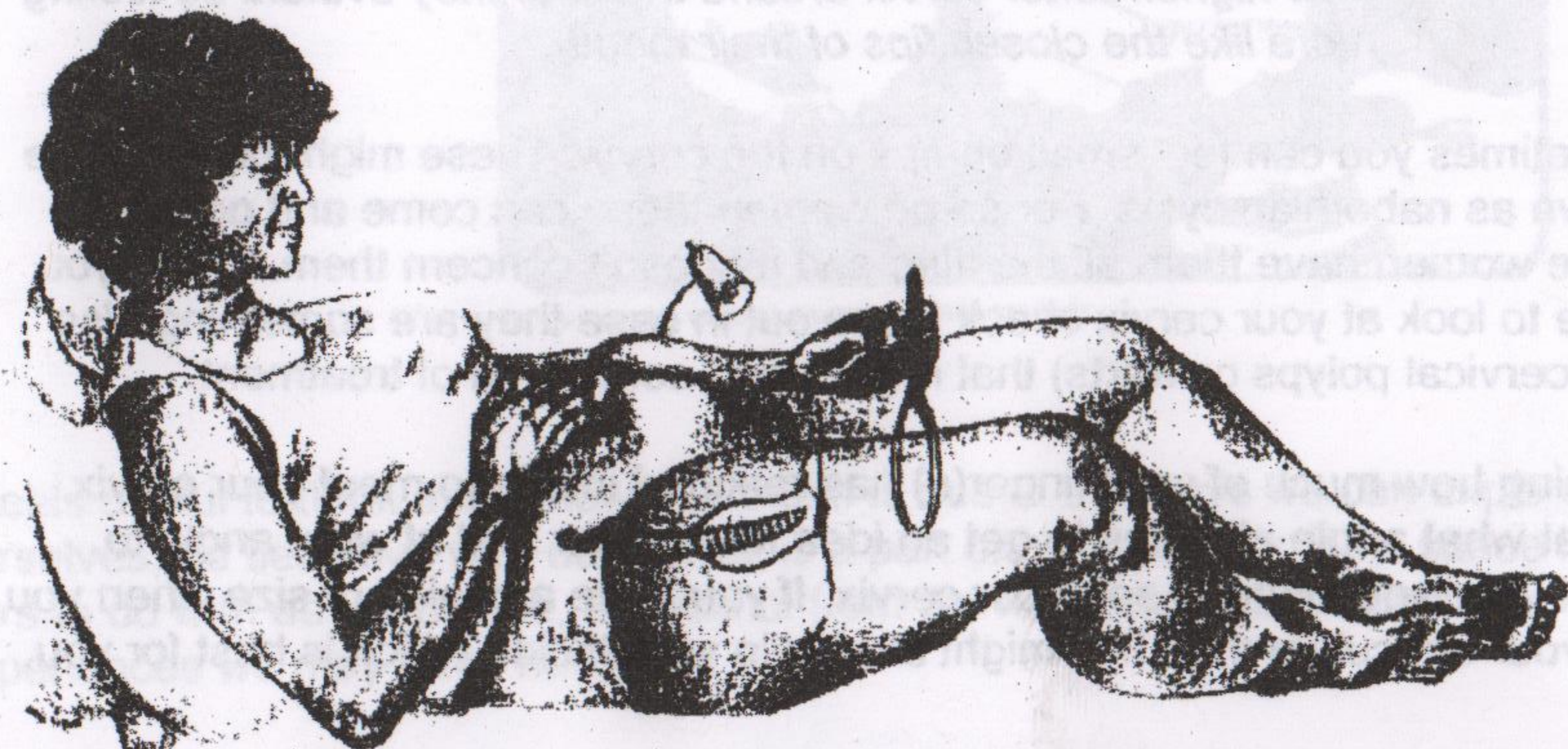
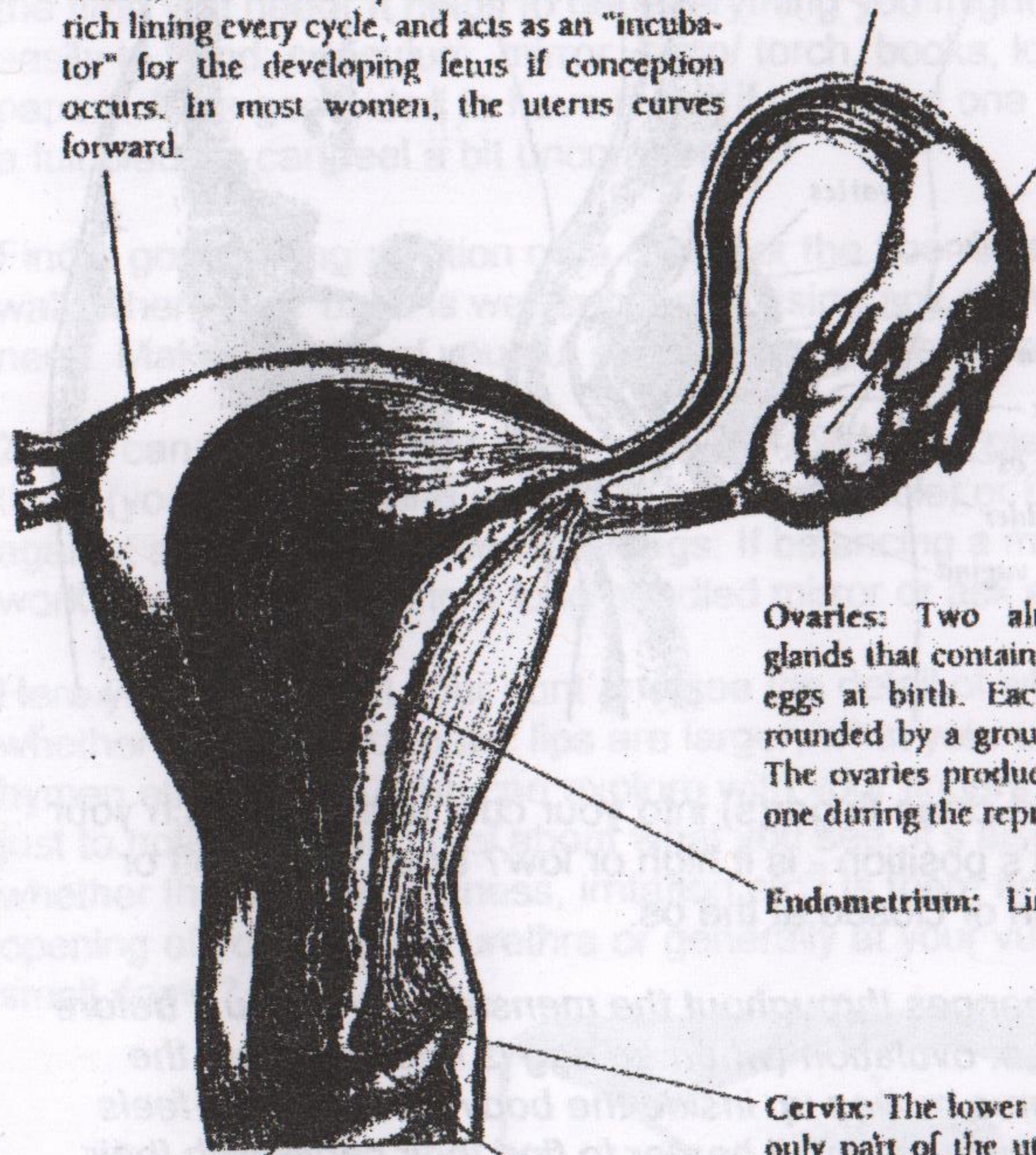
Ovaries: Two almond-sized primary sex glands that contain up to a million immature eggs at birth. Each egg (or ovum) is surrounded by a group of cells called a follicle. The ovaries produce estrogen and progesterone during the reproductive years.

Endometrium: Lining of the uterus

Cervix: The lower opening of the uterus. The only part of the uterus that can be felt protruding into the upper vagina. Lined with channels which cyclically develop cervical fluid

Vagina: The elastic 4-6-inch-long muscular passage between the vulva and cervix.

Cervical os: The small opening of the cervix that becomes larger around ovulation



5 You can lubricate the speculum with a bit of saliva or warm water, you can also use a lube/jelly, just not one that is petroleum or vaseline based as this can upset the natural balance in your cunt. Take your time. It can help to take a breath and then with the outbreath - softening your abdomen, anus and genitals - gently and slowly insert the speculum as far as you think you need and feels right. Some women insert the speculum straight, others insert them sideways and then turn them once they are in. Experiment with which way feels comfortable for you.

It feels useful to remember how goal orientated this culture is that we live in, where we are often asked to dislocate from and rush our experiences: and to remind ourselves again that this is an opportunity for us to take time with and care of ourselves.

6 Again it might help to take a breath and then on the softening outbreath gently open the speculum until the cervix is visible. You should only need to open the speculum 1-3 'clicks' never fully open as wide as it can go. Sometimes you need to gently wiggle the speculum once it's open. Sometimes coughing gently or bearing down with your abdominal muscles can make the cervix come into view as well. If you can't see your cervix it might help to do steps 4 and 5 again and also ask yourself if you are still comfortable and taking the time and care you need. Once opened and locked the speculum should stay in place so you can just look - if it doesn't you might need to soften and relax a bit more or support the speculum in place with your fingers.

7 Shine the lamp or torch at the mirror so the light bounces back and you are able to see your cervix clearly. If someone else is looking at your cervix and shines any light directly up towards you cervix take care that whatever light source you're using doesn't feel or get too hot near your body.

Once you can see your cervix you can make a note of the shapes, colour, texture and sensation of the vaginal walls and the cervix itself.

Some women have a pink looking cervix - the pink cells are called squamous cells. Some women have a noticeable red ring around the os - here the red looking cells called columnar cells found inside the os are being seen on the outside of the cervix and the point where the two types of cells meet (called the squamo-columnar junction) is far more visible. This is sometimes called an eversion. For many women this is totally normal for them. Some women may notice patches of red on the cervix. These are sometimes called erosions. They can be caused by trauma to the cervix, but for some women they come and go throughout their menstrual cycle. It's a good idea to keep an eye on anything you notice and see whether it's something that needs any attention.

You can see if there is any fluid (colour, texture, smell, taste)? Depending on where you are at in your menstrual cycle fluids may be white and creamy, clear and stretchy or blood. Infections or STDs can create whiter, thicker, yellow or green discharge which can smell more strongly.

You can now also visually check the position of the os. Is it open /closed. Is it small and round or wider more like the shape of a mouth? If you have an IUD you should see the string coming out of the os -- if you can't see it, get it checked out to make sure it's still in place. You might also see how any births or abortions you've had might have changed the shape of your os/cervix

8 When you take the speculum out go slowly, and take care if you release the blades on the way out not to pinch the walls of your vagina. It can be useful to look at, smell, taste any fluids that might be at the end of the bills of the speculum once you have taken it out as well.

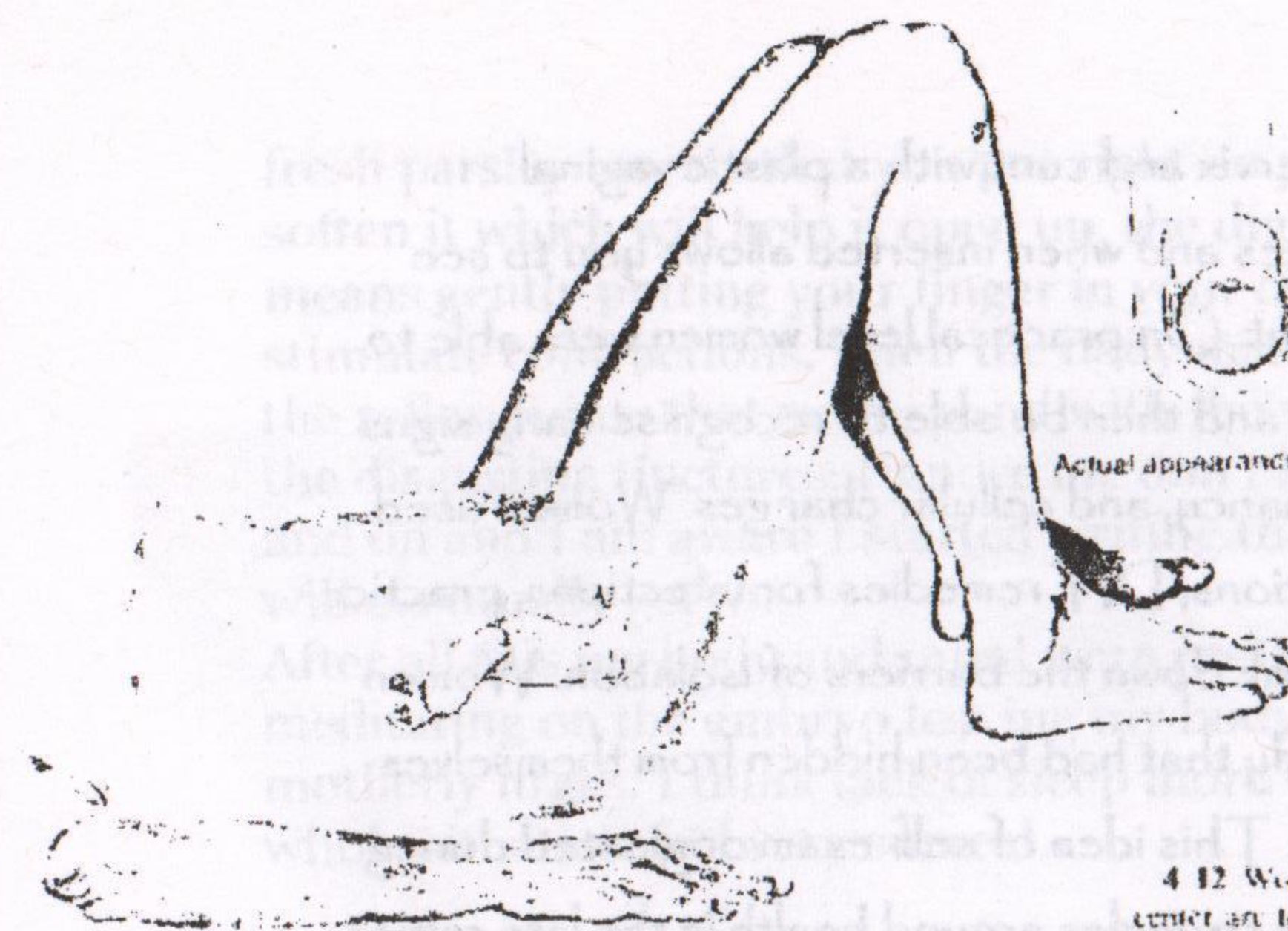
9 It can be a useful thing to make notes about self-exam. Sometimes even a sketch can be a good record and help you notice shifts and changes throughout your cycle and otherwise. It's a good idea to do self-exam regularly for a while to familiarise yourself with how you want to do it and to get to know your body and how it changes as related to your menstrual cycle, diet, stress, sex, the clothes you wear, the weather, possible/confirmed pregnancy (where the cervix has a bluish tint and is softer/ larger) etc and learn what is normal for you at given times.

It's also really useful to make a mental note of how you feel afterwards as well - how did you feel about doing self-exam, about how you did self-exam *this* time and how did you feel about your body

10 When you're done, wash your speculum well in warm water and if you use soap make sure it's well rinsed off. Let it air dry somewhere then store it in some kind of cover or bag. Plastic speculums are called 'disposable' but can be washed and used again and again. It's worth mentioning that speculums shouldn't be shared, just to cut out any risk of passing on infections or STDs. They are fairly cheap, especially in bulk if you know other women who would want one. Bulk orders (boxes of 25) are available from 'Healthcare' Tel: 0208 920 6208. Individual speculums from Women's Health Tel: 0207 251 6333.

Doing self-exam can empower and encourage us to have more of a general sense of self-awareness and control of our bodies, health, lives. It can help us prepare for and plan cervical smear tests (best done around ovulation) and help with decisions on the best and earliest treatment for any possible infections, STDs or positive smear results.

If you're unsure or concerned about anything try and find more self-help info and/or a practitioner you trust to check things out with. If you know other women who might be interested you could always meet to learn more together/ support each other. To share any thoughts, questions, find further reading/ resources you could email anarchofeministhealth@yahoo.com

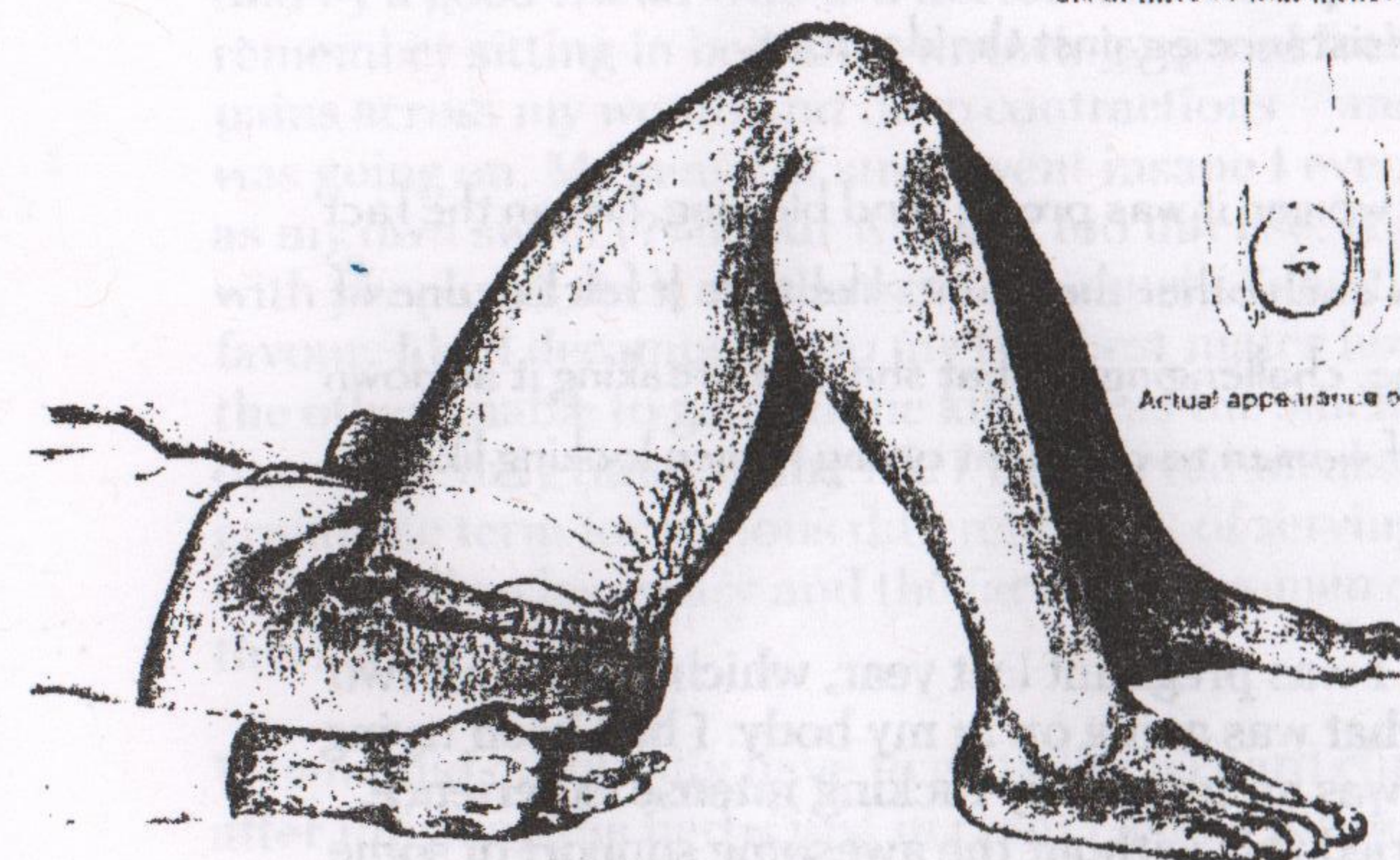


4-14 A woman with a tipped-back uterus doing self-examination

Actual appearance of cervix

4-12 Women whose uteruses are not front and center are told that they have "tipped uteruses," usually with the implication that this is abnormal! On the contrary, every woman's uterus is tipped one way or another, whether it is forward (anteverted), middle or back (retroverted). Indeed, the uterus can change positions and it has a tendency to retreat when touched. This woman's uterus is tipped up slightly.

4-13 If a woman is not pregnant, her uterus is about three or four inches long, slightly elongated and



4-13 A woman with a midline uterus doing self-examination

Actual appearance of cervix



4-12 A woman with a tipped-up uterus doing self-examination

Actual appearance of cervix

From New View of a Woman's Body.

Self-exam refers to viewing your own cervix and cunt with a plastic vaginal speculum. The speculums come in all sizes and when inserted allows you to see your cervix, using a mirror and strong light. On practical level women were able to understand what looked normal to them and then be able to recognise early signs of infection, their menstrual cycle, pregnancy, and cellular changes. Women used this info in loads of ways like early abortions, DIY remedies for infections, practice self-insemination and importantly to break down the barriers of isolation. Women started learning about parts of their body that had been hidden from themselves but been seen by thousands of doctors. This idea of self-exam originated during the early stages of second-wave feminist struggles around health in the late sixties and early seventies. It was about women taking control over their health but in collective groups, not as individuals. In the collectives women did self-exam together and were able to share experiences and knowledge. The repossessed speculum became a symbol of resistance against the doctors.

When I first did it with a load of women it was pretty mind blowing. I mean the fact that a group of women can show each other their cunts like that. It felt like one of the most kick ass things I've done, challenging all that shit and breaking it all down with those women. For a load of women to comment on my hymen looking like a flower still makes me smile.

I did self exam the whole time I was pregnant last year, which was about two months, and was able to see what was going on in my body. I had been trying to do a herbal abortion which was an incredibly fucking intense experience. There is no way I could have tried this without the awesome support of some women in Brighton. I have been part of an anarchy feminist health collective for a couple of years and trying the herbal abortion made me realise how important being involved in the collective was. It had created a space where we had already explored and shared ideas on DIY health and a network of support had been set up.

The day I found out I was pregnant we got together with books and worked out exactly what I had to do. I took massive quantities of vitamin c, which is meant to block the hormone progesterone from working, by blocking this, the egg will not implant in the womb. I then took tinctures of dong quai and black and blue cohosh - enough to try and get my womb contracting and abort the foetus. I got really tired as you need to keep the levels of herbs constant in your body so I had to wake up every couple of hours to take more. It was pretty scary as I didn't know anyone personally who had tried this but we were in contact with some amazing women on sister zeus email list (details later) who were there for support and advice on dosages. I felt like I had a checklist of things that I had to do everyday, which we compiled after reading success stories. To begin with you need orgasms - lots of them. Ok so far. Then...the

fresh parsley inserts that you put right on your cervix for several hours to soften it which will help it open up, the digital irritation of your cervix - which means gently putting your finger in your os and moving it around to try and stimulate contractions. Then the daily massage of my womb and pressing of the reflex points that correspond with the womb on my feet and finally taking the disgusting tinctures. (ignore me don't let this put you off). I could go on and on and I am aware I started writing this to talk about self exam which I will eventually get to.

After all this my body and mind were pretty confused. I was constantly meditating on the embryo leaving my body but my body was having strong motherly urges. I think lack of sleep more than anything was making the whole situation feel very surreal.

So during all this I was doing self exam sometimes on my own and sometimes with my astoundingly beautiful supportive friends. I noticed that my os was open, the hole in my cervix which is normally closed during pregnancy. I was also getting such sharp pains that I woke up with them hurting so much. I was told by a good friend who is a doctor that these pains weren't 'normal'. I remember sitting in bed after throwing up and feeling really scared. I had pains across my womb and deep contractions - and I just didn't know what was going on. My sense of smell went insane I even had to shave my armpits, as my own sweet (?) odour was just too intense. It was hard to be intimate with people, as their smells were too much. Sometimes it worked in my favour. I had decamped into my two best mates house rolling from one bed to the other unable to go into the kitchen as the smell was so repugnant - so for one of the only times in my life I was served meals à la bed. 'Meals' being a grandiose term for various different ways of serving bland rice. This support made it all so less scary and the fact other women on this email list had done this successfully.

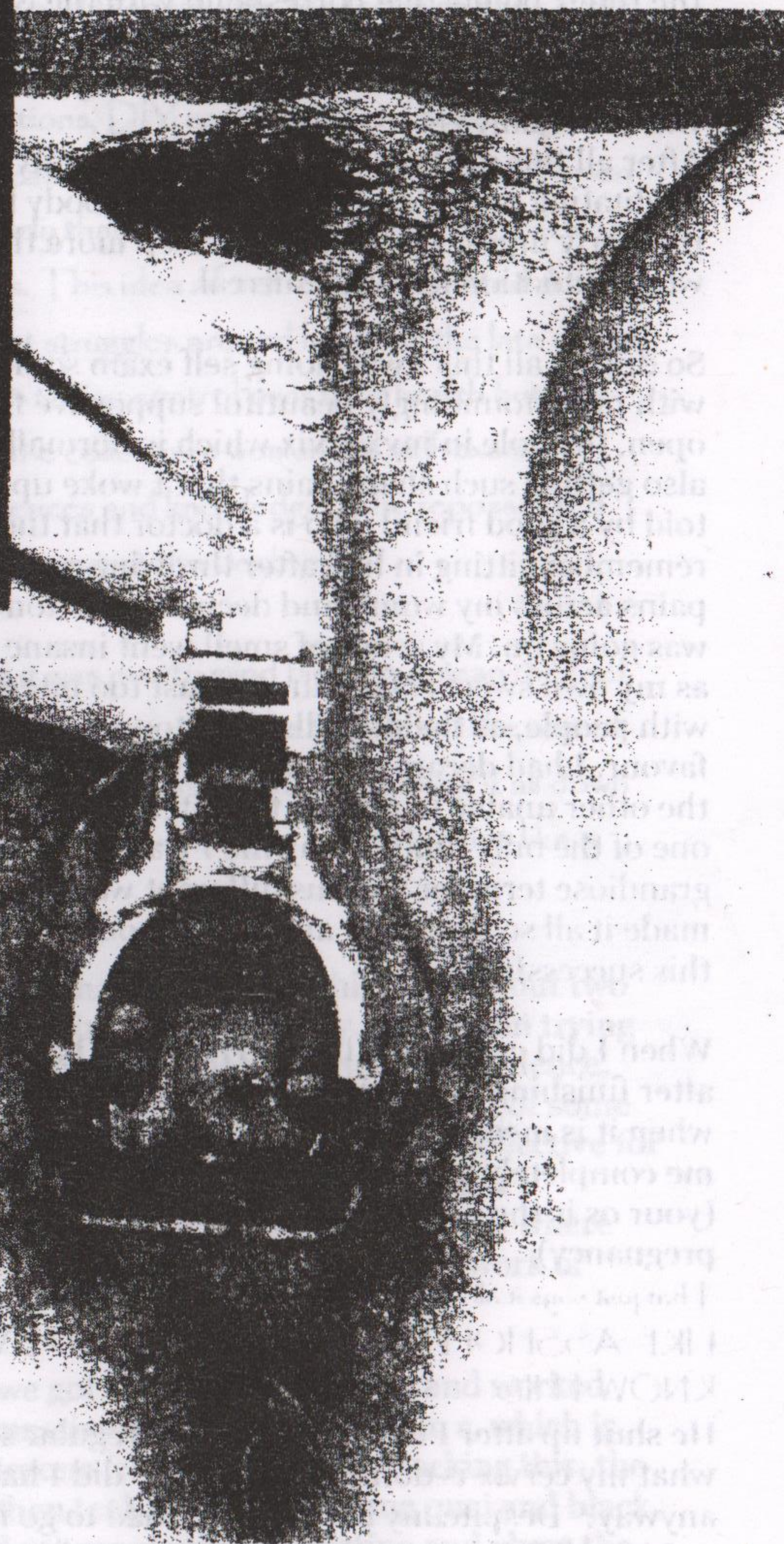
When I did eventually have to go to the bastard clinic. (I waited for 2 weeks after finishing the herbs just in case) I asked the doctor why my os was open, when it is meant to be closed during pregnancy to stop infection. He looked at me completely astounded and asked me how I knew what my os looked like. (your os is the hole in your cervix, which is normally closed during pregnancy).

I had just says it all - WHY SHOULD I NOT KNOW WHAT MY OS LOOKS LIKE ASHOLE. IT'S MY BODY AND EVERY WOMEN SHOULD KNOW THIS.

He shut up after I told him that I do regular self exam and that I know exactly what my cervix is doing. Cretin. Why did I have to interact with a man there anyway? Despite my best efforts I had to go for a clinical which pissed me off as I just didn't want to have to interact with an establishment that disrespects women but I felt fiercer and stronger having tried to do it myself. Also understanding my body more and just sitting with those feelings felt really powerful. I mean it was all ok and on some level at least I can go and get an legal clinical abortion, as in some countries they are still outlawed. But I still felt very conscious of the fact that women have had this knowledge stolen from them, this professional medical elitist establishment took the place of women centred learning, knowledge and space.



A blatantly well used image but sums up the feelings of the early women's health mov. in 70's.



women using a speculum showing the os (opening to the cervix)

Interview with a female ejaculator!

What's your understanding of female ejaculation?

An ejaculation of fluids from the glands around the urethra at the height of excitation.

When did you find out about female ejaculation?

I was at a workshop in Cool Tan in Brixton in 94-95. There was an art exhibition on sexuality there and two dykes gave a workshop on female ejaculation with a video of women jacking off and spurting everywhere. It was very bizarre.

When and how did you first experience this?

The workshop made me aware of the possibility of women ejaculating. I realised when I was having sex that there was a certain point, a feeling or intensity that I couldn't get passed. It was maybe a fear, I couldn't let go I needed to be in control. I had thought that it was something that I would be able to do one day.

When it finally happened I was in a long term relationship, had had two kids and the first night it happened I had taken half a pill. I was on top of my partner and he was deep inside me and when I orgasmed I stood up and a huge gush of liquid came out of me and this carried on even when I had a bath afterwards. It felt like I was about to piss myself but it isn't piss. The fluid is wet like piss but mine doesn't smell or stain, but it tastes salty. I think it varies from women to woman but it very obviously isn't urine.

What do you do now to ejaculate?

I concentrate on the thought of ejaculation, bear down on my pelvic muscles and my urethra, and trying to stimulate the g-spot. I can't really do it with my fingers but with a dildo I can get the position and it works every time. It's different when I am wanking to when I'm with someone else but I'm more likely to ejaculate quicker when wanking. The amount of fluid that comes out varies every time. When I'm with some one else I sometimes don't ejaculate when I want to and sometimes when I am not expecting it I do ejaculate. I suppose I'm less in control with a partner, it's a bit more random.

Can you explain more about the need to be in control?

Because of personal reasons I've always had a need to be in control of any situation because as a kid I was never in control and spent my life trying to fight for this. Going through a natural birth changed this. Being pregnant takes over your body and you do lose some control. During labour you have to allow everything to happen, you have no control over the contractions. After this I was able to let go during sex, before I would have to stop early, not coping with the pain / pleasure thing. Learning to let go helped me to gain self confidence.

Does it add to your orgasm?

I like it and I feel it does add to my sexual experience it's visible and gives you clarity about the fact that you've orgasmed. But I really got into the coming and not the journey bit, which isn't always such a good thing. I enjoy the release ejaculation gives me when I'm coming down from orgasm, just letting it all out. It's just a part of sex though not the main part. It's also a cool party trick!

Have you spoken to other women about this?

I've spoke to so many liberated women and very few have experienced this on a regular basis and I wonder why. It's really sad... It's really crap, what kind of society do we live in. How much as women do we know about our bodies? why don't we know this? We know nothing.

Do you think that this is a feminist issue?

Yes I do, it's definitely a political thing for me. There is very little information on this like so many other aspects of women's sexuality. Many women were operated on or sent to therapy because doctors thought it abnormal for women to ejaculate.

If you want to read more about female ejaculation:

The Clitoral Truth, chap 3

The G Spot, chap 3

<http://www.very-koi.net/tutor/female/female.htm>

More ejaculatoras

Two friends of ours ejaculated for the first time in the last few weeks so we thought we'd add their stories

1) I felt like I was going to have a really big orgasm anyway, it was really building up. When I came it felt amazing but the ejaculation wasn't like a really nice feeling or any better, just more of a release. The whole thing seemed bigger, more wow afterwards, it was such a surprise, like what happened there?

My boyfriend had been kneeling upright and I was kneeling over him upright, he was really deep inside me. It hasn't happened since, I haven't allowed myself to get to that stage because it does feel like it's too much. I would like to be able to do it again because it was amazing. It wasn't so much to do with the release but about the orgasm that came along with it, that made the release happen. It seems that for the release to happen, you have to have an amazing orgasm unless you learn to release/ejaculate more easily. I don't think the ejaculation is the same as orgasm. When I ejaculated it didn't feel like I was pissing myself then but now when I get close to that point it does.

2) Its harder in some ways as you need to know how and where to touch. Finger fucking hasn't been explored enough by men, obviously with dykes yes. Before we started my partner felt inside me whilst I was peeing so that he could feel my urethra which was really prominent and the urethral sponge. We were just having finger sex and I'd already had an orgasm from my clitoris being touched before. We used KY and he massaged my urethral sponge by basically walking two fingers over it - rubbing it gently and then sometimes rubbing my clitoris. I had complete body rushes, very intense but I wanted it to stop as it feels like your head might explode. At times he had to chase me round the bed. We've come up with a safe word now so it can stop. It helps when you are on all fours. Straight away I wanted to pee and this stayed throughout the whole experience. It's a really hard thing to let go and I still don't think I can do it totally. I could feel the liquid coming out from around my urethra and it felt like it could go on and on.



Female ejaculation

Female ejaculation is a controversial issue. There are many accounts of women expelling some kind of fluid during sexual activity, the current controversy is about what this fluid is and its function. There are accounts of female ejaculation in ancient Chinese and Indian sex books and there was no question of the phenomenon until the 18th century. So, ejaculation is just another aspect of female sexuality that we are now rediscovering. We've been reading, discussing, talking to other women about ejaculation and it's been quite a mission getting our heads around it all.

There is still a general common misunderstanding that when liquid comes out of a woman's body during sexual activity, it is piss. Many women have been thought to be ill because of this misunderstanding and have been operated on mainly for urinary incontinence or sent into therapy. It is really important for every one to finally realise that it is not urine that is coming out of the woman's body. The ejaculate is a liquid that in no way resembles urine, it is not yellow and doesn't smell of urine. It is a clear, milky or colourless liquid. Quantities vary, some women talk about it as a dribble, some women talk about it as gushing. It also varies from time to time. The following experiment clearly shows that the ejaculate does not come from the bladder (we're stressing this because we've read and heard so many accounts of women and men thinking that women have been pissing themselves):

« One woman in her mid thirties was told by a doctor that her experiences were the result of urinary incontinence. Disbelieving him she invented an ingenious experiment to see whether this was true. After taking Urised tablets which dye urine blue she inspected her wet spots on her sheet following a number of orgasmic expulsions. No colour was present in some samples and in others only the faintest bluish tinge appeared. So she intentionally released some urine on the sheet. This time the colour was unmistakably a darker colour of blue » (The G Spot)

In the majority of accounts we have come across, women were ejaculating by stimulation of the urethral sponge. The urethral sponge is a very significant part of the clitoral system. You can find it by putting your finger one or two finger joints in your vagina pressing towards your pubic bone. You will feel a « small » rough patch, this is it. (It's a lot easier to find when you're turned on) Some call this the urethral sponge, some the G spot. Stimulation of the

urethral sponge which is filled with blood when sexually aroused can cause orgasm as well as ejaculation.

Some women have reported ejaculating through just clitoral stimulation (no vaginal stimulation) but this seems to happen mainly with women who are regular ejaculators and their first experiences of it seems to have always been through stimulation of the urethral sponge. It would seem that women can learn to ejaculate and the women we have spoken to learnt through stimulating their urethral sponge.

The urethral sponge surrounds the urethra (tube that links bladder to piss opening : urethral opening) protecting it from direct pressure during penetrative sex. Studies of the urethral sponge have shown that it has many ducts and glands branching out within it like a tree. The largest ones are situated close to the urethral opening and these and the other ducts and glands in the urethral sponge are known as the paraurethral glands (meaning 'around the urethra'). The alkaline fluid that is found in women's ejaculate is thought to come from these paraurethral glands. This fluid is similar in chemical constituents as a man's prostatic secretion which joins his sperm when he ejaculates. The fluid is ejaculated outside the body via two of the largest paraurethral ducts, which are two tiny openings, found on either side of your piss opening.

Loads of 'experts' have wrangled on this and still people are unsure as to why this happens. It seems that ejaculation doesn't necessarily heighten orgasm or happen at the same time. Sometimes women say they ejaculate without orgasming, sometimes it's spoken about as being a 'release' but not the same as orgasm and not even increasing pleasure. Every woman defines orgasm differently as well as experiencing many different kinds of orgasm which can make it difficult to talk about and compare. So we've been wondering if ejaculation and orgasm are linked, what each person qualifies as an orgasm or what is an orgasm and if that is even relevant.

The aim of this article is not to make any woman feel like she is missing out by not ejaculating or that it is a sign of bullshit sexual prowess. We hoped to shed some light on an aspect of female sexuality that is rarely spoken about and has been systematically repressed.

N.B We've used vaginal/clitoral distinction to make this article clearer (see History of sexuality)

Urethral sponge stimulated for pleasure

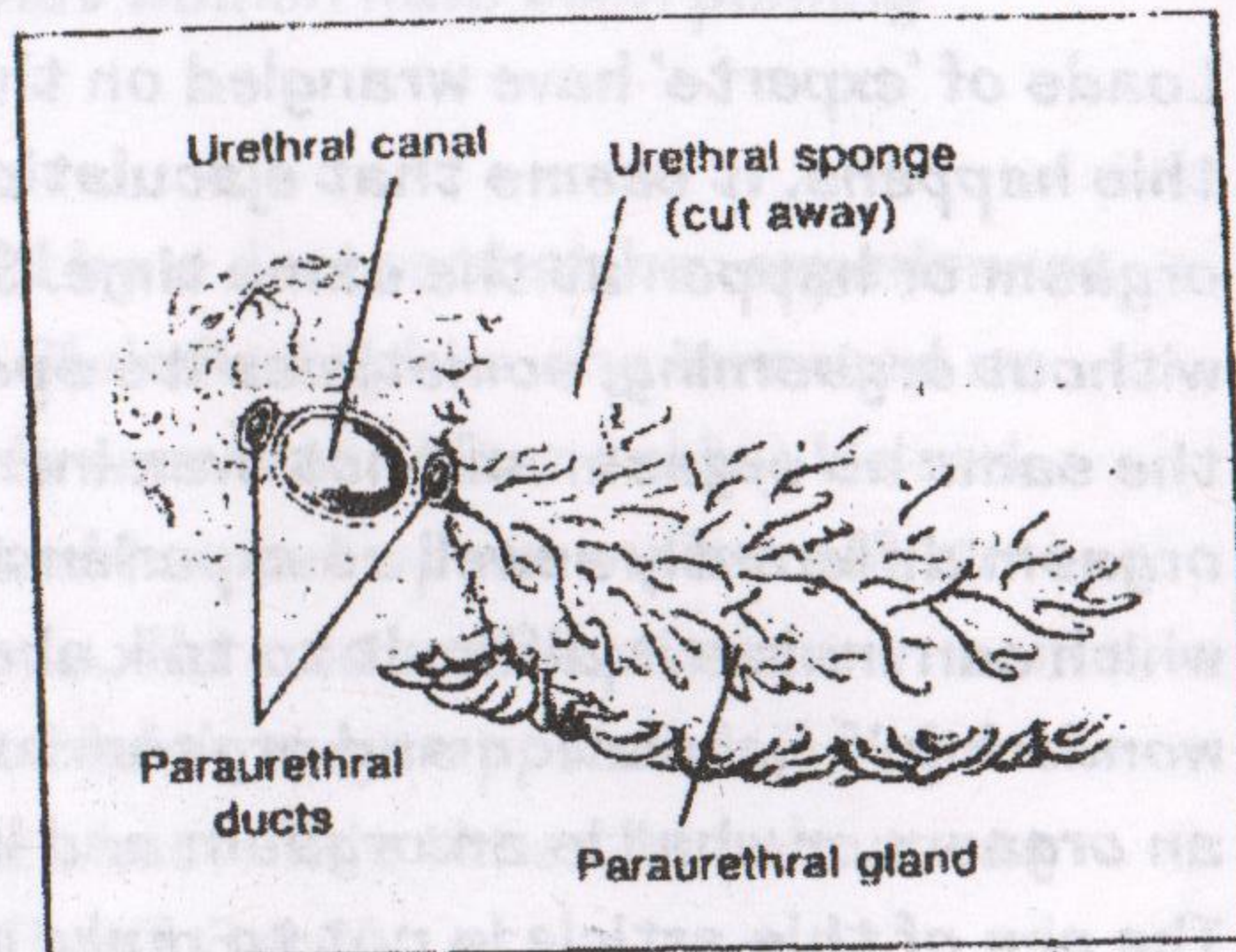


3-13 Self-examination of the urethral sponge

Stimulating the urethral sponge.



3-14 A side view of the urethra compared to the penis



Side view of urethral sponge.

urethral sponge

I had a real shock this year when my dad walked out on my mum after 42 years. I think the biggest thing was the fact that my dad had obviously stored everything up, eventually met another (much younger - coward) women and left without looking back (much easier to avoid that pain). Everything came crashing down even though I had worked so many things out before I was still so shocked by how devastated I felt. I'd realised from a young age that marriage was just wrong and that the pressures could kill any relationship, and that suburbia and the lifestyle was a form of mental suicide that would also contribute to the pressure. Trying to squeeze children, full time jobs, you're own wants and desires into life, with such little outside support must be near impossible. Just the lack of space and time. My mum's grief blew me away - how do you console someone whose life partner deserted them. I remember how upset I have been when a couple of close friends in my life have betrayed me and walked away but it just doesn't come close.

When he left it was hard to get a grip on the repercussions. On one hand it contributed to my ongoing internal debate about relationships, the baggage that can add up and the fierce expectations you have of people. But on the other hand it was just fucking sad that it ends like that. As I've grown older I tried avoiding all the obvious things that puts those kind of pressures on any type of relationship but it is still so fucking hard not to fall into the traps. I've been trying to be part of a 'non monogamous', open or polyamorous relationship, or whatever clichéd word is used to describe feeling able to have different open sexual relationships. For me its more the understanding that expecting so much from one person emotionally and sexually is insane. Most people have friends for different reasons and don't usually expect one friend to be everything.

One of the reasons I want to be able to be sexual with different people has been challenging the socialised ideas of intimacy and alienation. In this society we are able to be emotionally intimate with lots of people without them being mutually threatening so why not sexually. Obviously its not that simple, every time I feel insecure I realise the mammoth amount of socialised shit that I still have to wade through. I know its not simple.

Why does sex make people feel more insecure and vulnerable? Why has sex been made into some kind of social control to keep people isolated? Sex is in our faces the whole time, glaring from the billboards or the news stands, but its based around so much fear. I think many people in this culture are only open emotionally with the people that they have sex with so that makes them particularly vulnerable. But it should be about trying to have deeper emotional relationships with more people around you so you are not emotionally tied to just one person. A friend of mine said to me when we were discussing feelings around open relationships 'what? your not meant to get jealous?'. This baffled me, I think that a lot of people think that they couldn't do it because they would feel insecure, or jealous or generally shit and it would stop there. Of course sometimes I feel jealous or insecure but I try to work through that, work out what actually is threatening, why do I see that as threatening and why do I need that kind of control. I find talking to very good friends that understand and normally trying to do the same kind of thing really helps. They don't judge me if I feel insecure but try to figure out why and how I can deal with it. Sometimes its just keeping those feelings to yourself and not admitting them makes it all seem a lot worse.

Being physically/sexually intimate with different people challenges the status quo that wants to keep us isolated in heterosexual couples and nuclear families. It also means there are limitless opportunities to explore your sexuality in countless different ways and never feel stagnant. I need to have the space and freedom to be sexual with men and women, and explore this in different ways. I love being able to talk to my lover about the various people that we are attracted to, with such ease.

Obviously we have had fuck ups, things happening at inappropriate times or not being as honest with each other as you have to be. Somehow we've worked through it together and been able to sort it out and still be friends and lovers. I've tried to challenge the not have one 'primary' (how to describe this I don't know) relationship but its been a fucking hard year for me and I needed the support but I hope that we will allow things to shift and change without freaking out.

Back to my mum, when all this happened I was so upset thinking of mum trying to survive in middle england coupledness and maybe growing old being really isolated but she has astounded me. Nothing totally radical but she has met loads of different people, forced herself to go out not knowing anyone and is now dating a couple of men. I constantly remind her that it's the women that are important, the ones that will be there to share stuff with and support her. They should on no account be dropped or forgotten once or if she finds the 'right' man and she agrees after hearing what I've had to say. My life is infinitely a million times better when I have the support and love of some amazing strong women, who know there shit. Not forgetting some pretty amazing men in my life.

Its been a load easier to communicate with her although as I said nothing too radical has happened so we still have episodes of 'what exactly are you doing with your life', 'I just wish you had a bit of security' (yawn), 'where did I go wrong? How come my other friends children have jobs' (a particular favourite). But she is slowly coming round to thinking less like this after seeing the unconditional support my sister and I have given her and knowing we are doing that partly because we love her but also because its part of how we want to support women in this society. So many women have limited choices when they are young and get stuck in jobs or marriages with little hope of getting out, and the frustration and anger builds up. On the whole though they normally don't leave the man. After speaking to so many of my friends whose parents are not together, its the man that fucked off, and usually for a younger women. It was important for me to show her she wasn't alone and that there was definitely a different life out there that she could live, she just had to be brave.

When you reach my mums age you must be carrying so much emotional baggage that has built up over the years in a nuclear family. You get into vicious cycles of damaging behaviour that are reinforced by your families expectations, this leaves little room to change or break out of that behaviour. So I think the separation might give her the space to explore this and maybe maybe it could eventually be a good thing for her.

I have spent so much time talking and thinking about this, but I know I've found it hard to articulate on these pages and I know I'm just touching the surface. But its to open up a discussion on friendships, sexuality, jealousies, insecurities and how the fuck to deal with it all, and for it not to consume your life!

BLOODY INSANITY

We all need to avoid contributing to the profits and survival of huge corporations who are not only content to make money out of our natural bleeding but have also sold us dangerous products. Many of these large companies are some of the worst exploiters and test on animals.

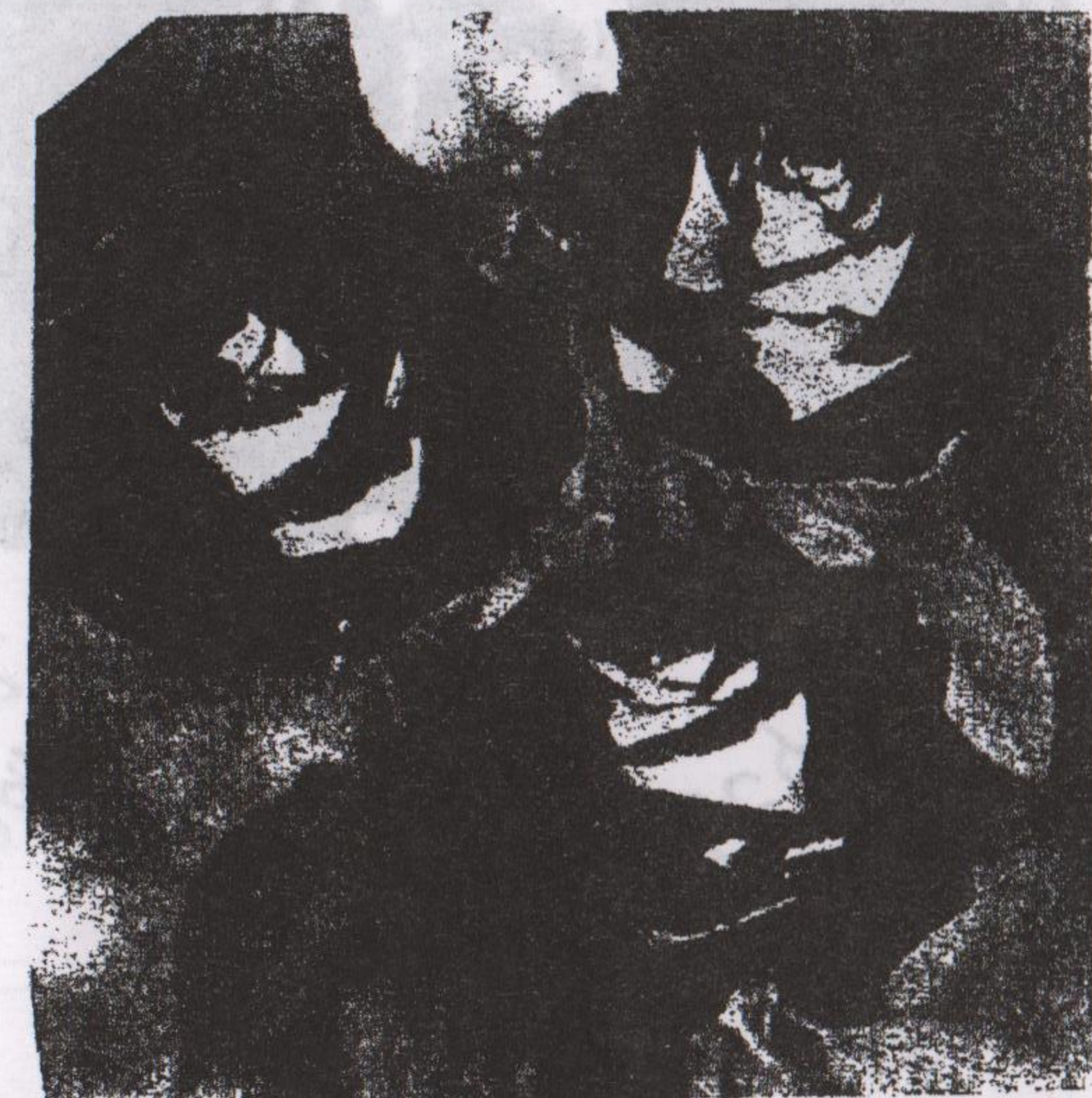
There are many alternatives. You can get organic, cotton, unbleached tampons and pads from health food stores. You can make reusable pads (sibel will make these in Brighton: 07786288852) or sleep on a towel. The moon cup or Keeper is worn internally and sits below your cervix, collecting the blood. You can wear it between 6-8 hrs and it lasts over 10 years (that'll be a few less tampons washed up on a beach). You can get these in health food stores or else in UK you can contact sue hardy on 01273 673 845 (www.mooncup.co.uk). Sea sponges are also an option. Otherwise, just allow the free fall.....

If you get bad period pains there's a few things you can do. Fuck off work if you can afford to, lie in comfortable positions, be lovely to yourself, treats etc... Take your mind off the pain with a good book or film or whatever you fancy. Any foods/drinks that might upset your tummy should probably be left out. Gentle massage over your lower back and abdomen with a couple of drops of clary-sage, geranium and lavender essential oils in some massage oil can be amazing.

Our society has little concern for women's natural cycles and her bleeding, and capitalism does not have time to incorporate them into its schedule. You may find that if you can change the rhythm of your life to be more in accord with your bodily cycle that the pain and stress you experience with your cycle will probably lessen.

I am not in my twenties or thirties and I do not have long flowing dark locks, I do not have colgate teeth and a nostalgic I'm really happy and content smile, my head does not hang on one side, I do not look like I am so clean it hurts, I do not look efficient and ready to walk into a high powered business meeting with white trousers on, and I certainly do not have blue droplets sprinkle my pad when I am bleeding, I really do not mind that my pads are not totally absorbent and that I might just get some blood on my thighs, I do not want to ignore the fact that I am a bleeding woman and I do not want to skip away happily because every sign of my blood and cycle is hidden, and I really do not want my blood on the market and in demeaning sickly adverts

MY BLOOD IS NOT FOR SALE



Many of the freedoms that women experience today originated from small grass roots groups of women fighting male and capitalist oppression. Mainstream feminism co-opted a lot of these successes and left many others behind. Today women have greater financial independence, a greater degree of choice in lifestyle, job, career, more sexual control and so on. But what mainstream feminism left behind is crucial for women's freedom. What we have now is not enough.

The feminism we see around us is restricted to obtaining what men have had/have, equality is perceived as obtaining what men have; consequently it remains an integral part of male structures. Avita Ronell points out that being **subversive** and **reactive** relies on there being a pre existing form which means there is a dependency on the form. Also she shows how woman as always been opposed to 'the other' as man. (Angry Women)

For me, Avita Ronell's analysis links into the notion of Spectacle which was explored in the sixties by the Situationists and has also been used by many different people under different titles. 'Situationists characterise our culture as a spectacle. The spectacle treats us all as passive spectators of what we are told are our lives. And the culture-as-spectacle covers every thing: we are born into it, socialized by it, go to school in it, work and relax and relate to other people in it. Even when we rebel against it, the rebellion is often defined by the spectacle.' (Carol Ehrlich, Women and the Spectacle) I often think of it as a show that we are all acting in. Only if you step off the stage (and constantly remind yourself to do so) can you begin to see what's going on and only then will you be able to see and create radical alternatives.

Ronell's analysis also relates for me, to the work that a lot of the grass roots groups did and carry on grandly doing. These groups actually create a new way of working, relating, * they create new social structures, new ways of communicating: They have the potential to step outside of the spectacle. Because mainstream feminism generally works entirely within the spectacle, it does not look at

creating a new society/culture not rooted in exploitation, consumerism and isolation. Instead women have become a living proactive part of this and people have seen this as female liberation.

The 'sexual revolution' is a great example of this: women gained the right to in some places abort, had easier access to contraception, had a greater range of menstrual products, were able to be 'on top', but all of these gains were integrated into a capitalist, hierarchical society where huge pharmaceuticals, male governments, allopathic treatments made women all the more dependant and silenced with little actual real more control or understanding of their bodies.

Women need to come together to break the silence, decide what they want, which are their alternatives to the capitalising of their bodies and lives and to put these into practice. We need to rekindle the amazing work of the seventies grass roots groups (and all the others which we may not know about) which is being submerged by information seen as more recent so more valid. We need to create our own society, our own ideas because we are imaginative and know and understand our own needs and desires, we are worth more than 'the other' of man.

* self-publishing (zines - pamphlets ...),
'self-help groups', self exam, renaming,
collectives ...

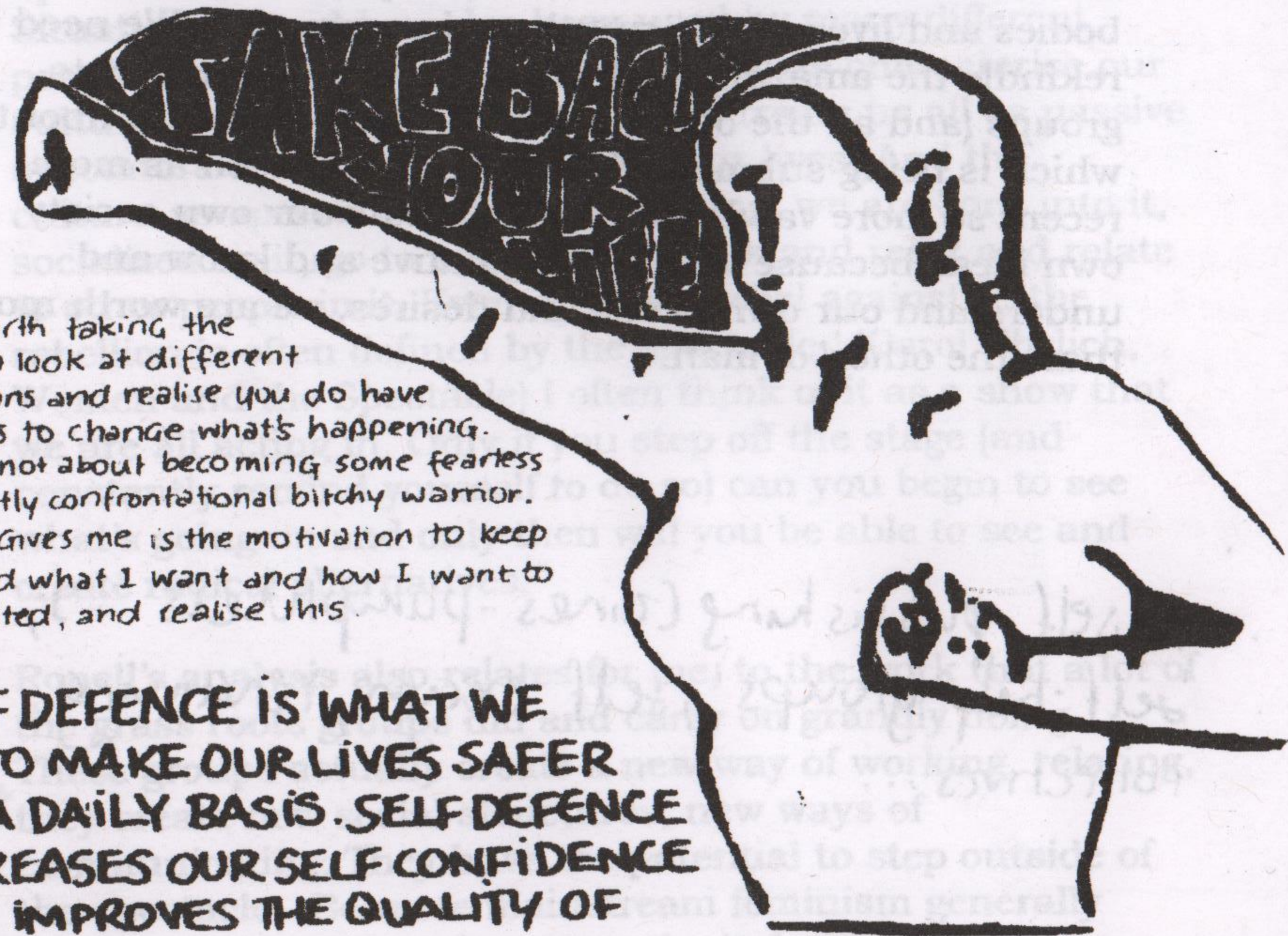
WOMEN FIGHT BACK



I practise and teach women's self defence. It's more than hitting an imagined attacker jumping out of a bush, it's an attitude involving making yourself aware of your personal boundaries and when they're being crossed, and defending them via a wide range of different strategies. To me, this can mean letting someone know they're making you feel uncomfortable by standing too close to you, or touching you constantly; giving myself more space sitting next to a stranger on the bus; walking down the street in a strong and aware way; removing myself from a conversation that I think is getting too personal, or taking control in a situation I'm losing control of.

Course I don't want to struggle 24 hours a day, I don't always want to be on my toes ready to lash out, seeing as there's so many situations in which I could or should. Sometimes I wonder if this feeling I have is what's behind many women's unwillingness to commit to learning self defence. If you start thinking about what's happening when you get that icky feeling from an abusive/oblivious/sexist/energy draining person, you might not be able to ignore it, and start feeling under pressure to do something about it.

But you feel so good about yourself if you do do something. I still look back and smile about the time I helped some younger girls confront a guy they'd been messed around by, or when I've successfully avoided being drawn into a conversation at the pub by a random unpleasant bloke just by being assertive, or when I was stopped on my way home by two women who were being followed by a drunk stranger and helped them get rid of him, or when a cop grabbed me in a tussle and I used a release I'd learnt at self defence to get out of his hold and let it. And every self defence class I've been in, women and girls seemed to have enjoyed a lot - it is a great way to feel good about yourself, and more confident and up for dealing with everyday life.



It's worth taking the time to look at different situations and realise you do have options to change what's happening. This is not about becoming some fearless constantly confrontational bitchy warrior. What it gives me is the motivation to keep in mind what I want and how I want to be treated, and realise this.

SELF DEFENCE IS WHAT WE DO TO MAKE OUR LIVES SAFER ON A DAILY BASIS. SELF DEFENCE INCREASES OUR SELF CONFIDENCE AND IMPROVES THE QUALITY OF OUR LIVES!



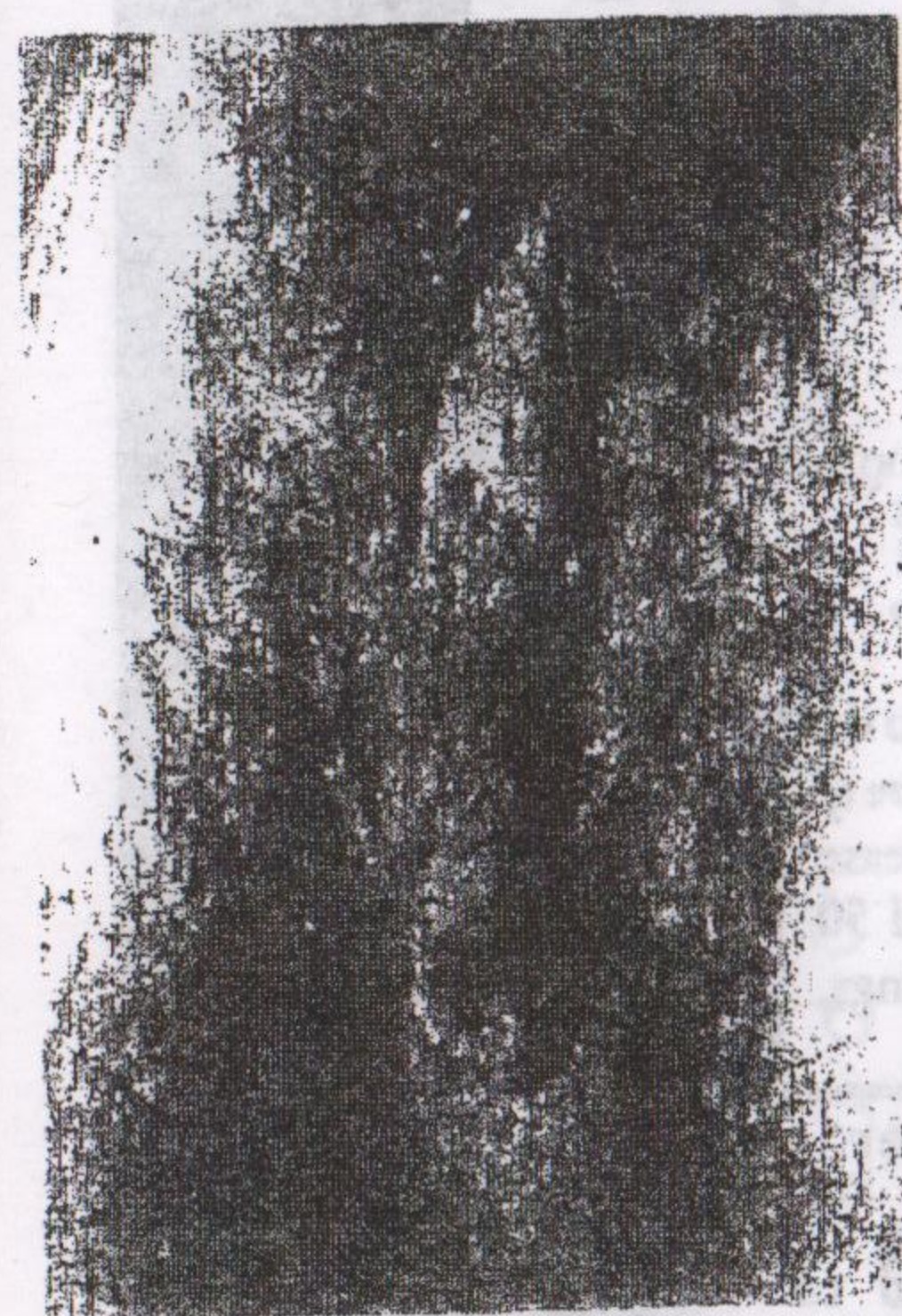
O Clitoris
so beautiful and sweet
so wee yet so mighty
so clever and bright

Ode to the Clit

the happiest
day of my life
was when I discovered
my clitoris



O my little clit
I do love you so
you come with me
wherever I go
faithful companion
always willing to please
you take me to places
my mind's never seen



Unlike the combination pill, Depo-Provera contains only progestin.

It is usually administered in

a single 150 milligram injection.

effective for at least three months.

There is also ongoing concern about the pill's adverse effects on nutrition and lactation, and its possible link with breast and cervical cancer.

Pill users run a greater risk of circulatory disorders—blood clots, heart attacks, strokes, and high blood pressure—than nonusers. The risk is higher among women over thirty-five, particularly those who smoke.

The biggest market for pills is now in developing countries, where the majority of users live. Since 1981 pill sales have increased by an estimated 6.4 percent per year there, as opposed to 2.5 percent in developed countries.

Yet such monitoring is often difficult or impossible to obtain in the West, and virtually unheard of for women living in many rural areas of the Third World. Given that cervical cancer is the most common cause of death from cancer among both Latin American and African women, grave doubts arise as to the wisdom of promoting the pill in the Third World in the absence of screening and follow-up.

The most common—and noticeable—side effects of Depo-Provera are menstrual disorders. Over two thirds of women using Depo have no regular menstrual cycles in the first year of use.⁴⁶ Many stop menstruating altogether, while others experience heavy or intermittent bleeding. Heavy bleeding can be particularly serious for undernourished women, who can ill afford the iron and blood loss.

Other side effects of Depo include skin disorders, tiredness, headaches, nausea, depression, hair loss, loss of libido, weight gain and delayed return to fertility. These are often dismissed as "minor."

I was with a group of women this weekend and women were sharing their experiences of not bleeding after coming off the pill and depo provera for up to two years. A common reaction by doctors is to put women back on the pill to regularise the bleeding again.

There are different ideas of working with the absence of bleeding. Rina Nissim in 'Natural Healing in Gynaecology' stresses diet is really important. Cut down on refined sugar, white flour, animal protein, caffeine and try and eat a mainly veggie diet. She also recommends loads of herbs to try and regulate the cycle but in brief:

Once again, a long list of herbs. What are you supposed to do with all that? You can begin quite simply by taking a *tincture of sage*, 50 drops twice a day. When you begin to bleed, decrease the *tincture of sage* to 30 drops in the morning, and add 50 drops of glycerine macerate of raspberry bud in the evenings, in order to regularize the cycle and avoid painful periods.

A friend, who experienced irregular cycles found by charting her cycles and understanding more about her body, helped her start to become more regular. We have written very little about charting cycles as hopefully a friend will be putting a zine out devoted to this in the next six months. By charting we mean learning about changes in your cervical fluid, month, exactly where your cervix is as this shifts and taking your temperature in the morning. By understanding these three main changes you can work out how long different parts of your cycle are and when or if you are ovulating. Doing self-exam is really helpful for this. Taking some control over your body by trying to understand what is going on is pretty powerful and could start a shift in things.

Depo-Provera, an injectable, hormonal contraceptive manufactured by the U.S. pharmaceutical firm Upjohn Co., has often been at the center of contraceptive controversy. The Depo debate has raged in government hearings, among the medical community, population establishment, feminists, and health activists, and in the pages of the popular press. Despite—or perhaps because of—its notoriety, Depo has been used by relatively few women, and most of them are in developing countries.

FROM 'The Global Politics of Population Control' by Betsy Harman.

In the West Depo has often been?

used on ethnic minorities and

working-class women, with little or

no explanation of its effects.

Mentally retarded women,

incarcerated women,

and drug addicts

were also Depo targets.

You should read around the yourselves before taking herbs. But I have seen sage mentioned more

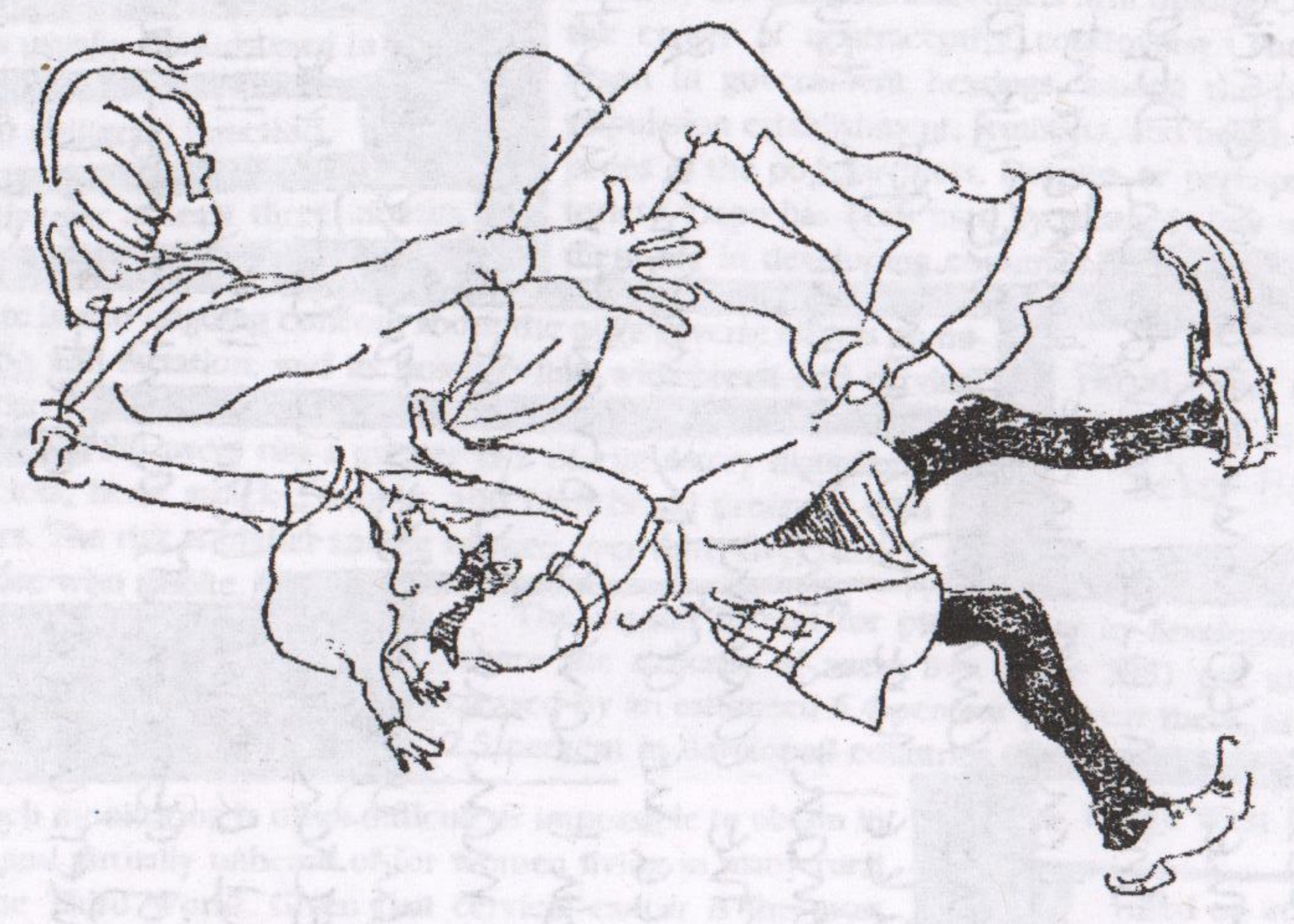
than once.

The first time I had a Depo-Provera injection I was nineteen. I went to the doctor to ask about contraception & she raved on at me about Depo & how great it was. I had never heard of it but she explained that it is a contraceptive injection that you have once every three months. You never get periods while you are on the injection & you are full-proof against pregnancy. I thought I had discovered some sort of miracle drug. Why didn't more people know about this? She told me ~~that~~ Depo wasn't very well advertised but they would soon be stopping-up that campaign. I stayed on Depo for about a year and a half. The doctor hadn't

lied. I didn't get pregnant or have a single period. I did however start feeling quite weird about not having any periods. I also found out that in the 1960s immigration officials in Britain used mandatory Depo injections on single immigrant women coming into the UK to make sure they didn't get pregnant & then want to stay in the country. I came off the injections & didn't have a period for about six months. That's pretty normal when you've been taking the injections for a while. But three and a half years later I still only get periods about three-four times a year. I don't think I would mind so much if I didn't feel like I was having periods

regularly. I still get PMT regularly and
feel quite bloated but just don't
bleed.

I wanted to write this account
firmly to ^{have} give my experience of
Dope-Provera but also to highlight
the fact that there is very little
evidence of the long-term effects
of Dope on a woman's body.
No one knows how severely a
woman is affected by the drug
& it is wrong for doctors/family
planning officers to be
recommending it. Especially when
they fail to highlight that Dope
use has been linked with the
development of polycystic ovaries.
Please make sure you've not sucked
in by all the bullshit benefits.
It's really not worth it. *Rosie Red*



Pippi Longstocking

TUESDAY EVENING AT THE DINNER TABLE

The food grew cold.
We sat across the table.
he said, cut off your hands.
they are always poking at things.
they might touch me.
I said yes.

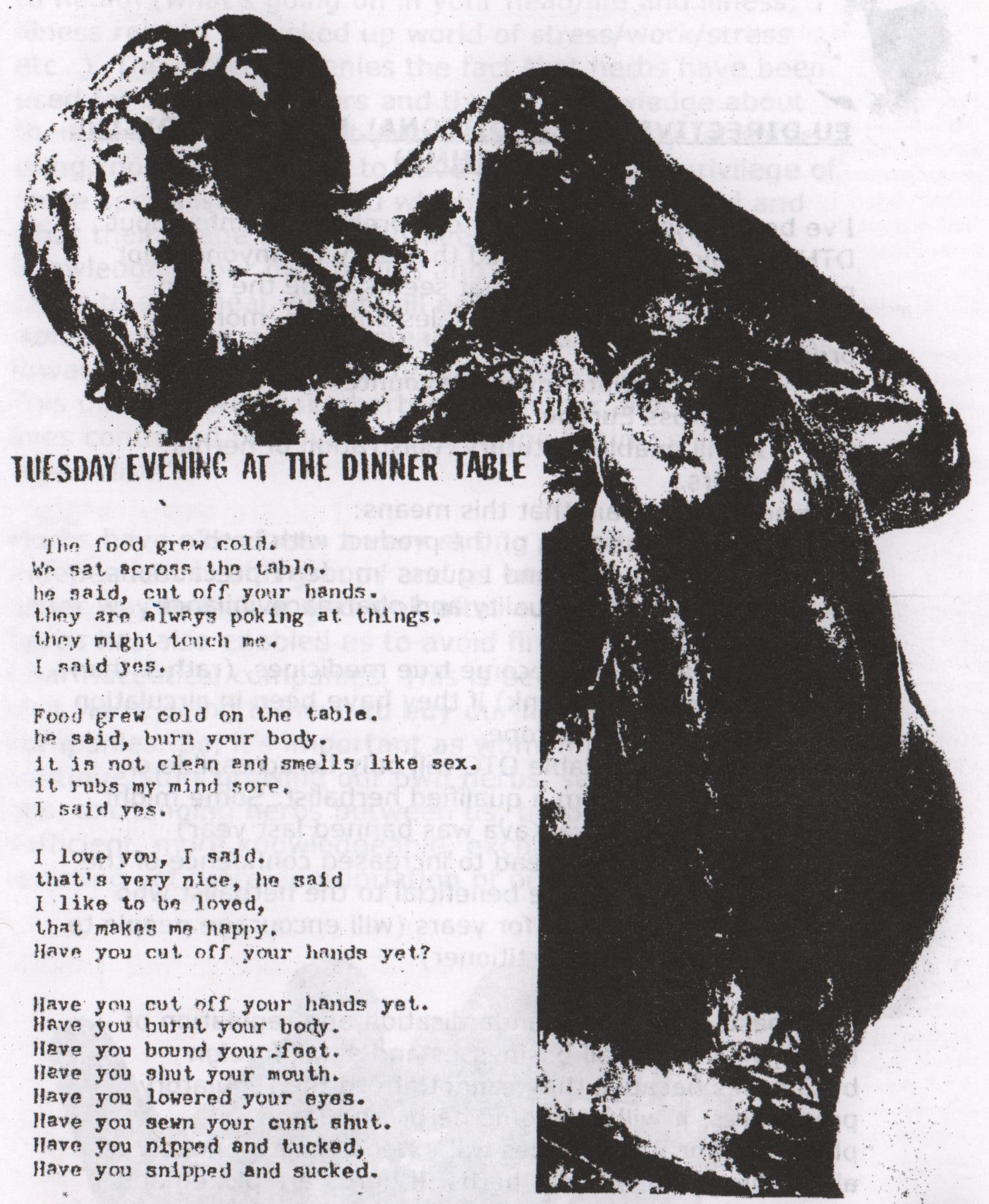
Food grew cold on the table.
he said, burn your body.
it is not clean and smells like sex.
it rubs my mind sore.
I said yes.

I love you, I said.
that's very nice, he said
I like to be loved,
that makes me happy.
Have you cut off your hands yet?

Have you cut off your hands yet.
Have you burnt your body.
Have you bound your feet.
Have you shut your mouth.
Have you lowered your eyes.
Have you sewn your cunt shut.
Have you nipped and tucked,
Have you snipped and sucked.

The food grew cold.
I said, no more.

Words by Submission Hold.



EU DIRECTIVE ON TRADITIONAL HERBAL MEDICINE (DTHMP)

I've been trying to find clear comprehensible info about DTHMP which hasn't seemed that easy (if anyone's got more info please send). What seems to be the main objective is to regulate herb sales and use, more like ordinary medicine:

- It will regulate 'over the counter' (OTC) herbal products across Europe
- It will enable statutory registration of herbal practitioners.

In practice, it is said that this means:

- Clear, full labelling of the product with both traditional usage and I guess 'modern' precautions.
- Improvement in quality and pharmacovigilance procedures.
- Some herbs will become true medicines, (rather than seen as foods I think) if they have been in circulation for 15 years in Europe.
- Herbs not available OTC will only be accessible on prescription from a qualified herbalist. Some might be banned (Kava Kava was banned last year)
- All the above will lead to increased confidence of the public which will be beneficial to the herbalist who has had bad press for years (will encourage people to see a qualified practitioner)

On a basic level, this standardisation and regulation of herbs will oust small businesses and small foreign businesses because they cannot afford the regulatory procedures, it will ban some herbs and large pharmaceutical companies will extend their monopoly of allopathic medicine onto herbs. If herbs are picked and grown in huge mass, it will destroy even more natural habitat and I doubt anyone trusts pharmacos to grow herbs in a sensitive way (pesticides? GM?).

What really fucks me off is how herbs are being advertised and used in the same way as allopathic medicine (see notion of Spectacle). It totally denies a holistic approach

to health (what's going on in your head/life and illness; illness related to fucked up world of stress/work/stress etc...). The directive denies the fact that herbs have been used for over 2000 years and that the knowledge about them already exists (but you gotta have to pay for some thing: now you're going to have to pay for the privilege of some specialist telling you which herbs can be used and what their usage is etc...). It keeps us alienated from knowledge of our own bodies and our ability in some cases to self- heal. And it will encourage even more isolation among people instead of working more and more towards forming strong community networks of support. This directive will make herbs yet another aspect of our lives controlled by governments, large business and 'Specialists'.

Herbs have often been a very strong aspect of women's independent health groups and as well as being a much saner way-to look at and look after our bodies, using herbs has also enabled us to avoid financing pharmaceutical companies. This is being fucked over now that we're going to have to buy our herbs from these companies. So, it's important as women for us to continue/start growing our own herbs, setting up herb co-ops, exchanging herbs between us, becoming more self-sufficient, more knowledgeable, exchanging more info and resisting yet more appropriation of our freedoms.



Zora 2: The women of the RZ started in 1974 with the bombing of the Supreme Court in Karlsruhe because we all wanted the total abolishment of Paragraph 218 (the abortion law). On the Walpurgisnight (last day of April, "Women Take Back The Night") 1977, we bombed the Federal Doctor's Guild because they undermined even this reduced abortion reform. Then the bombing against Schering during its Duogynon trial, and constant attacks against sex-shops. Actually one of these porno stores should burn or be devastated every day! Therefore we think it absolutely necessary to tear the oppression of women as sexual objects and producers of children out of the "private domain" and to show our anger and hate with fire and flames.

Zora 1: We don't limit ourselves to direct or obvious women's oppression. As women we are also concerned about social power conditions, whether it be urban or environmental destruction, or capitalist ways of production; the same conditions men are confronted with. We don't like the left's "division of labour" under the motto: the women for the women's question, the men for the general political themes. Nobody can take away from us the responsibility for changing our everyday life.

Zora 1: Of course, the women's movement achieved a lot and for me the most important is the development of a broad consciousness about women's oppression in this society. Also women no longer experience their oppression as an individual case or think they themselves are responsible for it, instead women come together and experience their strength. The things that were organized by the women's movement like women's bookstores, women's centres, women's newspapers, and meetings and congresses - all this has been part of the political reality for some time and is a strong part of the development of the struggle.

Zora 1: The legal route is not sufficient because the usual repression and structures of violence are legal. It is legal if husbands beat and rape their wives. It is legal if women traders buy our Third World sisters and sell them to German men. It is legal when women ruin their health and do monotonous work for subsistence wages. These are all violent conditions which we are no longer willing to accept and tolerate and which can't be changed solely by criticism. It was an important step to create a public consciousness about violence against women, but it didn't

lead to its prevention. It is a phenomenon that the screaming unfairness which women suffer is met with an incredible proportion of ignorance. It is a tolerance which exposes male parasitism. This "typical situation" is connected to the fact that there is not much resistance. Oppression is only recognized through resistance. Therefore we sabotage, boycott, damage, and take revenge for experienced violence and humiliation by attacking those who are responsible.



Rote Zora in their words are a revolutionary cell in Germany, made up of women between 20 + 51. Some work, some have kids, some are on welfare. They were working from the 1970's - 90's and did lots of direct action against institutions that perpetuated the power structures of this fucked up western civilisation.

SPREAD THIN

SPREAD THIN

I GOT SUCKED IN

TWISTED AND BROKEN

WITHIN THE UNSPOKEN

BALANCING

THE DARK AND THE NIGHT

TAKE HOLD AS I STARE BACK

INTO THE LIGHT

THIS WORLD GETS ME TWISTED

PLAYING A GAME

REFLECTING THE MADNESS

IT'S HISTORY'S PAIN

THESE EXTREMES MEET

IN A STRANGE PLACE

IT'S TRUST AND LUST

THAT SHAPE YOUR FACE

TEAR IT APART

SPUN OUT AND SEVERED

SHIFTING THE FOCUS

PUT IT BACK TOGETHER

I was reading the chapter on prostitution in the book 'cunt' by Inga Muscio and she mentioned a prostitute who was on death row in the US for killing seven men, after seven years in prison she was killed in 2002. Her name was Aileen Wuornos and has been the only 'serial killer' to plead self-defence. In her videotaped confession, which was the key evidence used by the prosecution in her trial, she said more than 60 times that she acted in self-defence. None of these references was included in the version of that tape which was shown to the jury. Aileen was working as a highway prostitute and all of the men she killed were men who picked her up and who, she says, violently attacked her. As a lesbian prostitute she was powerless and it sounded like even the defence fitted her up for the death sentence. Apparently the prosecutors repeatedly referred to her relationships with women, which fits in with the fear and ignorance our society has of lesbians.

So reading this made me wonder how many women are in prison in the UK for killing men that abused them or attacked them.

Cumulative domestic violence is the overwhelming reason that drives women to kill their attackers, normally a partner or husband. Domestic violence counts as physical, emotional, sexual or mental abuse, which takes place within a close relationship. In 2000/1 in England and Wales 42% of women murdered, done so by current or former partners. This equates with 2 women each week. Also the British crime survey conducted in 2000 found that women are most likely to be sexually attacked by men who are known to them. 45% of rapes reported to the survey were perpetrated by current partners. So domestic violence plays a large part in why women kill attackers because the women normally are in intimate relationships with them or have been.

I have a healthy cynicism of statistics (who, why and how they are compiled) what I found still shocks me. An analysis of 10 separate domestic violence prevalence studies by the Council of Europe showed consistent findings: 1 in 4 women experience domestic violence over their lifetimes and between 6-10% of women suffer domestic violence in a given year. Every minute in the UK, the police receive a call for assistance for a domestic violence incident. Adding this up the cops receive an estimated 1,300 calls each day but according to the Crime in England and Wales 2001/2002 report, just less than 35% of actual domestic violence crime is reported to the police. Not hard to guess why cops are not the first port of call.

Up until the mid-1980s police response to domestic violence was very variable. A number of studies have documented the dismissive and derogatory way in which police officers tended to handle "domestic disputes". Domestic violence was frequently defined as 'rubbish work', was seen as a private matter, not 'real' violence and the sympathies of a predominantly male police force were often with the violent man/husband. A women's aid survey found that most women who leave domestic violent situations are in real fear for their or their children's lives. But options are limited, women are generally not supported in society, it doesn't take violence against women seriously and the police are useless, and resources are limited to help the women that do leave. (Possibly women don't see themselves as victims.) A survey from Shelter states that domestic violence was the single most quoted reason for becoming homeless for women. The women who do stay must do so for many reasons but at some point or incident act out of self defence to protect themselves.

Inga Muscio talks about the fact that this society is very frightened of women who are judged to be acting in a violent and predatory way. This cannot be more obvious than when you look at how the legal system treats women who have killed compared to men. On average between 12 and 15 women kill their partners every year in the UK compared to a 100 men. The women receive harsh treatment from the legal system, in stark contrast with the sympathy many men are given when charged with killing "nagging" or unfaithful wives. For example:

In 1991 Joseph McGrail was tried in Birmingham for the murder of his wife. He pleaded provocation on the basis that his wife was an alcoholic and swore at him. He killed her by repeatedly kicking her in the stomach. At the trial the judge commented..."this lady would have tried the patience of a saint", he gave him a two-year suspended sentence.

In 1995 Brian Steadman was jailed for three years after he hit his wife 13 times with a hammer, he pleaded diminished responsibility due to his wife's constant nagging.

In 1997 Joseph Swinburne killed his wife by stabbing her eleven times when she told him she was leaving him for another man. He was convicted of manslaughter and sentenced to 200 hours community service.

Compare these with the following women

In 1989 after 10 years of severe violence against her Kiranjit Aluwhalia threw petrol over her husbands feet and set it alight whilst he was sleeping, he died some days later. She was arrested and charged with murder, she was found guilty and sentenced to life imprisonment.

In 1992 Zoorah Shah snapped after 12 years of physical and sexual violence when her partner turned his attention to her eldest daughter. She poisoned him and was convicted of murder, sentenced to life with a minimum of 20 years, she is still in prison.

In 1993 Josephine Smith shot her husband after many years of violence when he threatened to track her down and kill her and their three children if she left him. She was convicted of murder and sentenced to life with a minimum of 12 years.

The differences in sentencing reflect the misogynistic attitudes of the ruling class judges as well as the completely bias law system in the UK. Legally there are 3 main defences to murder. Self-defence is a full defence and results in acquittal if defendant can show life is in imminent danger and that proportionate force was used. So if a woman is being hit with bare fists using a knife is not 'proportionate' force. Diminished responsibility is a partial defence and reduces murder to manslaughter. The defendant must prove that their mind was impaired by an 'abnormality' at the time. So the focus shifts from a man's violence to the women's state of mind. Provocation is also a partial defence but to use this defence it has to be shown that the provoking act was such that a 'reasonable' man would have responded as the defendant did in same circumstances. This ignores the history of violence experienced by women and focuses only on events prior to killing. The defences are totally biased towards men who may well have the physical strength to retaliate quickly and the self-esteem that hasn't been fucked over. None of these defences adequately reflect women's actual experiences which is why the Justice for Women Campaign, a feminist campaign group, are pushing for a new defence to murder - self-preservation. Ok its reforming the law and not pushing for a revolt but may save some women from having to endure prison after years of abuse. Briefly self preservation reduces the charge to manslaughter and reflects the experience of anyone subjected to repeated assault or sexual abuse and acknowledges their responses as rational within an intolerable situation.

In the nineties there were a few big media campaigns for women who successfully appealed and were let out. For more info on campaigns going on now check out the Justice for Women website www.jfw.org.uk and womeninprison.org.uk.

SECRET

THERE ARE SCARS
HIDDEN DEEP
IT'S A SECRET
IT'S A SECRET THEY KEEP
HIDDEN UNDER HISTORY

Herbal Abortion

What follows is a bit about thoughts and experiences of herbal abortion but its brief. We are trying to get together a zine on abortion, women's experiences of abortion, experiences of herbal abortion, more stuff on massage and other ways of helping, menstrual extraction and the history of abortion. If you've got anything to contribute we would love to hear from you.

Herbal abortions are one option where we can take the power back, take control of our fertility in the way that we choose and not have to rely on two doctors for 'permission' for an abortion. I think that learning about how herbs influence our fertility is also part of trying to reclaim some of the ancient knowledge that was systematically wiped out by the church and the state in the last few hundred years, namely in the witch hunts. Female healers and midwives were targeted and killed starting the destruction of the knowledge of healing that was passed down from generation to generation.

I think that it's important to try and limit my interaction with the state, which to me includes the medical establishment, namely the NHS in the UK. It is a free medical system, so everyone can get free medical care, but to me it represents so much of what I hate about western capitalist society. White male moneyed men in positions of power and authority, using this control over women, and particularly over black and poor women. Sensible preventative medicine is not encouraged, information is not shared, pharmaceutical companies profit. The services that women use are not based around the real needs and desires of women. So many women recount abusive experiences of smear tests or gynaecological exams where they have felt violated. Women have recounted humiliating experiences of abortion in hospitals. Experiences of women in Brighton this year shocked us. The waiting time for the initial appointment at the abortion clinic was between 4-5 weeks, that is if you couldn't afford the £350 for a private abortion (using the same facilities) which you could get tomorrow

And to remember that there are still thousands of women who die each year of forced into having children because they do not have access or can't afford safe abortions.

If you are going to use herbs you really need loads more info and need to be aware of the side effects. You can brew the herbs in teas or use them in tinctures. Here follows a brief description of some abortive herbs you can use:

Blue cohosh *Caulophyllum thalictroides*

This is powerful herb from north america, used by the Native American Indians for contraceptives uses. It contains at least two substances that cause the uterus to contract: oxytocin, a hormone produced during childbirth, and caulosaponin, a unique substance found only in blue cohosh. It can be used in on its own or in combination with herbs like pennyroyal or black cohosh. It is an oestrogenic herb so do not use if you have been advised not to use the Pill.

Dong Quai or Chinese Angelica *Angelica sinensis*

There are 3 different types of Angelica, but the chinese is reported to be the best for abortion. It has two very different effects on the uterus: it has the ability to stimulate contractions, and also to relax the uterus. The difference depends on how you prepare the herb. The volatile oils that can be extracted relax the uterus so are not useful for this, but the root has the ability to stimulate contractions, so a decoction of this can be used.

Black cohosh *cimicifuga racemosa*

This is an anti-spasmodic herb, which is unlikely to cause abortion unless combined with other herbs like blue cohosh. It prepares the cervix to release the contents of the womb by softening it.

Mugwort *Artemisia Vulgaris*

It contains the uterine contractor chemical thujone and is fairly toxic. It's well known as a menstrual promoter.

European Pennyroyal *Mentha pulegium*

Well know abortifacient which causes uterine muscles to contract. Sometimes combined with blue cohosh or mugwort. Never use the essential oil as this can be fatal, only the dried herb or tincture.

Parsley *Petroselinum crispum*

Rolling fresh parsley up and putting near your cervix softens it and therefore will be suppler if miscarriage does happen. Some women tie string around the bunch so they can pull it out easily but I found it was ok without.

For Emergency Contraception

Queen's Anne Lace or Wild Carrot Seeds *Daucus carota*

They are known to be effective implantation inhibitors and are used successfully as emergency contraceptives. You can chew one teaspoon of wild carrot seeds per day washed down with water, the day after unprotected sex. Its recommended you do this for the next 7-10 days. You can collect the seeds as it grows wild everywhere but look at a plant guide first as it can be mistaken for poisonous varieties. A good sign is the small crimson flower in the middle of the big white flower head. One way to gather the seeds is to bend the stem, shake the dried seed clusters into a paper bag, and dry them out of direct sunlight. Keep in a container in a cool place.

Vitamin C *ascorbic acid*

Although it is not a herb it is one of the less toxic and most easily found. It has a good rate of effectiveness. It is used as an implantation inhibitor and an abortifacient (causes abortion). It prohibits progesterone from being produced so this can either stop the egg implanting when it is used as emergency contraceptive or it stops the uterus lining growing as this needs progesterone.

As an abortive 6-12 g a day is recommended, trying to keep levels constant in your blood so spread dosage out.

As emergency contraceptive 2 '500' mg tablets, non-chewable, should be placed on the cervix immediately after unprotected sex or condom breakage and repeated twice a day for three days. This increases the acid levels in the vagina, which should kill sperm. It can also be taken internally for emergency contraceptive. Same instructions as using it as abortive.

It should not be used with herbs like pennyroyal as it is a strong anti-toxin so can stop the effects of the herbs. One combination that has been successfully used is Vitamin C with dong qual and parsley. Vitamin C starves the uterus of progesterone, then after 5 days add dong qual to strengthen uterine contractions and expel embryo. Parsley relaxes and softens the cervix.

For specific dosages and more in depth information you should look at the booklet 'herbal abortion - a woman's d.i.y guide' which you can get from Godhaven Ink, Rooted Media, The Cardigan Centre, 145-149 Cardigan Road, Leeds, LS6 1LJ or look at their website www.godhaven.org.uk.

Also it is essential you visit Sister Zeus's website, www.sisterzeus.com and for practical and emotional support you can join their email group, which has women on it who can help and advise,

<http://groups.yahoo.com/group/herbal-abortion-support>

In the UK you can order tinctures from Herbal Apothecary (0116 2602690) or try your local natural food store.

There are many other ways to encourage abortion and I tried to do as many as possible.

Massage

For the collective of women I was involved with, massage has been an important part in trying to help each woman abort, as well as being relaxing and nourishing. Most of the massages were done by more than one woman as this just felt so good. We have also done this for women who are pregnant but have chosen not to herbally abort. Its about trying to create some space where women can relax, be soothed and not feel bad about choosing to abort.

Shoulder Well (GB 21)

Caution: Pregnant women should press this point lightly.

Location: On the highest point of the shoulder muscle midway between the outer tip of the shoulder and the spine.

Benefit: Relieves frustration, irritability, fatigue, shoulder tension, and nervousness.

GB 20
GB 21
GB 20
GB 21

Two Shiatsu points on the shoulder should be pressed.

Massage deeply with your thumbs into the lower back which directly corresponds with the womb. Massaging deeply on front of the womb, using downward strokes is a strong technique.

Also trying to pinch the skin there, by lifting the skin up was recommended to stop blood flow to the womb, which could encourage miscarriage.

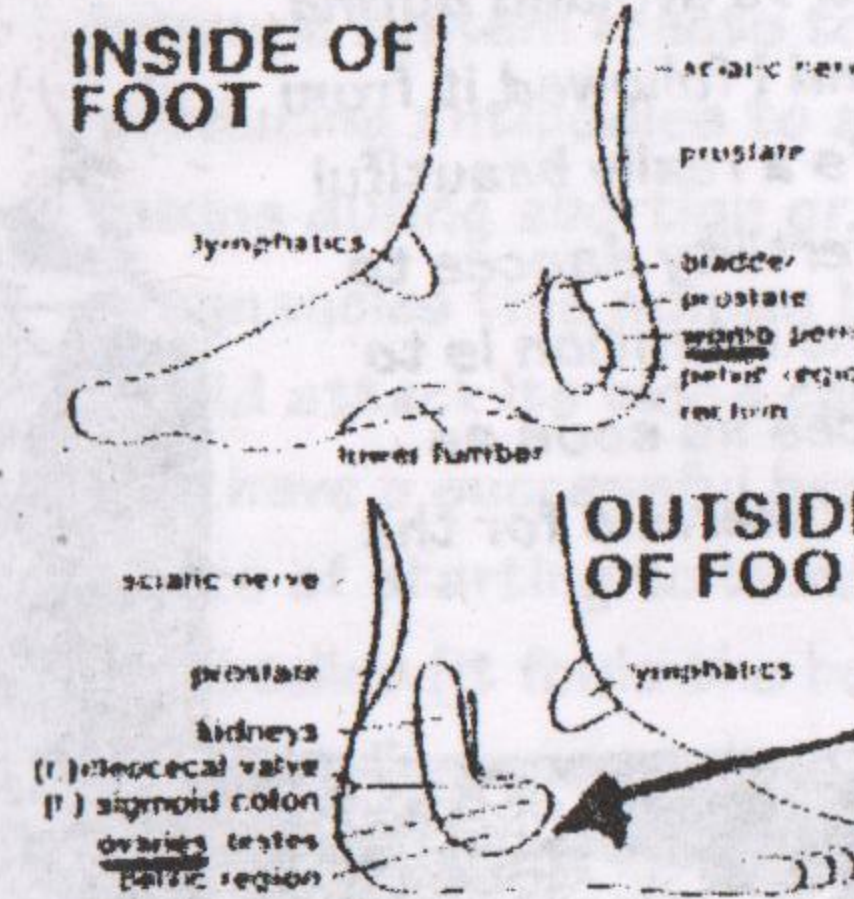
Orgasms

Orgasms cause uterine contractions and they have been recommended in lots of places to be good to encourage abortion. It could also be the relaxation of and therefore increased circulation to the pelvis. There is also evidence that oxytocin (hormone that causes uterine contractions) is released during orgasm, and is also released when your nipples are stimulated, which is why nipple stimulation is recommended.

If you find yourself on your own you can still massage your lower back, womb + feet.

Reflexology

FOOT MASSAGE CHART



To Ease PMS & Initiate Menstruation Bladder 67

At the far outside edge of the cuticle of the little toe is a pressure point that you may want to use when your menstruation is late, especially if you are experiencing bloatedness, distention, gas, heaviness and water retention. Do not press this point if pregnant!!

Press these points hard + massage deep around the heel.

Meditation

When I was trying to abort I spent a lot of time meditating on bleeding, trying to 'talk' to the tiny embryo inside me and discussing why it needed to leave my body. I visualised aborting all the time. This sounds a bit out there but I had some really crazy intense experiences doing this.

I stress this because in America, we tend to hold that popping medicine in our mouths and swallowing is the extent of our involvement in the healing process. We believe that if we get better, it's because the medicine worked magic, not the person. Many women I know have tried to induce miscarriage and failed because they took certain herbal potions and went about their lives as if everything were normal, waiting for the herbs to work their wonders. To successfully induce miscarriage, one must devote One's Entire Life to the attainment of this goal. I place an enormous amount of emphasis on this point. When I induced miscarriage, I breathed, ate, shat and slept thinking of nothing else but the lining of my uterus shedding.

After a week of non stop imaging, massages, tea drinking, talking and concentrating, I was brushing my teeth at the sink and felt a very peculiar mummibloomump-like feeling. I looked at the bathroom floor and there, between my feet, was some blood and a little round thing. It was clear but felt like one of them unshiny superballs. It was the nearest thing I ever did see

An orb of life and energy, in my hand.

From 'Cunt'.

Digital irritation

Apparently women have successfully aborted by putting their finger into the os (hole in cervix) and pushing to open the hole, on a regular basis.

This uterine stretching business is a slow process, sometimes taking up to six weeks of daily effort (say twice per day), and well may not work at all...The miscarriage will not start immediately with a gush of blood...Hopefully, the contractions will start up, feeling like menstrual cramps.

"Nowhere is there even a man-made law that says a woman can't put her very own finger into her very own uterine canal or vaginal tract."

Exercise

Vigorous exercise is meant to be good. Probably the constant movement is not good for the egg implanting and growing.

Yoga

There are some yoga positions which are very strong and should be avoided during pregnancy which are the ones you should do. I did some yoga and I followed it from this book 'lunar yoga' by Adelheid Ohlig. (ISBN 096146206). It's a really beautiful book about using yoga to increase your sexual awareness and fertility dances to bring on menstruation or ovulation. She notes though that if the intention is to hinder the implantation of the egg you have to execute the dances as soon as possible after fertilisation has occurred and at precise 24-hour intervals for the next four days.

I've included part of her forward as it's just good to read.

Women's menstrual and reproductive problems often begin during periods of stress. One cause of the stress is the conflict of being female in a male-oriented, male-dominated society where there are few positive views of the feminine and little support of the female cycle.

Look at the way our cycles are treated. menstruation should be hidden and sanitized, childbirth should be in hospitals and sanitized and menopause should not be experienced at all, for women should be forever young. No honoring or importance. It is no wonder that as I rose to the top of my profession in a male-dominated field, I stopped cycling. I had, in effect, become "the best man for the job."

Hot Baths

Not so hot they burn you, but just hot enough to open the blood vessels and increase the circulation.

The one thing that I didn't try but have known to be successful is acupuncture.

Even though it didn't work the first time for me I would still try and use herbs, massage and meditation but maybe in a less intense way. I think what I mean by this is that I was adamant I was not going to the hospital and the herbs had to work, but now I feel more relaxed about going to the doctor, however much I still

hate the medical establishment. I know what it is like, I know that in the UK I can get the option of the abortion pill and sometimes you can go home, with the support you need, so I feel less panicked. But I've heard too many stories of the herbs working on women and successful abortions for it not to be worth the effort. For me I wouldn't use the tinctures again but a few chosen herbs and brew them up which I think is always a therapy in itself. Trying to find people to massage you and meditating on the process helps you get into a space where you feel less tense and calmer, which is where I normally can find strength.

I think maybe one of the reasons that it didn't work was because my blood type is rhesus negative (Rh-), and I had no idea that this could be important. If you are Rh+, you have an antigen in your blood and if you are Rh-, you don't.

Isoimmunisation is a process whereby when a woman who is Rh- has a foetus with Rh+ blood and a minute amount of foetal blood mixes with her own. The woman's immune system reacts to the presence of the antigen in the foetal blood, producing antibodies to attack foetal blood cells. There is a chance of this blood mixing during abortion or miscarriage. This has implications for any future pregnancies this woman has, because if the foetus is Rh+ again, her antibodies would attack its blood cells causing severe anaemia in the foetus. If you are Rh- and have a successful herbal abortion you should go to your doctor within 72 hours of starting to bleed as they can give you an injection to stop you producing antibodies. (It fools the body into thinking it's already produced them) From everyone I've spoken to I think this is really unlikely but we are unsure so I wouldn't want to take any risks. So when I went for the surgical abortion I found this out and had a vague thought that my body knew this and despite all the cramps and my os being open, it refused to abort. Bit of a wild one I know but it did make me realise I needed to do more research.

I think that it might also not have worked because we don't perhaps know the subtle ways of using the herbs which maybe vital, or perhaps that I am a strong, healthy woman whose body (NOT mind) was quite tough and wanted to keep the pregnancy.

Thank-You to the amazing women around me that had access to this information + totally supported me in trying to wade through it, make some sense of it and do it with me.

I am really sorry that if you find yourself pregnant + you don't want to be + you are on your own. If you can get yourself to an internet + get on the Sister Zeus e-mail support group - there are women, who can listen + give support.

Menstrual Extraction

Menstrual Extraction was developed in 1970 by Lorraine Rothman with the help of Carol Downer. The idea first came from the Self-help clinic that a small group of activists had organised in LA. The women had visited an underground abortion clinic a few weeks before where a man was using a new non-traumatic suction abortion technique. He used a cannula (thin tube) inserted into the uterus and a hand-held syringe used to create suction and collect the uterine contents. So it was a combination of carol getting on the desk and using a speculum that she'd got hold of to show the women her cervix, and the women showing the other women the syringe and cannula brought from the abortion clinic. Lorraine was one of the women and immediately saw the weaknesses in this device so took it home, refined it and came up with the Del-Em.

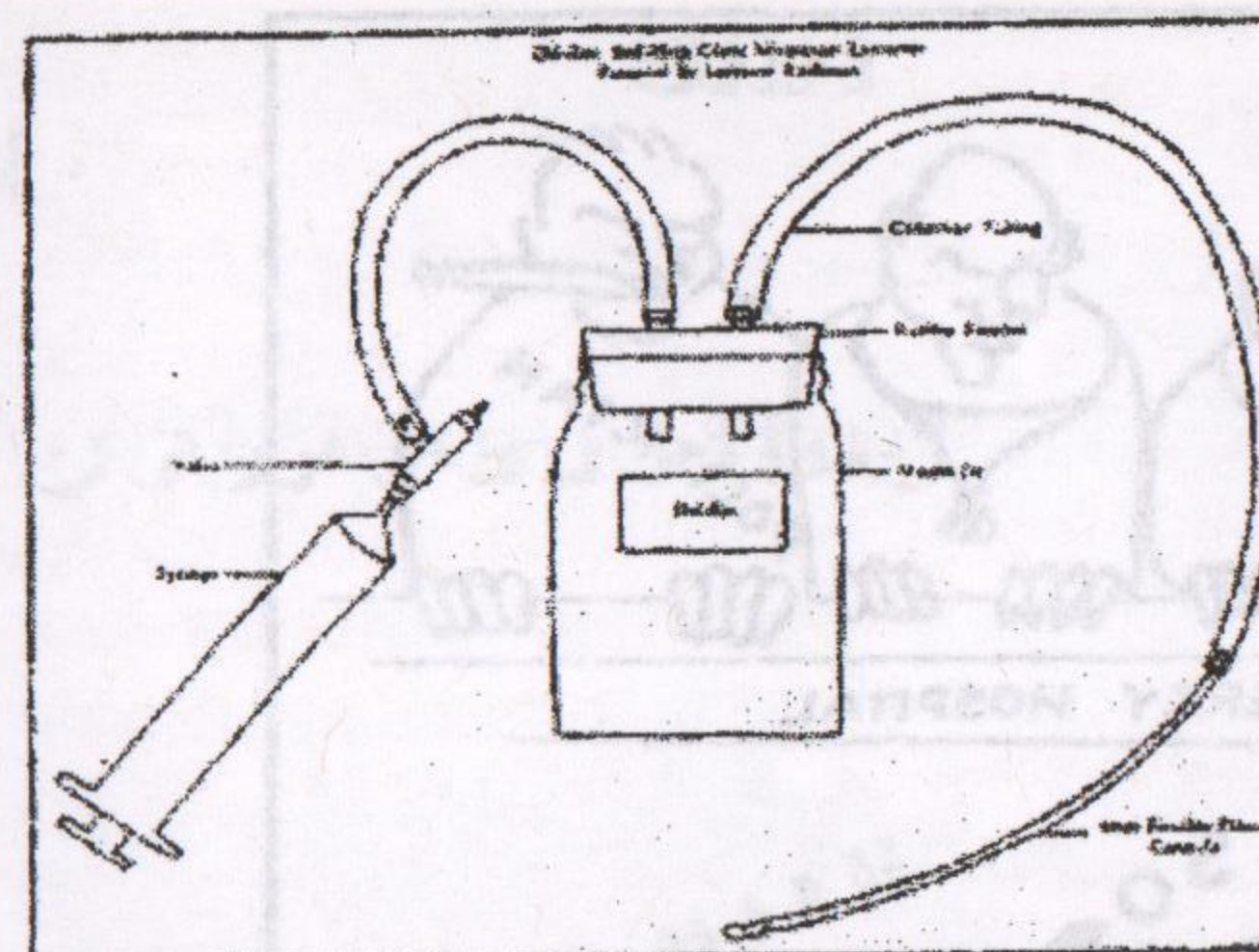
MENSTRUAL EXTRACTION (ME) was developed as a technique to help women maintain control over their menstrual cycles, and hence, over their reproductive lives. On or about the day that a woman expects her menstrual period, the contents of the uterus are gently suctioned out, lightening and greatly shortening the expected period. If an egg has been fertilized within the preceding weeks, it will be suctioned out as well.

Even with the legal situation at its most favourable, women are obliged to seek out sympathetic doctors, to plead their case, and then to put themselves into the hands of the specialist. From a libertarian point of view, this is not ideal. Nor is it absolutely inevitable.

A procedure which can be performed by groups of women, not medically qualified perhaps, but having made themselves experts because of commitment to what they are doing, not only tends to increase the individual's control and power to take decisions; it also has a high chance of being safer and less traumatic than abortions carried out in impersonal clinical conditions, often later than necessary because of red tape, and possibly by overworked, alienated or indifferent staff.

Our attack on the monopoly of expertise does not mean, however, that we deny the importance of intensive study and systematic training. Indeed, any group setting up unofficially and illegally to perform such procedures would have to be ultra-scrupulous, more so than some professionals. Not in order to enhance the mysteries of the craft by making it seem more difficult, but because the responsibility is very real and serious.

Good info in
'Women's
Book of
Choices'



This is what was and still is used to do the menstrual extractions.

Defining a problem and taking action to provide a solution is empowering. Some abortion rights activists defined anti-abortion laws as the problem and viewed legalizing or decriminalizing abortion as the solution. Others broadened their definition of the problem. Abortions were not only "criminal"; they were also dangerous, degrading, expensive, and hard to come by. While some activists petitioned legislatures and courts to solve the problem of illegality, others took direct action to solve the immediate problem of women with unwanted pregnancies. This was the case with JANE.

If you were a poor pregnant woman in Chicago in the early 1970s and you needed an abortion, you called JANE. JANE was a women's liberation abortion service that performed over 11,000 safe, affordable abortions between 1969 and 1973. JANE could help you when no one

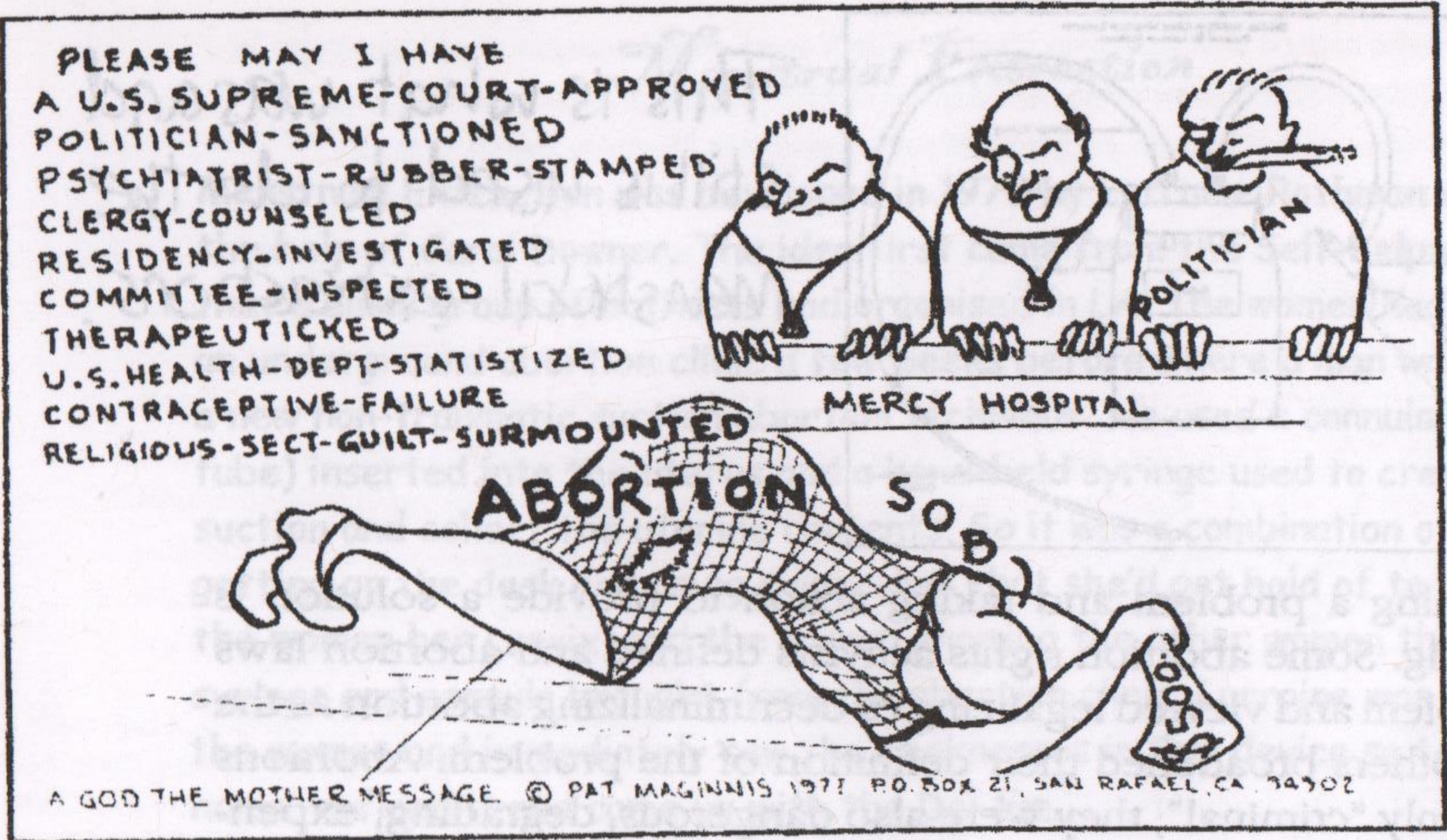
else would; at a time when most skilled abortionists charged between \$300 and \$2,000, this group asked for \$100 and received an average of \$40. JANE never turned a woman away for lack of funds.

You might get JANE's phone number from a free clinic, an underground newspaper, a sympathetic telephone operator, a friend, a doctor, even the cop on the beat. JANE was listed in the phone book under the last name "How." You called JANE, and JANE would tell you *how* to get an abortion.

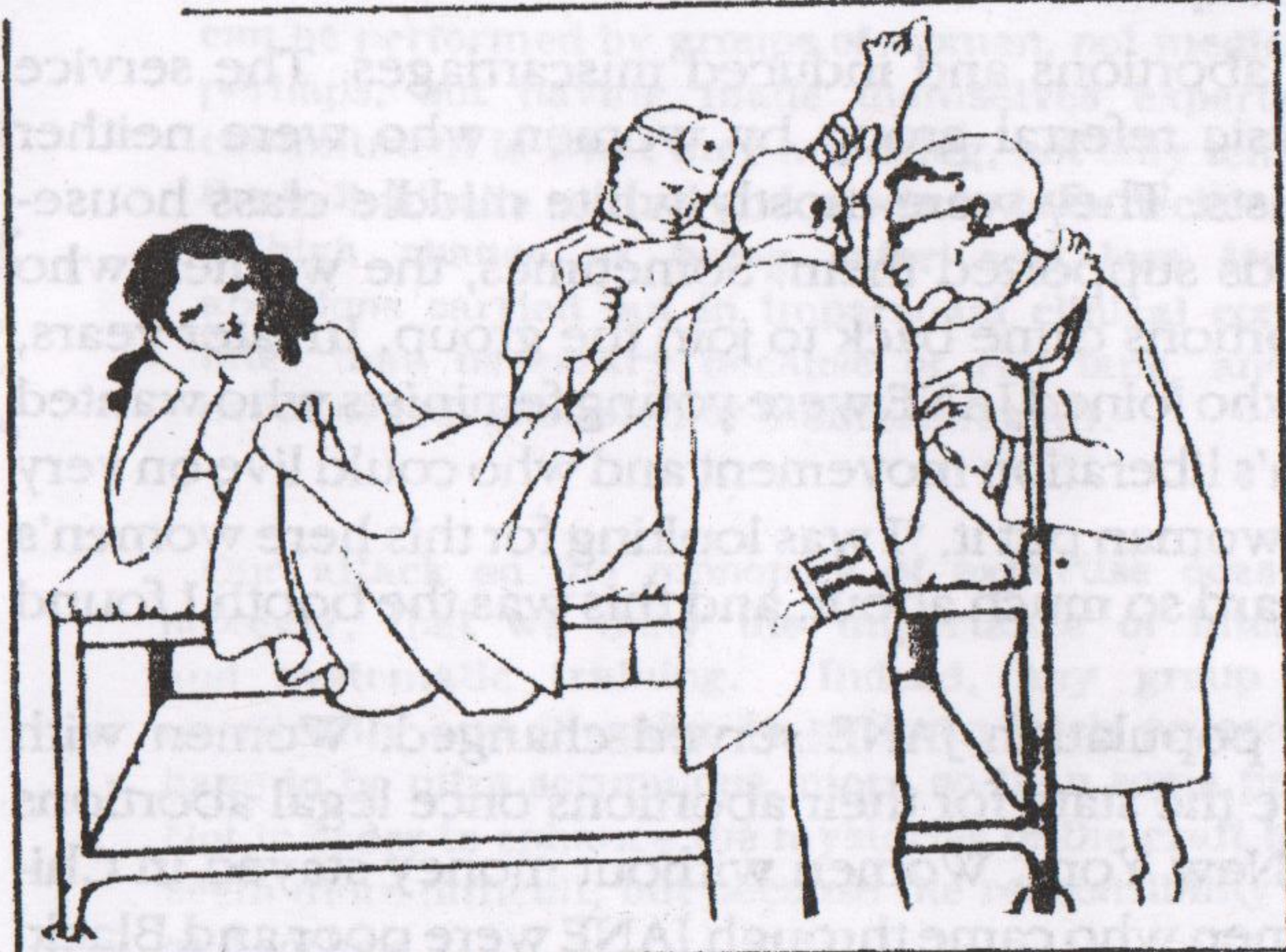
JANE did D&C abortions and induced miscarriages. The service was started as a classic referral group by women who were neither doctors nor abortionists. They were mostly white middle-class housewives whose husbands supported them. Sometimes, the women who came to JANE for abortions came back to join the group. In later years, many of the women who joined JANE were young feminists who wanted to work in the women's liberation movement and who could live on very little money. (As one woman put it, "I was looking for this here women's movement that I'd heard so much about, and this was the booth I found to sign up at.")

Over time, the population JANE served changed. Women with money began to leave the state for their abortions once legal abortions became available in New York. Women without money stayed in Chicago. Most of the women who came through JANE were poor and Black.

From 'Abortion Without Apology'



WOMEN
 MUST DECIDE
 THEIR FATE
 not the
 Church,
 not the
 State.



This is from Emily Martin's brilliant book 'The woman + the body' - in partic. her chapter 'PMS, Work discipline' + Anger.

It is generally acknowledged that the first person to name and describe the symptoms of premenstrual syndrome was Robert T. Frank in 1931.

He carried forward the idea, which flourished in the nineteenth century, that women were swayed by the tides of their ovaries.

Astonishingly, we are told that "more than three quarters of all women suffer from symptoms of PMT." In other words, a clear majority of all women are afflicted with a physically abnormal hormonal cycle.

An overriding theme in the changes women articulate is a loss of ability to carry on activities involving mental or physical discipline.

It is no doubt completely understandable that in a society where most people work at jobs that require and reward discipline of mind and body, loss of discipline would be perceived negatively.

With respect to work, then, the vast majority of the population and all but a very few women are subjected to physical and mental discipline.

One would also like to know whether there is any correlation between the experience of PMS symptoms (as well as the reporting of them) and factors such as class and race.

Unfortunately, the PMS literature is nearly deaf to these kinds of questions.

An obvious next question is whether the incidence of PMS is higher among women subjected to greater work discipline.

Many PMS symptoms seem to focus on intolerance for the kind of work discipline required by late industrial societies.

Women are perceived as malfunctioning and their hormones out of balance rather than the organization of society and work perceived as in need of a transformation to demand less constant discipline and productivity.

I think the way out of this bind is to focus on women's experiential statements—that they function differently during certain days, in ways that make it harder for them to tolerate the discipline required by work in our society.

We could then perhaps hear these statements not as warnings of the flaws inside women that need to be fixed but as insights into flaws in society that need to be addressed.

Amid the losses on which most accounts of PMS focus, these women seem to be glimpsing increased capacities of other kinds.

Only the exception—a sculptor or writer—would be able to put these greater emotional and associative capacities to work in her regular environment.

To see anger as a blessing instead of as an illness, it may be necessary for women to feel that their rage is legitimate. To feel that their rage is legitimate, it may be necessary for women to understand their structural position in society, and this in turn may entail consciousness of themselves as members of a group that is denied full membership in society simply on the basis of gender.

Here we also find a kind of inchoate rage which women, because of the power of the argument that reduces this rage to biological malfunction, often do not allow to become wrath.

Can it be accidental that women describing their premenstrual moods often speak of rebelling, resisting, or even feeling "at war"? It is important not to miss the imagery of rebellion and resistance.

I just put some of the important bits of her chapter together. You need to read it all to get the flow. It has really influenced my understanding of PMT + generally mental health.

Since learning more about my own body, reading more feminist ideas on health and sharing more with women, my thoughts on bleeding have totally shifted. I don't see it as a negative experience anymore and am aware of cyclical changes and try to fit this into my life. When I am tired around bleeding I try to give myself a break, whilst before I would have kept on pushing myself. I would be upset when I had PMT partly because as I never charted my cycle it would come each month as a total surprise and I would always internalise it as my problem. I am now able to see 'PMT' as a time of reflection and honesty. I listen and am aware of what upsets me or makes me angry during this time and I don't dismiss it. I think that I am probably reacting to things as honestly as I can, when at other times of the month I am more able to suppress my emotions in order to carry on behaving/functioning 'normally'.

The discussions around PMT are so huge and complex I'm not really sure where to start. On the one hand there's the State/dominant medical view which sees PMT as a medical problem, partly due to a change in hormone levels which causes the 'abnormal' emotional and physical symptoms of PMT. This conflicts with feminist views that see the symptoms of PMT as a normal part of a woman's cycle, and which shouldn't be seen or treated as an illness. They accept that changes do happen in your cycle and need to be understood more within society, but not for the symptoms to be treated as a 'syndrome' and treated medically.

So, there are many dangerous people within the mainstream that push this idea of PMT as an illness, which is caused by low levels of the female hormone progesterone and can be 'fixed' by regular shots of progesterone, or more recently the progesterone pill. The pushers of this believe that as women we are at the mercy of our bodies, and as individuals we need to do something about it so we can once again become the calm, caring women we are the rest of the month. All the anger and rage of having to live in a messed up society has to be squashed, demanding us to grin and bear it. The capitalist patriarchal culture that we live in is based on a fear of women, their sexuality and the power it represents. Women who don't fit into the 'normal' way of behaving need to be controlled. Anything that might disrupt the thin veneer of 'respectability' needs to be stopped, or else people might just stop and think. Keep working, keep smiling, keep dying.

There are women, under the guise of 'helping' other women, who believe that PMT is an illness, and needs to be treated medically, but I think these are the same women who sold out. They thought feminism was about equal access to the world of capitalism, and equality would happen once we women, have controlled our temperamental bodies to fit into a man's world.
(WHAT UTTER BULLSHIT I WILL BE FULL OF RAGE WHENEVER I FUCKING FEEL LIKE IT. IT IS JUST NOT ACCEPTABLE FOR PEOPLE TO KEEP LIVING LIKE THIS.)

Katharina Dalton, a woman who is a high profile pusher and has written loads of books where she advocates the treatment of a short sharp course of progesterone shots are necessary to placate the uncontrollable and unwieldy woman. She sees any symptom that reoccurs during pre-menstrual time as constituting the pre-menstrual syndrome and can be alleviated by treatment with hormones. In the last 20 years doctors have got totally carried away with themselves and there have been 150 symptoms that have been collected including such stupidly bizarre things like runny nose, increased (NO) and decreased libido, vertigo, aggression, diarrhoea, emotional instability, and boils. Hmm. I was recently given a book by Dalton by a friend of mine so I could see the words straight out of the monsters mouth, what this woman says is very very scary. Here are some horrifying things that I found after flicking through the book for two minutes.

Another hazard is the increased sex desire which may occur premenstrually. This often takes over young adolescents, who are quite unprepared for this new sex urge and unable to control their emotions. This nymphomaniac urge may be responsible for young girls running away from home or custody, only to be found wandering in the park or following the boys. These girls can be helped and their delinquent behaviour abruptly ended with progesterone therapy.

How can industry cope with this unnecessary financial burden caused by menstrual problems?

Perhaps industry should tackle the problem more seriously by educating its staff, especially personnel managers and forewomen, to recognize and fully understand the problems so that women can be assigned to less skilled jobs, such as packing and stacking, during their vulnerable days rather than remaining on tasks where errors are harder to remedy later, such as soldering or filing.

Total rejection of this can be the only response.

Fighting the medicalisation of PMT is all part of the ongoing battle for women to be treated differently in this culture. Many feminists will not accept the notion of PMT as an illness but accept the reality of certain feelings and symptoms without having to see them as abnormal. It should be about how we understand our cycles and the different feelings that go with it. There may be lower levels of progesterone around the premenstrual time of your cycle, (although there have been various studies that disprove this), but feeling more angry, emotional and having physical symptoms need not be seen as a sickness to be treated medically. If women were able to have the time and space we need, those 'symptoms' would be alleviated without resorting to medicine. But normally we can't have that space and are forced to keep going with the same routine and possibly exacerbate sensitive emotions.

If women have feelings of sensitivity or creativity during their pre-menstrual time and are forced to go to their grinding 9-5 jobs, look after the children, scrape

a living together and have no space for expressing any of their feelings, it is going to make them feel angry and upset. The fact that these feelings are given no legitimacy because 'its that time of the month again' only makes me feel more angry.

One important feminist approach was in the self help groups that focused on the politics behind the medical 'scientific' theories. These were groups of women who got together on a regular basis, as part of the women's lib movement of the 70's and 80's. They focused on looking at why PMT is medicalised, who does it serve to control women like this? Women shouldn't be divided on this - all women should get together and discuss why this is used by men to attack women. For me understanding the politics of the general oppression of women's knowledge over the last several hundred years, as well as understanding how women are treated in this culture and medical system has helped a lot. It seems to have all been about control, to undermine us, to strip us of our ancient knowledge, to divide us so that our power is no longer a threat.

The complexity arises when you look at the medicalised version of PMT being used by women who have killed their abusive partners and are being tried in court for this. The fact that PMT is treated seriously by the mainstream has helped women claim diminished responsibility, as they can prove they lost control due to PMT, and some women have been able to walk free. It obviously was not enough that they had lived with abusive partners for years, were trapped and were acting in self-defence. In one way women have felt relief that their feelings have been taken seriously but at the same time it has been used to invalidate actions and emotions that are felt premenstrually. It is easy not to take seriously the anger or sadness and to blame it on 'PMT'. Obviously this has worked in the women's favour, in some cases. So in very reformist views - yes - seeing PMT as a medical condition can help women like this, but at the same time I think its really abusive and does not take seriously our concerns with the way we are forced to live.

I have been able to understand my own experiences of PMT, and my general mental health, by seeing them as part of an understandable and 'sane' reaction to living in this culture. The pressure to earn money, have a certain

standard of living, the very little support you get from people around you and the bullshit way most people communicate with each other, is very hard to live amongst. I look around and I find it so hard as I hate the way most people are living, burying their heads in the sand and having absolute total ignorance to the ecocide and genocide going on around us. No wonder I can feel more rage, sadness and total loss of what to do, at a time in my cycle when I am sensitive. It may well be a shift in hormones that causes increased sensitivity, but my feelings do not need to be seen as abnormal, and I feel are mainly heightened because of my overall frustration with western culture.

I have got to know my cycle over the last two years and now generally know when I probably need time on my own, when I need to get out of the monstrous urban shit that I live in and sit in a field and when I need the support of amazing women. Even with this understanding its still something that I find hard to do, you are trying to listen to why you are so upset or angry but there is just too much noise to hear clearly. Breathing is always a good one, trying to be still and I suppose not squashing the rage, there is a lot to feel fierce about.

'Thank you doctor for changing my family's life'

The linchpin of the family is the mother. When her life becomes a misery each month as the intricacies of premenstrual syndrome recur, the consequences affect the whole family.

Trials with Duphaston have shown that at least 70% of women with premenstrual syndrome can be successfully treated, with a minimum of unwanted effects. Duphaston is effective in both the physical and mental symptoms which combine to make life a misery for the whole family.



A better life for
your premenstrual syndrome patients with

duphaston From Emily Martin

This entire account is premised on the unexamined cultural assumption that it is primarily a woman's job to see that social relationships work smoothly in the family. Her own anger, however substantial the basis for it, must not be allowed to make life hard on those around her. If she has an anger she cannot control, she is considered hormonally unbalanced and should seek medical treatment for her malfunction.

!Cosmo summer test!

ARE YOU SEXUALLY DYSFUNCTIONAL BECAUSE:

- A) You are on the pill and you have no libido
- B) You're totally knackered after working day in day out and bringing up a family and all that it entails
- C) You're depressed due to living in a hierarchical, destructive society
- D) You'd rather be having sex with women
- E) You are unhappily married and are not attracted to your partner
- F) Your partner isn't receptive to your needs and desires
- G) You've been emotionally scarred from having sex
- H) you understand sexuality in a much broader way

Etc etc etc....

Whether women are being called whores or frigid (we just can't get it right), it is always us who are dysfunctional. Feeling that we are sexually dysfunctional can lead to depression, low self-esteem, ill health and sexual frustration. It is vital for women to realise that we have an infinite sexual potential and also, very importantly that we realise that our partner/s is/are just as responsible for the love making as we are.

Observer 2003

Maria (not her real name) is one of thousands of British women said to suffer from female sexual dysfunction, (FSD), which incorporates a loss of libido or desire, difficulty reaching orgasm and sometimes painful sex.

But experts last week accused pharmaceutical companies and their researchers of cynically creating the disorder to provide a multi-million dollar market for new drugs.

An editorial in the *British Medical Journal* suggested that, far from being a serious condition afflicting up to 40 per cent of women, this 'disorder' was dreamed up as a

way of making enormous profits from sales of tablets and creams to unhappy, mostly middle-aged women.

The allegations come as the drugs giants compete harder than ever to find the magical medicine that will provide fulfilment for women whose sex drive is no longer there. The condition's characteristics are said to include a loss of interest in sex, less enjoyable sex, diminished sensation and inability to achieve orgasm.

Pfizer, manufacturers of Viagra, insist that FSD really exists. They would say that: they are holding trials of their drug on women in Kent, to see if it can help. Their medical director, Dr Mitra Boolell, says there is no shortage of women willing to be recruited for their trials, but firmly denies any attempt to create an artificial condition to boost profits.

We have a huge number of women wanting to take part in our studies, reflecting what is happening in real life.'

One undeniable aspect of this controversy is that the companies are in a billion-dollar race to develop a therapy that would give women worldwide a sexual pick-me-up. It is not simply Viagra being tested in the laboratories. Hormone patches, creams and nasal sprays, as well as other pills are all in the offing because of the enormous stakes involved.

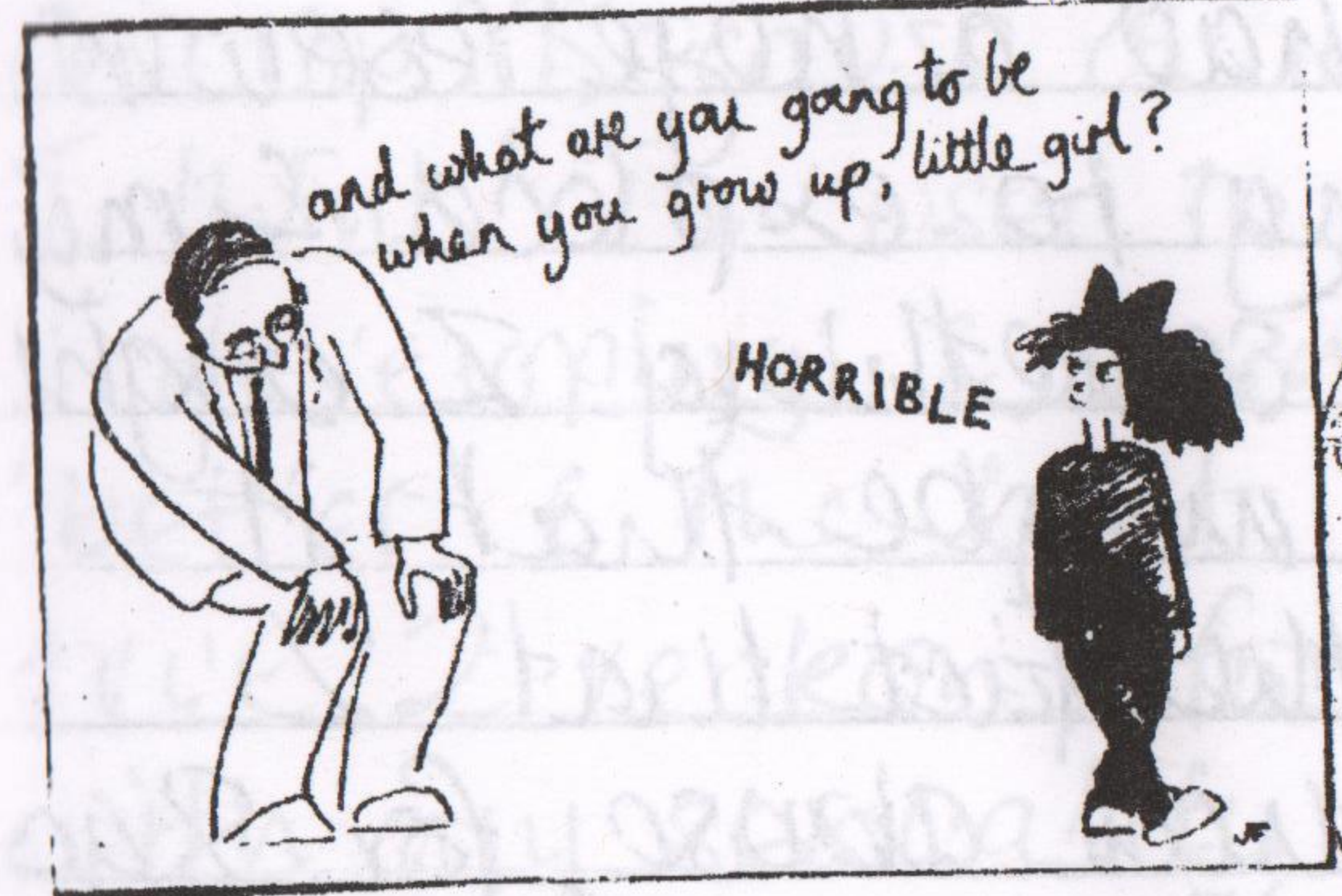
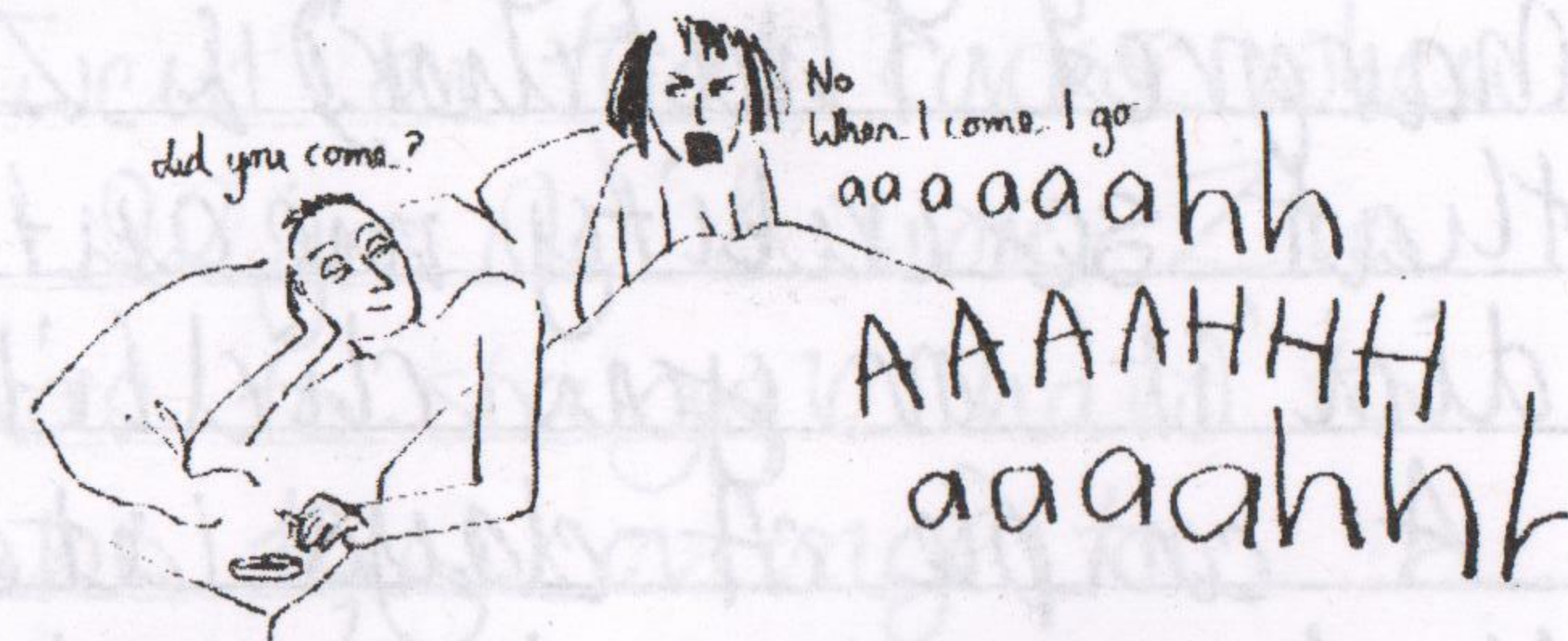
The Observer TALKING POINT
Is female sexual dysfunction a real medical condition or a commercial invention?
Email your views to debate@observer.co.uk

THEY ARE STILL FUCKING AT IT.
MEDICALISING WOMEN AGAIN.
Maybe the lack of desire is to do with being totally exhausted, working, being a mother, lack of passion + sensitivity from your lover, boredom, no space to explore your sexuality.....
NOT A FUCKING SYNDROME.



Women are denied masturbation even more severely than men... that's another method of control — they're not taught to please themselves. It takes most women a while to warm up to the "situation," but once they get into it, they're hooked — well everyone I know is!

Yulia lunch



OK so this is a bit of a ramble about me & my sexuality - or maybe to put it another way me & my relationship with my sexuality.

I somehow fell into a ^{residential} weekend experiential therapy course entitled 'anger & sexuality' (for women). Now that happened I really haven't a clue as I swore blind that I wasn't ever angry (only sometimes at Margaret Thatcher) & I thought that sexuality meant you either did 'it' or you didn't.

A couple of days later, ^{mother} I realised that maybe I had a huge reservoir of anger ~~gaging~~ ^{gaging} to explode & my sexuality was something I ought to look at & maybe that it was due to the fact that I had been sexual abuse for 8 yrs of my childhood.....

This revelation sent me into an

~~amazing~~ painful, all encompassing, powerful 10 yr (plus) journey of ~~therapy~~ ~~legal ordeal~~ confrontation of who I was, & what had happened to me & my relationship to the people around me & my world. And of course my sexuality. This took place through one to one therapy, different 'therapy' groups, a legal ordeal & my daily life & interactions.

I think I went on that course when I was about 22 yrs old & now I'm 35. I've had to struggle hard to heal & to take the courage to develop. Because of my experiences I think I'm used to confrontation & developing & trying to make things 'better' & the best. And this is true, I reckon, for my relationship with my sexuality. I could never be complacent. I celebrate the fact that me & my sexuality.

are a living growing thing that will always be changing.

I was fucked over - literally - as a child. I had to confront the horrors of the damage that was done to me sexually & heal that some how. I was victim then survivor. And now I feel like I am a 'thriver'! ~~And now I feel like I am a 'thriver'!~~
I ~~am~~ am alive & ~~am~~

UK & this is me						
Child Reaching	Child Victim school child	Child Victim survivor	Teenager struggler/liver	Student Searching	Naughty Girlfriend	Woman Career girl
Sexuality mine	Sexuality fucked over	Sexuality fucked over	Sexuality split	Fun time girl Sexuality exploring spirit	Straight Sexuality safe	Break down time Sexuality out of the who
Woman Therapy patient survivor	Survivor finding me woman time Struggler	Residential social worker survivor legal revenge	Free-me activist lover	Girlfriend activist party lover	Mother mother mother girlfriend	
Sexuality what?	Sexuality exploring	sexuality high	sexuality rampage	sexuality in love	sexuality on hold	

Mother cooperater girlfriend sexuality picking over	Mother cooperater thriver sexuality wandering	Mother cooperater from the Alive me sexuality cozzing free				
--	--	--	--	--	--	--

What is sexuality (for me)?

Cringing at the thought of my mother sexually kissing

Getting dressed

Being a survivor of sexual abuse

Fucking → Gently affirming my daughter's 'fiddling' & body & beauty.

Being a woman

Putting on lipstick

Learning to walk

Sucking cock & being good at it.

Dreaming of women

Riding my bike & feeling free

Wondering about 'Britica'

Talking about female ejaculation.

Looking at vibrators in women's sex shops.

Exploring open relationships

Pursuing sex

Working hard at being in a long-term relationship

Learning how to be positive ~~about~~ ^{for} ~~sexual~~ ^{my} ~~children~~ ^{small children}.

Letting someone I love lick me

Saying cunt. ^{→ giving birth (without drugs)}

Listening to women

~~Listening~~ Cunt was bread.

~~Listening~~ Cunt was bread.

so small
oh so small
so small
i've got so many questions
so small
oh so small
so small
that's how this started
it was your example
your example
it was your example
i hold you responsible
it's your example
your example
you need to look at
what the fuck you're doing

what's this noise
what is this noise
this noise
in my nervous system
no stillness
empty fucking culture
filling up on
starving hungry
it's your example
who's example?
where do you put this?
who's responsible?
where do you go?
how do you place it?
this fucking disgrace
and i'm fucking sorry
there's so much here
woven together
stuck in my muscles
under my ribcage

what do you do?
how do you start?
pick it apart
piece it together
who's responsible
someone's responsible
point the finger
(look in the mirror)
what do you do?
where do you go?
this disgrace
i'm so sorry
these specifics
the full breadth
all the threads
in some relation
chew hard
sleep tight
big buildings
you fucking listen to me

words by claive. to get full impact
you can get their CD from big deal records
closer reid, 41 Killermont road, beardsden
glasgow G61 2JB - send a fiver.

I was just reading an article on rape in the newspaper and it was saying the number of rapes reported that end in conviction has gone down even further to 5.8%. One good reason not to bother with the legal system. This feeds into this half dream I had the other day, partly after having lots of conversations about Inga Muscio's chapter on rape. She talks about the power of women getting together in various ways to confront the rapists themselves and ostracise him from their community.

In my half dream I was walking near the seafront and four men grabbed me and took me back to their hotel room and raped me. I eventually got out and sat on the steps trying to figure out what to do. I phoned every single amazing feminist-minded person I knew and told them to bring support. So there are at least a hundred women with some men intermingled and we start shouting. We drag the men out of their room and kick the shit out of them in the lobby with everyone watching, this is only the women. The men who came to support quietly form a circle round us. After we escape, and go to the club where everyone drinks, cries, talks, shouts, everyone is involved in the cathartic experience. No shame is felt by me, everyone hears what happened and feels it as an assault on all of us. I included men in this as I think that they should be part of this, hear how it is and see it as all of our problem, not just a 'woman's problem'. I haven't been raped but I've spoken to people (both genders) who have been and I think one of the fucked up things is how people are made to internalise this shame and guilt. No one should have to carry that around with them.

My dream is not quite as militant as the book 'Dirty Weekend' by Helen Zamos. It's about a woman living in Brighton and after years of men fucking her over, she has finally had enough and goes on a killing spree, killing any man that tries to assault or exploit her. You know the scenario that you've read or seen in films when a woman is alone at night on the beach and a man spots her and heads over to her. He puts his hand over her mouth from behind and she turns around and... kills him. Not the ending you normally expect, but it felt good to read after your stomach had turned with the inevitability of the situation.

I sometimes find it difficult to think how a community that has chosen to minimise its interaction with the law and state deals with things like rape, assault or abuse. However I've heard there are ways that you can socially humiliate a man collectively, and give the message that violence and rape is not acceptable. Trying to understand the individual causes of rape is difficult but in the wider picture, in a culture where violence against women is acceptable, rape is inevitable. Our culture, possibly the whole of civilisation, has damaged us all, and anaesthetised us into accepting so many of the atrocities in this world without once thinking of taking any responsibility for these situations. But when something happens on your doorstep, you are forced to deal with it. Even in the wider group of people I know, homophobia and sexism can go mainly unchallenged, which is worrying because when I envision living within an autonomous community, the people I see doing this are challenging bigotry, racism, homophobia, sexism and all other manifestations of exploitation. But I suppose it would not be the whole community I would look to but the women, and I think there are enough women who would be sound enough to get together, give support to the woman, and be fierce enough to try and confront the rapist if we knew who he was. These are ideas that I have recently started discussing and have not had to put into practice yet so it's a bit theoretical and there's a lot more to be thought out, but it's definitely a first step to not having to rely on a patriarchal state and its legal system.

**THERE'S FOOTSTEPS BEHIND ME COMING UP BEHIND ME I WALK
FASTER FASTER THERE'S A HAND ROUND MY MOUTH I'M BEING
PUSHED TO THE GROUND MY THIGHS ARE BEING SPREAD I GO TO
SCREAM I CANT**

**THERE'S FOOTSTEPS BEHIND ME COMING UP BEHIND ME I WALK
FASTER FASTER THERE'S A HAND ROUND MY MOUTH I'M BEING
PUSHED TO THE GROUND I JUMP SWIVEL PUNCH IN FACE SIDE KICK
IN DICK KICK IN DICK KICK IN DICK PUSH TO THE GROUND OPEN
THIGHS KICK IN DICK KICK IN DICK KICK IN DICK**

LADIES OF THE NIGHT

I've been thinking a lot about prostitution again recently. What I think is only based on what I've read and seen. I have never been paid for sex and I don't know anyone who is. I should think prostitutes like a lot of minority groups are bored of having people who know nothing about it give their opinion on their work and lives (they're scum, they're victims...), I hope to not judge in this way. What I am interested in is how the world of prostitution could change for the better if our society had a different attitude towards sex and women.

When I was younger, I was adamantly against prostitution. I thought there was no way it could not be degrading to women. Then I came across some new books written by women very much in control of their own sexuality.

These books changed my views quite a lot. Even though I was aware that many prostitutes live in insecurity and dependency, I came to see prostitutes who were in control of their work as very liberated women. I saw their potential as sexual healers and even fancied the romanticised degrading to women. Then I came across some new books written by women very much in control of their own sexuality ideal of the goddess. For the first time ever, I considered prostitution for myself, why earn £4.50/ hour waitressing when you could be getting a few hundred and having total control over when and with who you work? I thought about how women selling themselves sexually were seen as more exploited than women selling themselves in any other way. (Work and especially, women marrying men for their cash.)

Part of the problem lies in society's criminalisation, demonisation and moralisation of sex. It's a mad world where prostitution is locked down on by a lot of the same people who secretly buy sex. Our society needs underground sex just as it needs underground criminality so that the ones with 'respectable' lives can keep their image clean and carry on with their seemingly 'normal' lives. It's interesting what Pat Califia points out in Public Sex. 'The prostitute's identity is currently rather rigid, partly because once you have been 'soiled' by that work you are never supposed to be able to escape the stigma, but also because such rigidity creates clarity for the heterosexual male. He is what the prostitute is not (male, moneyed, in charge, legitimate, normal)' p.246.

It seems difficult to see how women can be in control in a patriarchal society and how even if sex was to be open and honest, how prostitution could ever be liberating in a man's world. I don't think that paying for sex is necessarily a bad thing in itself and that I don't think it is just a consequence of the sick society that we live in. Opening up our society about sexuality doesn't mean confirming the romantic, monogamous image of love and romance, nor confirming specific gender roles. Men and women will always need/want prostitutes, because there are people who are 'socially inept', leading busy lives, or just not into monogamy, etc.

Obviously, decriminalisation or legalisation is not enough. The whole understanding and living of sexuality and gender needs to change. I saw a couple of documentaries on a whore house in Nevada which is the only state in the US where prostitution is legal. Because prostitution in Nevada is legal it is seen as more legitimate and less stigmatised. Porn stars come down to some of the brothels there because they get such good pay and it doesn't undermine their status as an actress. So we've got the desired decriminalisation of prostitution that entails a more open view of sexuality and generally a better treatment of the women involved. But this doesn't actually mean much in a patriarchal capitalist society with such a twisted view of sex.

One of the women who had been in the house for ten years said that even though she didn't give herself emotionally to her clients, every time she had sex she felt like a bit of her soul was taken away. Another girl had an incident shortly after she arrived where a bloke penetrated her without a condom (strictly against the rules). And even though the house prided itself on providing a secure and safe working environment, nobody called the police or did anything about it. The young girl was really upset. She went home to be tested for STDs (she was clear) and then decided to go back. And then you've still got the big fat American guy running the brothels, choosing who he wants to sleep with that night and raking in the cash. He's also proud to announce that white-collar work rules apply, set hours, massive profits to the owners, and legitimised pimps.

Legalisation that takes place in this framework only reinforces capitalist ideals and specific roles for women, and makes legalised brothels seem as great options compared to the dangerous isolated work of the streets and illegal work houses. Instead, I believe that prostitution, as sexual healing and pleasure giving, has the potential to be a great thing in a society that embraced sexual emancipation, sexual differences, gender crossing, less defined gender roles, and was not driven by profit and exploitation (which might seem like a contradiction, but we will always exchange things). Only then do I believe that whores, both men and women, could be accepted and respected for their invaluable, 'priceless', skills and there would no longer be women being fucked about by dangerous or greedy fuckers.

A couple of years ago, I was in a fairly monogamous relationship with a man. I had been on the birth control pill for 3 years. It always bothered me being on the pill, because I like doing things as naturally as I can - for example avoiding doctors and antibiotics, and instead, trying to catch things before they progress, using preventative measures such as herbal remedies.

I met some women in Brighton who were into researching about women's health, and eventually formed a women's health collective that is still going, and has taught me a lot. When I first met them, I went to a 'Fertility Awareness' workshop. I was filled and overwhelmed with new information that I couldn't believe I never knew about my own body!

It was after that workshop that I decided to go off the pill, and chart my cycle. My plan was to eventually use it as a form of contraception, but initially I was simply interested in getting to know my body's cycle better.

I bought myself an electronic thermometer from Boots, and a small notebook. Listening to other female friends' experiences and reading books was empowering. While I was learning how to chart and getting used to my body's monthly shifts, I used condoms for contraception.

Every morning, the first thing I would do was put the thermometer in my mouth. I would try not to talk before hand, and definitely wouldn't get up. You get the most consistent readings by taking your temperature around the same time every day, and it's best if you have been lying down for at least 10 minutes I think. Right when I woke up worked best for me. I wrote my temperature down every morning.

When I wasn't bleeding, I began checking my fluid in my cunt. I did this at least once a day, either when I was in the toilet or the shower. I would put my finger up my cunt and circle around my 'os' (opening to the cervix). Then I would check it out - your fluid

tells you a lot, and changes a lot through the month. Sometimes it's creamy, or clear and stretchy, or chunky, or thick, or thin. Sometimes there's lots of it, and sometimes I'm almost dry. I would look at it, smell it, and sometimes taste it.

So, in my note book I wrote down ① what day of my cycle I was on (day 1 is first day of period), ② the date, ③ my temperature, ④ what my fluid was like, ⑤ if I had sex and whether it was protected or unprotected, AND ⑥ any thing else that I felt was important or that would likely change my temperature. For example if I drank or took drugs; didn't sleep much; was sick; had back pain or heartburn; how bad my cramps were; how heavy I was bleeding; how full the moon was; what my dreams were like.

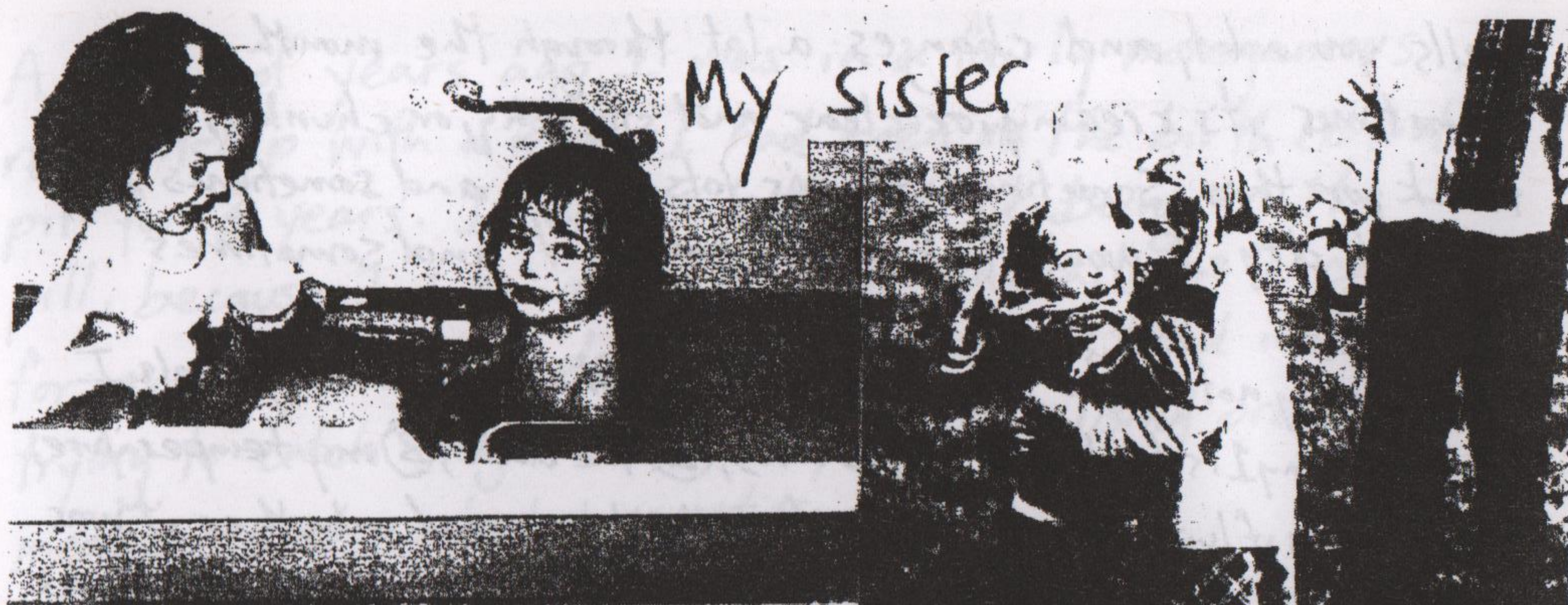
Once I had charted my cycle for around 4 to 6 months, I felt way more in touch with what the hell my body was doing. Not only did I know when I was ovulating (and therefore fertile), but I also learned when I was more prone to sickness or other chronic problems of mine like backaches and heartburn.

I think it is really important to emphasize that if you are going to use this method for contraception, it helps if you are leading a fairly consistent and steady lifestyle, and if you are really on the ball with taking your temp and checking your fluid. I write this because although I used this method successfully for about 2 years, at the end of last year I got pregnant. When my period didn't come, I knew exactly when I had conceived, and had a feeling I was pregnant because my temp didn't drop after I ovulated, which is what normally happens.

Some women make a graph of their temperature changes through the month, which may be helpful. I never tried this.

I would highly recommend to any woman to try charting their cycle. Since I started, I feel more in touch with myself. Although I don't chart regularly at the moment, it's still really useful knowledge, and I know I'll do it again in the future. ♥

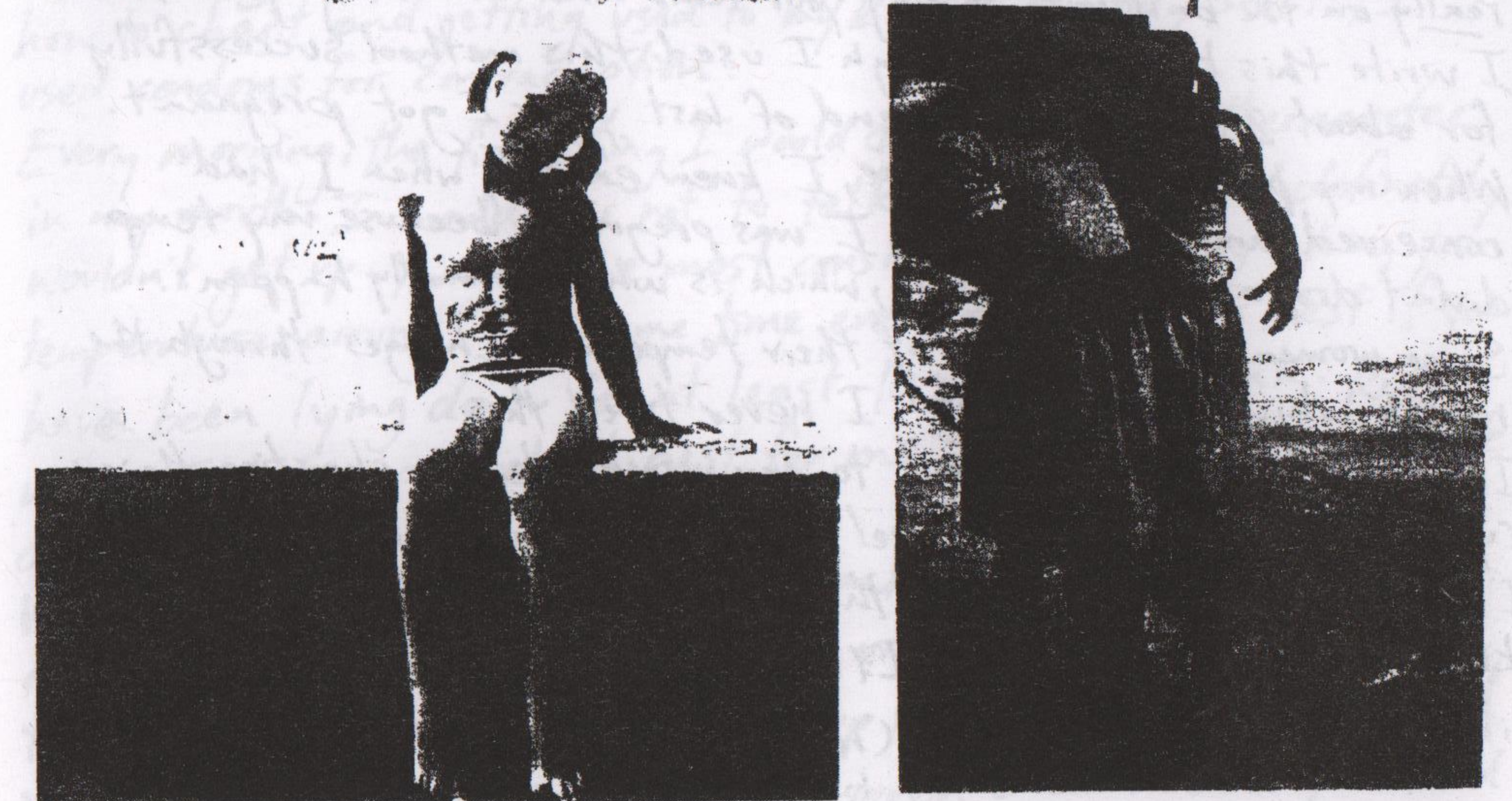
More info check out 'Taking Charge of Your Fertility' by Toni Weschler. KEEKS



My sister



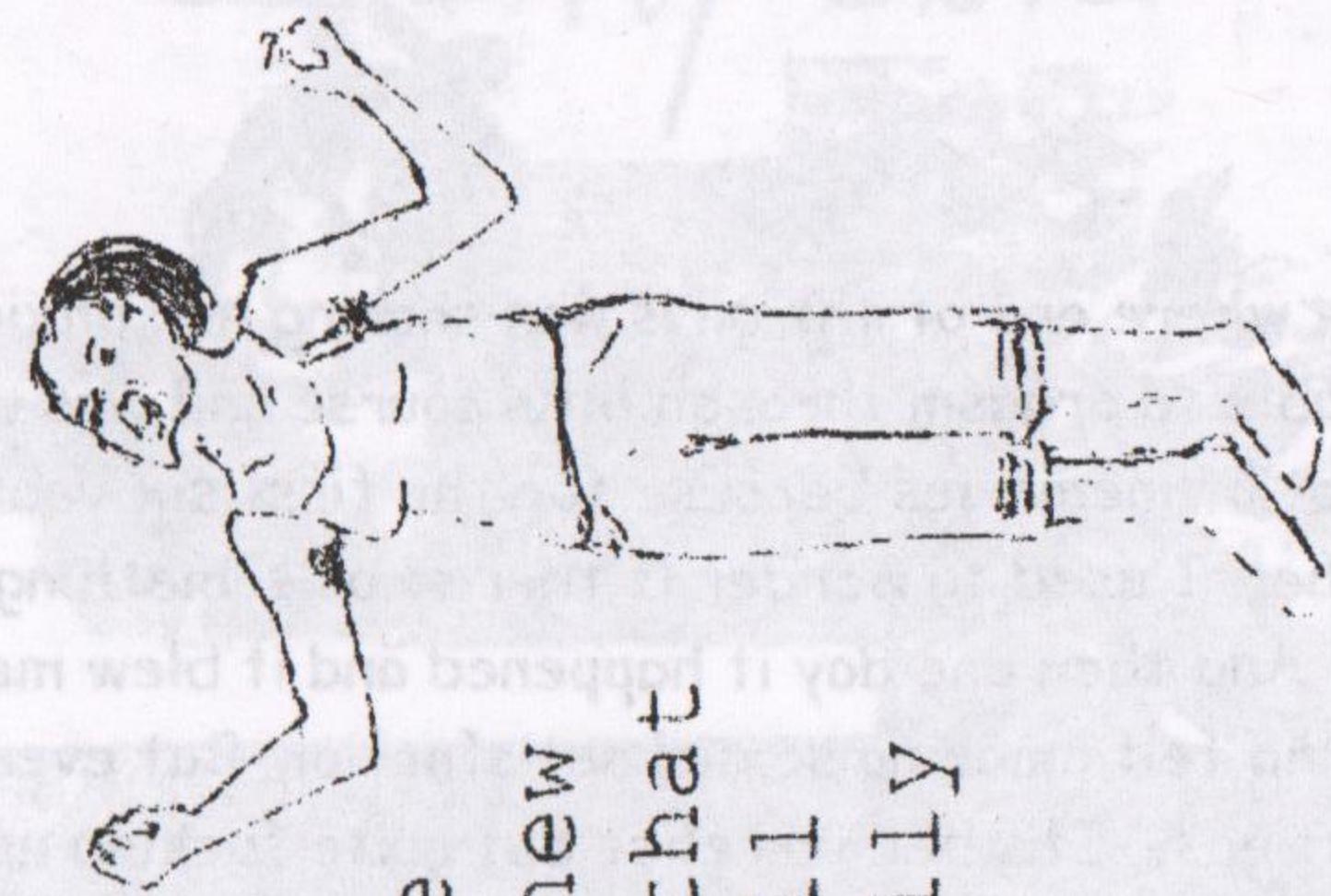
Not sure what I'd do without you. —



Recently I was reading a zine where one of the girls was sharing her anxiety and sexual frustration about not being able to orgasm through intercourse and was wondering if it was possible. It brought back a lot of memories because for the first six years of being sexually active I couldn't either. I used to wonder if there was something wrong with me and if I would ever have one. And then one day it happened and it blew me away, I screamed like never before and felt amazing sexual satisfaction. But even though now I know I can, I still don't find it easy. It's been a relief but quite fucking upsetting to read that many women have this issue. I don't know what the solution is for other women but getting to know my body, experimenting in different positions, rhythms of penetration and having a partner who is sensitive to the fact that I don't find it easy are all things that help. I think trust and being able 'to let go' are also very important. Of course it is essential for the guy to be able to keep his penis erect for long enough and for me to be fully sexually excited so lubricating (this last factor is really important because there is an overall thought that for sex to happen men just need to be erect but women's lubrication is equally as important. It really fucks me off that this is not taken into account just because men can still penetrate if the woman is dry). I now know also that for me to orgasm through penetration, the penis generally needs to be really far up my cunt. Sofas are good with me on top and/or cushions stuck under mine or his ass. Tantric or taoist principles on breathing, use of pelvic floor muscles, those used to stop urine flow, can help men (and women) put off ejaculation, still orgasm (if they choose to) and enable men to stay erect forever. Check it out and be patient. And to anyone who is struggling with penetrative orgasms, don't lose hope-you will get there. Masturbate, buy a vibrator or a cucumber, spend time making love to yourself, talking, reading (read Betty Dodson- Sex For One if you can), sharing, communicate with your partners, do anything that feels right for you. When I don't have orgasms through intercourse, I feel incomplete, my body pleads for it to happen, so I know it's worth spending time on (and writing about!).

N.B. I'd like to say that I do not think that penetration or heterosexual sex is the be all and end all of sex, far from it. But still something that should be able to be enjoyed if so desired.

P.S: I heard from some where after writing this that some women get intense pleasure from having their cervix stimulated, this seems to tie in with needing dildo, penis. to be really far up cunt.



I walk around in total disbelief most of the time, not quite being able to comprehend a new thing I've learnt about something shocking that our culture condones. You think that you will stop being surprised and accept that basically anything can go but I don't.

It was so cool to discover zines (and I'm very proud to say that this is a very recent discovery in my life, but at least I did find them - and now I'm addicted. They're affordable (whee), always a surprise, a great way of sharing + exchanging info + experiences. And although they are generally strong politically, there is room for debate + questioning. I enjoy reading thought processes. It's been amazing to write + put together a zine.



I am constantly having conversations with my self trying to see things from different angles, making sure I'm not catching myself out with naive opinions that don't really originate with me. I wish I could read + hear about more people's thoughts + confusion. These conversations, I am only close enough to a few people whose thought processes I know closely. One of the reasons I love zines as I get to read more about people's personal thoughts + ideas. It seems sometimes everyone is so rigid + it's so good to hear the subtleties + complexities of people's lives.

References

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- Sex for One the joy of self loving - Betty Dodson
- The Cultural Truth - Rebecca Chalker
- Public sex: the culture of radical sex - Pat Califia
- The New our bodies, ourselves - Boston Women's Health Book collective
- Touch me, touch me not women, plants + healing - Shadine Collins
- Issues of blood: the politics of menstruation - Sophie Laws
- Seeing Red the politics of premenstrual tension - Sophie Laws
- The fragrant pharmacy - Valerie Ann Worwood
- Luna Yoga: vital fertility + sexuality - Adelheid Ohlig
- The Andre Lourde Compendium - Andre Lourde
- Witches, midwives + healers - Barbara Ehrenreich + Meridie Engle
- For Her own Good: 150 years of the experts advice to women - "
- Aunt - Inga Musio
- Ain't I a woman - black women + feminism - Bell Hooks
- Angry Women - Andrea June + V Vale eds
- Head: the sex issue
- The G spot
- Women + the spectacle - Carol Ehrlich Spectacular Times
- Menopausal years the wise woman way - Susan Weed
- Taking charge of your fertility - Toni Weschler
- A woman's book of choices: abortion, menstrual extraction - R. Chalker + Carol Downer
- The woman in the body a cultural analysis of reproduction - Emily Martin
- For her own good - 150 years of the experts advice
- What makes women sick: gender and the political economy of health - Lesley Doyal
- Les guerrillères - Monique Wittig
- Jeanette Winterbon
- Annie Sprinkle
- Health-organic couple/man - Nantak Chia
- Carol Queen
- The ethical slut - Dossie Easton + Catherine Litz
- Abortion without Apology by Nina Baehr

Zines + pamphlets

- Hotpants: do it yourself gynecology herbal remedies (Hotpants CPSTI, Succ. C. Co., K2L4L6 Canada)
- Take back your life: a woman's guide to alternative health care - Alicia non grata (Propane existence PO Box 8722 Minneapolis MN 55405 USA)
- Knowing your cycle (Women's Health 5254 Featherstone St London EC1Y 8RT UK)
- Down Below an illustrated guide to self-exam - Sophie Laws (Onlywomen press Ltd 1981 38 Mount Pleasant London WC1X 0AP UK)
- Women and abortion - the body as a battleground - Rosalyn Baxandall (available through AK distribution <http://www.akpress.org>)
- Blood Sisters (www.bloodsisters.org)
- Red alert
- The period conspiracy - who's out to hurt you + how waves tales

Feminist Women's Health Centers <http://www.fwhc.org>

The Museum of Menstruation <http://www.mum.org/>

S.P.O.T. <http://critpath.org/~tracy/psot.html>

Anarcho feminist health <http://geocities.com/anarchofeministhealth/>

Womens health London <http://www.womenshealthlondon.org.uk>

Herbal abortifacients and birth control <http://free.freespeech.org/katia/reprint.html>

Herbs for self defence <http://reality.sgi.com/law/abort/abortx.html>

Menstrual Charts from Wellwomen Information, 6 West Street, Old Market, St. Philips, Bristol BS2 0BH. UK. Tel. 01272 413 311

Menstrual Pads from Bloodsisters c/o Elle Corazon, 176 Bernard West, Montreal, Quebec H2T 2K2 Canada.

Speculums (make: either Eschmann or Wallace vaginal speculums)

-Individual ones with Sophie Laws booklet about self exam from Women's Health, 52 Featherstone Street London EC1Y 8RT. UK. Tel. 020 7251 6333 or www.womenshealthlondon.org.uk

-Bulk (boxes of 25- you chose the size and whether you want them with or without ratchets) from distributors 'Healthcare' Tel. 0208 920 6208)

The Menstrual Cup/ Keeper c/o Su Hardy, 125 Mansfield Road, Brighton, BN2 5ES. UK Tel. 01273 673 845 or www.mooncup.co.uk

The National Association of Natural Family Planning Teachers, Birmingham Maternity Hospital, Queen Elizabeth Medical Centre, Edgbaston, Birmingham, B15 2TG. UK Tel. 0121 472 1377 x4219

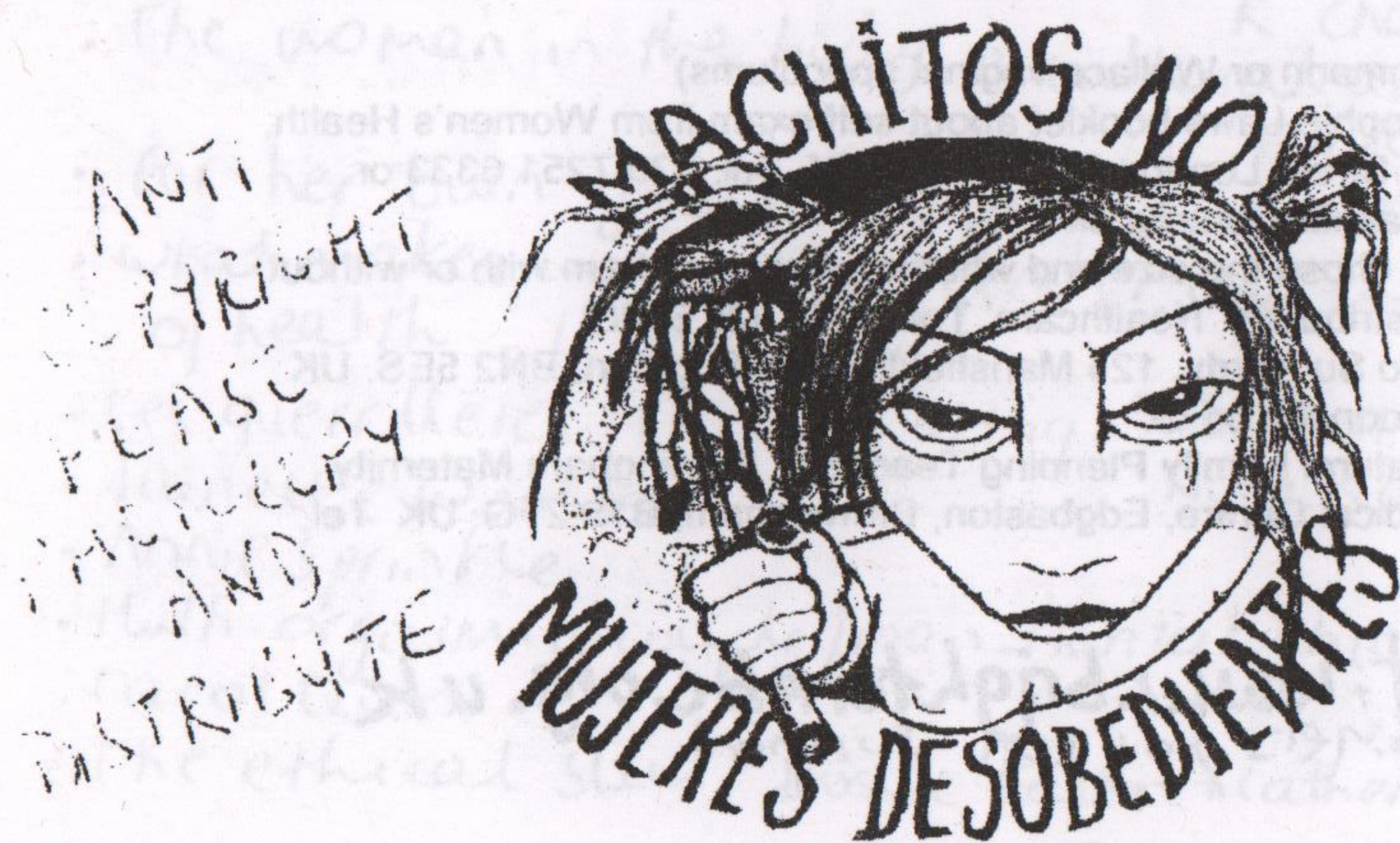
prisoner support: www.brightonabc.org.uk
for list of prisoners you can support

Anarcho feminist health <http://groups.yahoo.com/anarchofeministhealth>
 Living with our fertility <http://clubs.yahoo.com/clubs/livingwithourfertility>
 Herbal abortion support http://groups.yahoo.com/group/herbal_abortion_support
 Sister Zeus http://www.geocities.com/sister_zeus/
 Bloodsisters <http://www.bloodsisters.org>

DISTROS - write 4 catalogues
 re-pressed - 145 Cardigan Rd, Leeds, LS6 1LJ
 AK Press - PO Box 12766, Edinburgh, EH 8 9TE
 For New View of a Woman's Body, the Cowley Club in
 Brighton can supply so write to our e-mail address
 for details.

Our e-mail address is: viravoue.wimmin@yahoo.co.uk It would be great to hear
 what you think, experiences, thoughts, what
 you're up to, any contributions for the next
 line....

IF YOU KNOW OF ANY ZINES THAT ARE GOOD
 PLEASE WRITE + TELL US OR DO SWOPS WITH US.
 IN THE U.K ITS HARD TO FIND THEM.



Thanks for Support + contributions:
 Kate (for drawing of naked woman) - Dave - Lizzie -
 Kirsten - tom - Radha - Helen - Scaz - Carol -
 Sarah M - Harriet - Misty - Lisa ('some thoughts
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 Andrew - Pheet - Spanna - Ruth - Anna - Caz -
 katie - Zoë - Drew - Bob + Barbara - Russell -
 Paul culinarylingus - Jophie - B - Isy (for self-
 defense) - Tash - Hector - Kate - Bees - Rhian
 and all the other incredible people we have the
 fortune to know

Thanks to all the women we don't know whose
 work we've copied, pirated, been inspired by,
 couldn't have done it without you!

The Lowley Club is a libertarian social centre
 at 12 London road, Brighton, U.K.
 There are monthly women's health drop in + work
 fortnightly women's self-defense by Isy + Spanna
 Migrant english teaching project - fortnightly
 for more details come in or phone 01273 696104

Plug of local contacts:
 Do or Die - Voices from Ecological Resistance, A
 brilliantly compiled book about what is going on now.
 send £6 to 40 Prior House, 6 Tilbury Place, Brighton
 U.K BN2 2GY.
 Morgenmuffel distro + zines - great zine by Isy + her
 distro. Contact her at katchoo63@yahoo.co.uk

for details write to