

PREFACE

In the early 1970s, at the height of Second Wave feminism, critiques of physicians and of gendered assumptions about illness and health flourished in popular as well as scholarly writings. Attempting to provide a countermodel of medical care, feminists in many Western industrial nations organized self-help health movements, women's clinics, and community-based programs for birthing, gynecological exams, abortion, and therapy outside the formal institutions of healthcare. Women bought plastic speculums; relied on herbs, health foods, vitamins, and other organic products rather than commercial medications; and gathered together to celebrate freedom of sexual expression and sexual pleasure and to lobby for legalized abortion, access to midwives, rape crisis centers, and wife-abuse shelters. This special issue on women's health revisits some of these earlier efforts, providing critical and historical perspectives on abortion rights, lesbian identity and psychoanalytic practices, the myth of vaginal orgasms, and the power relations that inhere in doctor-patient relations. But this issue also offers newer perspectives and different approaches to understanding the effects of illness and disability on women's bodies, minds, and sense of self.

Through personal narratives, paintings, poetry, and fiction, contributors to this volume provide interior explorations of medical crises. Written in an era when many women have, partly as a result of Second Wave feminism, greater access to knowledge about their conditions and control over their treatment, these essays illustrate the difficult negotiations that remain for women faced with strokes, arthritis, cancer, and other disabling conditions. Mary Lowenthal Felstiner's unsentimental account of life with rheumatoid arthritis and Saundra Murray Nettes's powerful reflections on how an undiagnosed brain tumor caused her to take up the all too familiar position of the woman academic who constantly doubts her mental abilities are timely and original contributions to the vast experiential literature on chronic illness. So, too, the shorter pieces by Jessica Rosenberg and Mae Scoby provide moving tales of the ways that daughters are affected by mothers caught in the grip of potentially deadly diseases. Resolutely rejecting the mythical identities that are commonly deployed in this genre—the heroine who courageously battles illness, the noble victim who silently suffers, the family who finds salvation through the mother's impending death—these authors teach

us how to look at aging, disability, and serious illness with empathy and care but without melodrama. Understated prose and a persistent wit and humor even in the face of crippling emotional and physical pain are used in these "illness autobiographies" to lift the genre to a new level.

One intriguing aspect of the personal narratives collected here is the way that illness becomes, at least temporarily, the most salient dimension of women's identity. In the more scholarly articles and review essays, concerns with race, ethnicity, class, and sexual orientation loom large in critiques of the healthcare system and analyses of those who resisted its constraints. But in the personal narratives, as well as the poems and paintings, physical and psychic states seem to overwhelm, at least temporarily, other factors that are usually viewed as important to one's experience and self-identity. Thus, we learn in Nettles's "You Are Different Now" that she is African American with deep roots in the South. Felstiner, in "Casing My Joints," notes her Jewishness only in passing. And in Rosenberg's rumination on her mother's cancer, the family's upper-middle-class status is revealed only indirectly—through their access to the latest diagnostic tests and the easy references to scholarly texts. In many ways, the paintings by Riva Lehrer offer more markers of race and class status, yet here, too, the embodiedness of illness or of physical frailty and difference demands the viewer's greatest attention.

A countervailing voice emerges in the scholarly articles, where physical illness, sexual health, and medical practices are analyzed within larger structures of power—not only race, class, and gender but also scientific validity, political access, and professional credentials. This is not to suggest that the articles reduce studies of women and health to a set of easy manipulated variables, but rather that they provide a clearer view of the processes that nurture or constrain women's control over their mental and physical health. The personal narratives and artistic renderings highlight the same issues analyzed in the scholarly articles, but in a different genre and using experience more than (although not exclusive of) academic studies.

Still, the scholarly analyses offered here do take as their starting point women's experiences of their bodies and their treatment and care. In her recent book, *Conduct Unbecoming a Woman: Medicine on Trial in Turn-of-the-Century Brooklyn*, Regina Morantz-Sanchez used the life story of Mary Dixon Jones to explore the

possibilities and limits of female medical professionalism; the emergence of gynecological surgery; patients' relations to physicians, family members, and their own bodies; and the larger community's understanding of health and illness in the late nineteenth century. In this article Morantz-Sanchez adds to her book by examining a claim of medical malpractice against Dixon Jones to illustrate the important but often undervalued interplay between women's history and medical history. She argues as well that even in the nineteenth century, women were not simply victims of a male-dominated medical profession, but also agents of their own care, who shared information with each other and demanded specific forms of treatment despite the concerns of some practitioners or family members.

Focusing on a more contemporary example, Janelle S. Taylor highlights the ways that maternity patients use modern medical technology to their own ends. Fetal sonograms have been a popular topic for feminist scholars, as a previous issue of *Feminist Studies* (summer 1997) made clear. Taylor takes this research in a new direction. Rather than emphasizing the way in which women's bodies are constructed as dutiful workers in the process of childbirth, she documents the ways in which pregnant women use ultrasound technology to facilitate different kinds of consumption. Consumption for the future baby has been subject to intense commodification in recent years. This has long been true of clothes, which most women still feel cannot be bought in ignorance of the baby's sex, but is increasingly true as well of the consumption of healthy foods and drinks and, ultimately, the quasi-consumption of the baby itself as the fetus is increasingly regarded as a person in her/his own right.

Although Taylor shows that many American women experience their pregnancies in highly individualized and commodified terms, Third World women are often governed not as individual subjects of either consumption or personal health but as an aggregate possessing certain statistically produced features (e.g., a particular infant mortality rate). Sonalde Desai's original research shows that one of the great shibboleths of the "gender and development" project—namely the claim that providing education for women leads to better child health and lower fertility rates—is not based on solid evidence. Demographic research, which rarely appears in feminist journals, has the potential for unsettling some of

the individualist and consumer-focused assumptions that shape First World feminist health efforts. At the same time, Desai challenges demographers' assumption that education for women needs to be evaluated in terms of the effects it might have on aggregate health measures, an assumption that treats women as a mere means to an end.

The various ways in which pregnancy has been politicized, including the personification of the fetus, have raised especially difficult issues for those engaged in debates over abortion, leading to a spate of new studies by historians, sociologists, ethicists, and political scientists. In this issue, Leslie J. Reagan offers a counterpoint to the now familiar story of "Jane," the early Chicago abortion service, by focusing on a group of California feminists active in the same period. Beginning in 1966, this group provided women with access to abortions in Mexico. While working to repeal existing state abortion laws, these activists also established a referral service and sought to regulate the conditions under which women from the United States would obtain medical care in Mexico. As a precursor of the National Abortion Rights Action League and of the hundreds of women's self-help health clinics that emerged in the early 1970s, the California feminists confronted more directly than most groups at the time issues of class, nationality, and power as they sought to cross borders for abortion.

Reagan's work is part of a larger recasting of the issues raised by abortion. Johanna Schoen reviews half a dozen recent works on the period stretching from the century before *Roe v. Wade* to the quarter century after and analyze abortion law, abortionists, feminist abortion services, and the moral and political struggles fostered by each of these. Like abortion, female orgasm occupied a central place in feminist critiques of medical discourse and medical practice. Using Anne Koedt's 1968 "Myth of the Vaginal Orgasm" as her starting point, Jane Gerhard maps the sexual thought of a range of Second Wave feminists. She traces the contributions of this multifaceted, sometimes contradictory but largely productive debate over women's sexual self-determination in the years before the "sex wars" of the 1980s, when women activists broke into warring "pro-sex" and "anti-sex" camps. Koedt's essay and the arguments of many other women's liberationists challenged the psychoanalytic theories of Sigmund Freud, Helene Deutsch, and others who regarded women's essential femininity and heterosex-

uality as rooted in the vagina. In the context of these critiques, lesbianism (broadly defined as women's emotional as well as physical intimacy with one another) emerged as a form of resistance to male oppression.

Yet, despite the general effectiveness of lesbian, gay, and queer activist and intellectual efforts, Evelyn Torton Beck and Susan (Shanee) Stepakoff show in "Lesbians in Psychanalytic Theory and Practice" that efforts to challenge, or more recently to recast, Freud remain a centerpiece of feminist and specifically of lesbian feminist analysis. Their essay shows that at the level of theory, there are interesting new works that integrate queer thought with some elements of the psychoanalytic tradition. However, they also point out that queer psychoanalytic theory has failed to learn from empirical studies, particularly those of lesbian and gay families and those of and by transgender activists. While psychoanalysis and other theoretical frameworks for understanding sexual identity and sexual desire have changed considerably since the days of Anne Koedt and the tyranny of the vaginal orgasm, nevertheless we can see a continuity in the lack of attention, in "theory circles," to the findings of empirical and especially feminist empirical researchers.

Challenging the usual academic split that divides theorists from empirical researchers is, not coincidentally, one of this journal's continuing aims. This issue, like other *Feminist Studies* special issues, attempts to create new spaces for interdisciplinary work that is neither exclusively theoretical nor strictly focused on "the facts." We hope, by putting all of these diverse contributions within a single cover, to stimulate theorists to read demographic studies and experiential accounts, while pushing those who are more comfortable with ethnographic or other empirical research modes to be creative both with research methods and with writing practices. Women's experiences of illness and women's dealings with medical and other health service providers—experiences that have been so formative for women's movements around the world—can best be addressed and understood through innovative interdisciplinary work undertaken by activists and scholars with broad intellectual interests and a spark of creativity. We hope that this issue as a whole will generate a few such sparks.

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for the editors