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Under the Covers? Commerce, Contraceptives and Consumers in England and Wales, 1880 – 1960

This article provides a much needed commercial perspective to the gradual growth in consumption of birth control appliances in England and Wales between 1880 and 1960. By drawing on underutilized parliamentary sources and the hitherto neglected business records of manufacturers, vendors and distributors, this new approach reveals that consumption patterns were more varied in terms of class, gender and geographical location than scholars have generally recognized. In particular, its analysis of the production, promotion and distribution of birth control appliances alongside medical goods intended for domestic use during this period demonstrates the importance of consumption both among and beyond the primary married couple of the household. In doing so, this article aims to provide the medical historian with a new analytic tool for investigating neglected but potentially important sites of medical decision making.

Keywords: contraception, birth control, commerce, industry, household, consumption

In a 1956 special edition of its popular health magazine, *Family Doctor*, the British Medical Association (BMA) observed that 'loving is certainly no less a part of family life than eating.' This provocative statement accompanied the BMA's advice on methods of birth control alongside preparations and appliances suitable for a family medicine chest, and crucially, signaled that contraceptives had come to occupy a permanent place in the family home alongside other medical products. Certainly, by the 1950s, mechanical and chemical contraceptive appliances had long been produced, promoted, sold and consumed. The late nineteenth century witnessed the emergence of a small contraceptive trade that sold requisites once traditionally prepared within the home, such as douching powders and pessaries, while suppliers within this trade gradually created new markets of consumers with products, such as the rubber sheath and cap.

¹ Getting Married: A Family Doctor Special Issue (London: British Medical Association, 1956).

Yet, despite the large number of historical studies on birth control, we know comparatively little about the relationship between the history of contraceptive commercialization, consumption and domestic life. Indeed, the most recent in-depth study on the commercialization of birth control appliances in England, conducted as long ago as 1963, makes only passing reference to consumption, while more recent historical studies of sexual practice among married couples have yet to seriously address how contraceptives were bought and sold.² A number of questions therefore remain unanswered: How and when did increasingly mass produced contraceptives become acceptable commodities? Who, both within and beyond the household, made decisions to purchase them? How did this change over the period and by By considering a range of consumers and sites of geographical location? consumption, this paper offers a new approach to the commercialization of birth control in England and Wales prior to the introduction of the contraceptive pill and in turn, addresses what this may mean for the historian of nineteenth and twentieth medicine.3

The historical literature on contraception is vast but recent quantitative and qualitative research on sexual practice has demonstrated that the uptake of birth control appliances in England and Wales throughout the period of 'the fertility decline' (from 1876 to 1940) was far from a simple gradual chronological increase.⁴

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² John Peel, 'The Manufacture and Retailing of Contraceptives in England,' *Population Studies*, 1963, 17, 113-125. The most notable recent studies on sexual practice include Hera Cook, *The Long Sexual Revolution: English Women, Sex and Contraception, 1800-1975* (Oxford: Oxford University Press, 2004); Kate Fisher, *Birth Control, Sex, and Marriage in Britain, 1918-1960* (Oxford: Oxford University Press, 2006); Simon Szreter and Kate Fisher, *Sex Before the Sexual Revolution: Intimate Life in England, 1918-1963* (Cambridge: Cambridge University Press, 2010). Cook does emphasise the lack of focus on the market in birth control histories by critiquing purely structural approaches to changing acceptance of contraception, but does not discuss market forces prior to the pill in any detail.

³ Scotland and Northern Ireland would require a separate study, due to the extent of the religious, moral and legislative differences and are therefore excluded from this study.

⁴ Some notable examples include Marcus Collins, *Modern Love: An Intimate History of Men and Women in Twentieth-century Britain* (London: Atlantic books, 2003); Lesley Hall, Sex, Gender, and

Kate Fisher and Simon Szreter's recent oral history research has fleshed out broad demographic studies with detailed empirical evidence to suggest that it was only during the 1930s and after that British couples consumed contraceptive appliances on a significant scale, and that they did so alongside non-mechanical and free methods of birth control, such as abstinence, coitus interruptus (withdrawal) and the rhythm method.⁵ Pervasive contraceptive appliance consumption thus only followed the convergence of increasing sexual knowledge among the general population, decreasing moral resistance to artificial methods of birth control and the availability of better quality latex condoms. Figures from the period vary, and are frequently unreliable but one often cited study reported that 9 per cent of the middle classes used sheaths by 1930, while another reported that 18 per cent of the whole British population used some form of mechanical birth control appliance in 1949.6 Contraceptive appliance uptake before the 1930s was therefore seemingly quantitatively insignificant. This historiographical state of affairs makes an investigation into patterns of consumption all the more important, helping to explain how and why consumer behaviour changed over time. Much is still to be learned about the small-scale trade for contraceptives and corresponding consumption patterns in late-nineteenth and early-twentieth England and Wales.

Fisher and Szreter have further complicated the longstanding narrative of contraceptive consumption in late-nineteenth and early-twentieth century Britain by

Social Change in Britain since 1880 (London: Macmillan, 2000); Robert Jütte, Contraception: A History (London: Polity Press, 2008).

⁵ Szreter and Fisher, Sex Before the Sexual Revolution, 229-67; Simon Szreter, Fertility, Class and Gender, 1860-1940 (Cambridge: Cambridge University Press, 1996), 559-65.

⁶ L. S. Florence, *Birth control on trial* (Allen & Unwin, London, 1930); Lewis-Faning, 'Report on an Enquiry into Family Limitation and its Influence on Human Fertility during the past Fifty Years,' *Papers of the Royal Commission on Population*, vol. 1, 1949. Szreter cites the Lewis-Faning Report as 'the most technically rigorous source of systematic information available on contraceptive practices throughout the first half of the twentieth century,' while asserting that Florence's lack of proper consideration of abstinence resulted in distorted figures in this smaller-scale interwar report, 402, 405-6.

highlighting the disparities in uptake according to class, geography and gender. They have, for example, demonstrated the importance of the married male in household decisions on contraceptive consumption, and of the rubber sheath (the supposed 'male' contraceptive) in particular; they suggest that the omission of the married male from previous historical research on the family can be explained by a general lack of male voices in British surveys of birth-control practices before 1959.⁷ This omission, resulting from a widespread assumption that women were the primary consumers of contraceptives - douches, caps and other 'female' appliances, above all - has influenced scholarship. Accordingly, numerous studies from the 1950s to the 1990s have suggested that late-nineteenth century upper- and middle-class women were the primary contraceptive consumers (and working-class women into the twentieth century) because they dominated the domestic sphere and had greater concerns about limiting fertility.8 Such studies thus imply that contraceptive consumption formed part of general rising female consumption of fashionable goods, clothing, medicine and other products geared to the home market and encouraged by the rise of department stores, other new retail outlets and advertisements, although these distribution methods have been little explored. Of course, the sheath was long promoted exclusively to men to prevent venereal disease, but Fisher's interviews

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⁷ Fisher and Szreter, "They prefer withdrawal:" The Choice of Birth Control in Britain, 1918-50," *Journal of Interdisciplinary History*, 2003, *34*, 265-291, 280.

⁸ Joseph Banks, *Prosperity and Parenthood: A Study of Family Planning among the Victorian Middle Classes* (London: Routledge and Keegan Paul, 1954); *Victorian Values: Secularism and the Size of Families* (Aldershot: Gregg Revivals, 1994); Joseph and Olive Banks, *Feminism and Family Planning in Victorian England* (New York: Shocken Books, 1977); Patricia Branca, *Silent Sisterhood: Middle Class Women in the Victorian Home* (London: Croom Helm, 1975); Diana Gittens, *Fair Sex: Family Size and Structure, 1900-1939* (London: Hutchinson, 1982); Peter Laslett, 'The Comparative History of Household and Family,' *Journal of Social History*, 1970, *4*, 75-87; Lori Loeb, *Consuming Angels: Advertising and Victorian Women* (Oxford: Oxford University Press, 1994); Wally Seccombe, *Weathering the Storm: Working-Class Families from the Industrial Revolution to the Fertility Decline* (London: Verso, 1993). The literature on the history of consumerism is exhaustive but includes John Benson, *The Rise of Consumer Society, 1880-1980* (London: Longmans, 1994); W. Hamish Fraser, *The Coming of the Mass Market, 1850-1914* (London: Archon Books, 1981); Matthew Hilton, *Consumerism in Twentieth Century Britain: The Search for a Historical Movement* (Cambridge: Cambridge University Press, 2003).

with working- and middle-class couples of the 1920s to the 1950s suggest that the married man played a more active role in consuming this product for contraceptive purposes than studies on fertility in the home have suggested, and did so in the traditional role of main or sole family breadwinner.⁹ Historian Hera Cook has gone further, arguing that women resisted the practice and technologies of birth control.¹⁰

The commercial approach to the study of contraceptives adopted here can shed much needed light on some of the complexities of purchasing decision making highlighted by Fisher, Szreter and others. 11 Indeed, existing studies have yet to untangle public concerns regarding the commercialization of contraceptive appliances and the morality of birth control. Alison Neilans, secretary of the Association for Moral and Social Hygiene - an organization vocally opposed to contraception - stated that 'the problem of the modern conscienceless commercialization of the sale and advertisement of contraceptives is a different matter from that of birth control per se.'12 As we will see, consumption among both the married couple of the household and those beyond this primary couple, particularly adolescents, was encouraged by the rise of new retail outlets and advertisements, which sold and promoted other medical household goods, highlighting the variety of purchasing decisions in terms of product, gender, class and geographical location.

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⁹ Kate Fisher, "She was Quite Satisfied with the Arrangements I Made": Gender and Birth Control in Britain, 1920-1950,' *Past and Present*, 2000, *169*, 161-193. Sheaths produced and promoted for the prevention of venereal disease has been extensively discussed elsewhere. For a recent example on venereal disease, see Roger Davidson and Lesley Hall (eds.), *Sex, Sin and Suffering: Venereal Disease and European Society since 1870 (London: Routledge*, 2001).

¹⁰ Cook, The Long Sexual Revolution, 114.

¹¹ For a commercial approach to contraceptives in America, see Andrea Tone, 'Contraceptive Consumers: Gender and the Political Economy of Birth Control in the 1930s,' *Journal of Social History*, 1996, *29*, 485–508; *Devices and Desire: A History of Contraceptives in America* (Hill & Wang, 2001); 'Making Room for Rubbers: Gender, Technology, and Birth Control before the Pill,' *History and Technology*, 2002, *18*, 51-76. For a commercial approach to contraceptives in Germany, see Gotz Aly and Michael Sontheimer, *Fromms: How Julius Fromm's Condom Empire Fell to the Nazis* (New York: Other Press, 2011).

¹² Alison Neilans, 'Exploitation of Vice,' *Edinburgh Evening Dispatch*, 20 Feb 1937.

Yet, untangling the issues of contraceptive commercialization and birth control morality is also important for the period prior to 1930; even the gradual and uneven adoption of contraceptive appliances during the late nineteenth and early twentieth centuries can be fruitfully analyzed by paying greater attention to the small but growing contraceptive trade that operated in Britain. Indeed, trade information contained within often overlooked archival and printed sources, including the archives of the Public Morality Council (PMC), parliamentary papers, advertisements and trade catalogues, as well the places, spaces and industrial structures appropriated by manufacturers, vendors and distributors, reveals much about the changing but neglected ways suppliers sought to negotiate consumer resistance to contraceptive appliances throughout the entire period. Of course, care must be taken when assessing such sources, given their inherent commercial interest or moral viewpoint, but in the absence of evidence from consumers themselves, who rarely recorded their thoughts about such intimate products, much can be inferred about demand from the shape of the contraceptive trade, both in the late nineteenth century and beyond.

In focusing on the available commercial sources, this paper also offers a new methodological tool for medical historians. We will see from an analysis of this material that the mechanical contraceptive industry was indeed relatively small and that evidence of consumption is certainly limited. Nonetheless, the approach adopted here aims to provide us with a new framework for looking at birth control consumption and in doing so, suggests a deeper permeation of contraceptives into English and Welsh commodity culture than has hitherto been demonstrated. Its examination of widespread but largely neglected contraceptive production, retail and distribution methods and emphasis on potential sites of medical decision making,

including the home, the workplace, and the high street, uncovers a range of consumers and consumption patterns. In particular, it highlights the household as one site of medical decision making by aligning contraceptives with medical household goods produced, sold, promoted and consumed in England and Wales both prior to 1930s and between the 1930s and 1960 and by outlining company strategies to target the same 'respectable' couples who purchased domestic goods, such as hot water bottles and feeding bottles. In what follows then, we trace contraceptive products on their commercial journey to consumers – from production and promotion, to distribution and sales – and identify their relative significance for commercial medicine.

Production, Print and Promotion

As historians of medical commerce have recognized, the late nineteenth century rise in mass production of household medical goods, ranging from hot water bottles and ice caps to hernia belts and feeding bottle teats, signals not only manufacturers' ability to produce these goods in higher quantities than previously, but is also indicative of the emergence of a new medical consumer culture. British householders, the middle classes in particular, were eager consumers of medical remedies and technologies for use in the home and purchased mass produced

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¹³ The complexities of nineteenth- and twentieth-century respectability have long been debated elsewhere. For a classic example, see Peter Bailey, "Will the Real Bill Banks Please Stand up?" Towards a Role Analysis of Mid-Victorian Working-Class Respectability, *Journal of Social History*, 1979, 12:3, 336-53. For our purposes, the 'respectable' refers to an ideal consumer type targeted by contraceptive suppliers. These consumers could originate from any social class but were married, self-sufficient, had a degree of disposable income and possessed a moral rectitude.

¹⁴ Loeb, Consuming Angels; Thomas Richards, *The Commodity Culture of Victorian England:* Advertising and the Spectacle 1851-1914 (California: Stanford University Press, 1990; Takahiro Ueyama, *Health in the Marketplace: Professionalism, Therapeutic Desires, and Medical Commodification in Late-Victorian London* (California: The Society for the Promotion of Science and Scholarship, 2010).

rubber goods which found a place in their newly fitted bathrooms. However, historians have yet to link the simultaneous growth in contraceptive production following the vulcanization of rubber in the 1840s and its synthesis in the 1860s, with contraceptive consumption within the household. Late nineteenth-century markets for new contraceptives, such as the seamless enema (a vaginal douche produced with one sheet of rubber making it more durable and comfortable for its user), were certainly considerably smaller than those for other medical household goods. Nonetheless, it is clear from an assessment of hitherto neglected evidence from the period that contraceptive consumption was far from a negligible issue.

The establishment and reconfiguration of small contraceptive firms into rubber manufacturing hubs from the late nineteenth century in English cities such as Manchester, Birmingham, Leeds and in particular Dalston, in East London (where the London India Rubber Works prospered into the 1960s) is enough to warrant greater attention. Rubber good firms identifiable from local trade directories, such as Lambert & Sons and James G. Ingram, began to move to the London India Rubber Works in the 1840s and no less than eight companies clustered there by 1883.¹⁷ While the majority of sheaths sold in the UK were imported from Germany until the 1930s, Lamberts & Sons of the London India Rubber Works manufactured between a quarter and a half a million sheaths per year as early as 1890.¹⁸

During the 1930s, home production increased dramatically. In an effort to gain support for a Parliamentary Bill to regulate the rapid commercialization of

¹⁵ See Branca, Silent Sisterhood.

¹⁶ Peel, 'The Manufacture and Retailing of Contraceptives,' 117; Lambert & Co., *Catalogue of Domestic Specialties* ([n.p.], 1894), 14.

¹⁷ Trade directories list contraceptive makers under 'surgical instrument makers' or 'wholesale chemists.' *Post Office Directory* (London, 1883). James G. Ingram, *A Century of Progress*, *1847-1947* (London: Ingram, 1947, 1). The London Rubber Company moved to the area in 1932.

¹⁸ Peel, 'The Manufacture and Retailing of Contraceptives,' 117; The Monopoly and Mergers Commission, *Contraceptive Sheaths: A Report on the Supply of Contraceptive Sheaths in the United Kingdom* (London: HMSO, 1975) 10-2, 16.

contraceptive appliances, Lord Dawson of Penn reported to the House of Lords in 1934 that one Rubber Works firm produced 8.5 million contraceptive appliances a year, while another produced 72,000 per week.¹⁹ The accuracy of such figures is difficult to gauge, particularly as Dawson, a supporter of birth control and the first physician to enter the House of Lords as a member of the medical profession, refrained from identifying the two manufacturers concerned and, in any case, may have exaggerated the threat of commercialization on the legitimate consumption of birth control appliances among married couples in order to gain parliamentary support for the proposal that became the Contraceptive (Regulation) Bill of 1939.²⁰ Nonetheless, his figures for the production of all types of birth control appliance (including douches, caps and sheaths) is not inconsistent with John Peel's 1963 figure for latex rubber sheath production. Peel, providing the most reliable data to date, estimated that the London Rubber Company, as the largest sheath manufacturer in Britain, produced approximately 2 million latex rubber sheaths alone in the 1930s.²¹ Despite the absence of exact figures, the scale of increase in home production in the 1930s seemingly coincides with the first occurrence of widespread contraceptive uptake in Britain, as uncovered by Fisher and Szreter. By 1950, the London Rubber Company's success in over twenty years of rubber goods production meant that they were not only the UK's principal producer of sheaths but also its principal producer of domestic rubber gloves and balloons.²²

¹⁹ 'Report on Growth of Contraceptives,' Contraceptives (regulation) Bill 1939, A/PMC/067, Public Morality Council Archive, London Metropolitan Archive (henceforth PMC). These figures were also reported in the *Lancet*: 'This Contraceptive Business,' *Lancet*, 9 April 1938, 852, and in Monopoly and Mergers Commission, *Contraceptive Sheaths*, 11.

²⁰ 'Dawson, Bertrand Edward, Viscount Dawson of Penn,' *Dictionary of National Biography,* (accessed online 7 November 2014).

²¹ Peel. 'The Manufacture and Retailing of Contraceptives.' 122.

²² 'This Contraceptive Business,' *Lancet*, 852. Monopoly & Mergers Commission, *Contraceptive Sheaths*, 18.

From existing sources, it is also difficult to establish how far increases in sheath production are attributable to growth in demand for birth control products or for appliances for protection against venereal disease. Protective markets certainly increased in importance following campaigns against venereal disease during the two world wars, but the correlation between the growth in markets for sheaths and for the birth control appliances as a whole from the late nineteenth century suggests that at least some proportion of increased sheath output can be attributed to increased demand for birth control appliances.

Contraceptives produced from these manufacturing hubs were distributed nationwide but closer analyses of the ways in which these hubs operated also reveals how they helped to shape local consumption of these products. Neglected reports commissioned for the proposed Contraceptives (Regulation) Bill, for example, reveal that the sale of both birth control devices and associated literature reportedly common among workers within Birmingham contraceptive manufactories in the mid-1930s.²³ Again, while these reports should be interpreted with care given the fact that most report authors opposed the unregulated sale and advertisement of contraceptives, the evidence gleaned from them can be viewed alongside recent wider debates about the general role of the factory and other workplaces in disseminating sexual knowledge and shaping values and ideals on birth control in gendered, largely female, social networks, or 'communication communities' in late-nineteenth and early-twentieth century England and Wales. Certainly, low fertility rates in some localities where working-class women had steady employment after marriage, such as the cotton textiles in Lancashire, wool textiles in the West Riding and hosiery in the East Midlands, suggest that the relationship

²³ Report of Sir John Robertson CMG, MP, Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC.

between sex, work (particularly within emerging contraceptive manufactories), and home, is in need of further exploration. Yet similarly in-depth investigations are also needed of the contraceptive consumption patterns within largely neglected male factory worker social networks, such as the one formed of the 40 or so male skilled craftsmen who worked at Lambert & Sons in the 1930s. Indeed, without deeper analysis, the importance of such networks in contraceptive consumption among factory workers may be overlooked or overstated. Far from positively influencing consumption among workers, initial research suggests that workplace social networks reinforced morally conservative viewpoints on contraceptive appliances. For example, the sale of contraceptives in non-contraceptive producing factories in Swindon during World War Two caused a large proportion of the married female workers to walk out. Further investigation then into contraceptive sales practices in factories may prove fruitful in uncovering consumption patterns among the working class of both genders.

A varied range of promotional literature also aimed to fuel consumer demand for contraceptives and other rubber goods. Printed advertising media had of course been used for centuries in the form of simple cheaply produced hand-bills and posters distributed and displayed in urban spaces, particularly in London. Yet, the effects of nineteenth- and twentieth-century manufacturers' employment of advertisements on an unprecedented scale and in new forms within newspapers, cheap penny weeklies and as trade catalogues produced in their thousands has been largely neglected by historians. Catalogues, in particular, became a regular

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²⁴ Szreter used 'communication communities' in *Fertility, Class and Gender*, 533. See also, C. Creighton, 'The Rise and Decline of the "Male Breadwinner Family" in Britain,' *Cambridge Journal of Economics*, 1999, 23, 519-541, 521. Angus Maclaren has discussed the importance of the textile factory in the sharing of sexual knowledge and abortion practices among females in 'Women's Work and the Regulation of Family Size: The Question of Abortion in the Nineteenth Century,' *History Workshop Journal*,1977, 4, 70-81.

²⁵ Report from Swindon, VD folder, A/PMC/69, PMC

output of late nineteenth-century department stores, retailers and wholesalers, and were seen as invaluable for the development of impersonal relationships with consumers over vast distances; they allowed rubber good manufacturers to promote their products across ten to sixty pages and provided householders with more information to digest than a one page flyer. Plain or blank catalogue front covers, discreet titles such as The Winchester Manufacturing Co.'s 1910 Catalogue of Rubber Specialties and Lambert & Co.'s 1927 List of Surgical Appliances, as seen in figure 1., [INSERT FIGURE 1. ABOUT HERE] and their delivery in plain brown envelopes, clearly demonstrated that items were for sale but also aimed to ensure that they did not attract any unwarranted attention from the prying eyes of neighbours.²⁶ Such promotional forms allowed householders to mail order products discreetly from the comfort of their own home in any geographic location, but they also provide the medical historian with unexamined evidence about household consumption of these products.²⁷ Indeed, as historians of the book recognize, publications can offer hints of reading practices because authors and publishers shaped each publication according to readers' requirements in order to maintain a market.²⁸

Of course, historians have not altogether neglected printed birth control ephemera but they have nonetheless tended to privilege birth control advice literature over promotional forms of print, despite the huge overlap in publication type and purpose. While Peel has highlighted the fact that many birth control tracts were 'little more than a gloss on the commercial catalogue' due to their inclusion of

²⁶ Lambert, *Catalogue of Domestic Specialties* ([n.p.], 1894); The Winchester Manufacturing Co., *Catalogue of Rubber Specialties* ([n.p.], 1910).

Peel refers to the early nineteenth-century distribution of handbills for sheaths by Mrs Perkins and Mrs Philips, London, 'The Manufacture and Retailing of Contraceptives,' 38, 39, 98, 113. For medical advertising more generally, see Loeb, *Consuming Angels*; Ueyama, *Health in the Marketplace*.
 For example, Robert Darnton, 'First Steps Towards a History of Reading,' *The Kiss of Lamourette:*

Reflections in Cultural History (New York and London: W. W. Norton & Co., 1990), 154-87.

advertisements for largely female contraceptive appliances, such as caps and douches, the reverse is also true and catalogues were also little more than birth control tracts.²⁹ Robert Jütte, for example, has followed Edward Shorter's lead and outlined the significance of the educational contraceptives pamphlets in the dissemination of sexual knowledge among largely middle-class British readers. Jütte estimates that hundreds of thousands of editions of these pamphlets circulated among this readership during the second half of the nineteenth century and not less than 15 million between 1914 and 1938.30 While he also acknowledges the importance of advertisements in the dissemination of sexual knowledge, equivalent estimates of circulation numbers are not provided. Certainly, exact numbers of print runs of both catalogues and advertisements are difficult to ascertain, not least because of their limited survival rate, but sustained investment in production and circulation throughout the period is clearly indicative of sustained demand; it may even indicate that print runs far outstripped the sales of so-called non-commercial birth control tracts.³¹ Contraceptive catalogue producers continually updated their publications and distributed new editions to specific households both with whom they already conducted business and to potential new customers.

A detailed and holistic assessment of birth control publications - of the kind commonly undertaken by analytic bibliographers — can help to identify types of consumer and is suggestive of the ways in which these consumers responded to the variety of contraceptive promotional methods. This kind of assessment takes into

²⁹ Peel, 'The Manufacture and Retailing of Contraceptives,' 117.

³⁰ Jütte, Contraception: A History, 117-34.

³¹ As early as 1965, historian Peter Fryer suggested that extant contraceptive catalogues were an extremely rare but incredibly valuable resource, *The Birth Controllers* (London: Secker & Warburg, 1965), 8. He identifies approximately one hundred editions between 1850 and 1900. This study has uncovered an additional one hundred dating between 1860 and 1960, which are housed in libraries and archives across the UK, including the Thackray Medical Museum, Leeds and the Wellcome Library, London.

account not only the content of a publication but also its interior and exterior format, its paratext, its placement within a publication and patterns of production and distribution in context with other publications.³² Initially, the similarities in exterior and interior format of catalogues and birth control tracts seemingly confirm that the frequently cited literate middle- and upper-class consumers were those targeted with both publications; they were often produced by the same contraceptive manufacturers, who often charged 6d for their publications and included lengthy and pseudo-scientific descriptive text written by birth control specialists alongside the same instructive images of devices.³³ Yet, a closer examination of the catalogue's content reveals the variety of ways in which companies tailored their products, sheaths in particular, to target male and female consumers of different social classes. Certainly, in the absence of sales figures, evidence of tailored marketing at least suggests a more equal gender balance for contraceptive consumption than previous historical studies have recognized. Catalogues, such as H. Nickel & Co.'s 1910 edition and Walton Rubber Goods Co.'s 1937 edition, directed the most expensive sheaths on the market at the well-to-do male consumer about town 'with more than £250 a year' by discreetly disquising them as buttonholes, sweet wrappers and cigarette packets. These sheaths were sometimes promoted alongside those disguised as ladies' cosmetic powders, so that females could, and according to reports gathered for the Contraceptive (Regulation) Bill 1939, frequently

³² Early studies in the analytic bibliographic tradition include Donald McKenzie, *Bibliography and the Sociology of Texts, Panizzi Lectures* (London: The British Library, 1986); Roger Chartier, *The Order of Books: Readers, Authors, and Libraries in Europe between the Fourteenth and Eighteenth Centuries*, translated by L G. Cochrane (Cambridge: Polity Press, 1993); Darnton, 'First Steps Towards a History of Reading.'

³³ For example, Lambert & Co. published Stewart Warren, *The Wife's Guide & Friend*, (London: Lambert & Co., 1908), which purportedly went into its 22nd edition and sold an estimated 200,000 copies by the 1930s; Le Brassier Surgical Manufacturing Co. Ltd. of Birmingham published Grayling Stewart, *Wedlock and Birth Control* (Birmingham: Le Brassier Surgical Manufacturing Co. Ltd., 1941) and Douglas Neale, *Guide for Husbands and Wives* (Birmingham: Le Brassier Surgical Manufacturing Co. Ltd., 1937), and The London Hygienic Stores published Thomas Reynolds, *Birth Control: Its Use and Abuse* (London, The London Hygienic Stores, 1937).

did, carry them within their handbags and keep them on their bedroom dressers.³⁴ [INSERT FIGURES 2 AND 3 AROUND HERE]

Moreover, while historian Patricia Knight has claimed that sheaths in the nineteenth century were 'an unattainable luxury' that even skilled workers at 3/- per dozen could scarcely afford, the prominent placement of advertisements for the 'Poor Man's Friend,' the brand named combined sheath and pessary by W. George, contraceptive supplier of Holywell Street, inside catalogues and within the *Illustrated Police News* during the 1890s and 1900s, was a clear indication that working-class couples may have formed a significant part of its customer base.³⁵ The 'Poor Man's Friend' cost just a few pennies each, while the *Illustrated Police News*, a titillating cheap weekly popular among a working-class readership, cost only 1d.

Further indications that both males and females from a range of classes were contraceptive consumers are revealed when evidence gleaned from promotional literature and from other sources is combined. Sources already well-mined by historians of contraception are certainly useful for medical historians here. Ethel Elderton's 1914 Report on the English Birth-Rate: Part I, England North of the Humber, which formed part of a larger social data collection project for the London based Eugenics Laboratory, offers numerous examples among the working classes north of the Humber who were enticed into purchasing contraceptives through

³⁴ Disguised sheaths priced at 1/9 each, or 3 cases 4/6 and 6 cases 8/- certainly gained appeal among the upper classes. Within the 1936 catalogue of Le Brasseur Surgical Manufacturing Co. Ltd, the company proudly described its most expensive product as: 'a heavily nickelled and smartly decorated cigarette case, containing four circular Seamless Preventives of first-class quality, made up in the form of a cigarette. Detection is impossible, so well are they imitated and concealed,' 13. Letter to Mr Tyrer, 14 Dec 1938, Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC.

³⁵ Knight, 'Women and Abortion in Victorian and Edwardian England,' 59. For example, 'Caution!! - Men Be Careful,' *Illustrated Police News*, 22 April 1899. Holywell Street formed part of London's most notorious district for the sale of contraceptives, pornography and part of the late-Victorian rise of 'shopping for pleasure.' See Linda Nead, *Victorian Babylon: People, Streets and Images in Nineteenth-Century London* (New Haven & London: Yale University Press, 2005), 161-189; Erica Rappaport, *Shopping for Pleasure: Women in the Making of London's West End* (Princeton: Princeton University Press, 2000).

printed advertisements.³⁶ In particular, she suggests working-class males in Bradford and Stockport during the late nineteenth century were encouraged to purchase sheaths as a result of the prominent display of contraceptive posters in male public lavatories, while the lower-middle classes of York were particularly accepting of mail-order catalogues because it allowed them to order products without embarrassment they were reportedly 'afraid to ask for drugs over a counter.'³⁷ She also identifies the more regular appearance of advertisements for sheaths in the evening press than in morning papers - four or five times in one edition of one popular York newspaper throughout the late 1800s, presumably the *York Herald* – which suggests the targeting of working-class male householders in particular, so they could more fully digest relevant information after a day's work.³⁸

However, while the absence of reliable data means it is tempting to rely on Elderton's report, Szreter's recent critique of both its methods and findings suggests that far fewer birth control devices may have been promoted in the 104 registration districts surveyed than stated and that historians have subsequently acknowledged. His demonstration of the report's reliance on the indirect testimonies of middle-class respondents, who invoked local hearsay or anecdote to illustrate the reproductive behaviour of unidentified working-class men and women, mean that is not possible to draw firm conclusions from its findings. More broadly, Szreter's critique highlights the many problems of existing evidence of birth control appliance consumption, among late-nineteenth century working-class consumers in particular.³⁹ Yet despite these doubts over its reliability, the report's discussion of catalogues, local newspapers and the placement of single-sheet advertisements does at the very least

³⁶ Ethel Elderton, *Report on the English Birth-Rate: Part I, England North of the Humber* (London: Eugenics Laboratory Memoirs, 1914), 98, 105, 133.

³⁷ Elderton, Report on the English Birth-Rate, 79, 134.

³⁸ Elderton, Report on the English Birth-Rate, 134.

³⁹ Szreter, Fertility, Class and Gender, 400-2.

suggest that some respondents, whether middle or working class, were aware that contraceptive suppliers used such methods to encourage consumption.

Given the questionable reliability of the Elderton report then, overlooked evidence from local urban development legislation is perhaps more convincing of a greater gender and class balance in contraceptive consumption. For example, using evidence from a court case regarding the London County Council (Improvement) Act of 1897, John Peel demonstrates that W. George generated 45 per cent of his business with both men and women through advertising by the time he produced his first catalogue in the same year. By reexamining Fisher and Szreter's existing work, it is also clear that catalogues continued to aid the purchase of contraceptives by working- and middle-class householders located across the country into the 1920s, 1930s and 1940s. In fact, they demonstrate that working-class couples in these decades in certain locations, such as Hertfordshire, preferred sheaths over other more 'traditional' contraceptive methods and that it was the male within these couples that seemingly ordered the majority of these sheaths via mail-order. The full extent of mail-order sheath consumption, however, requires further study.

Both the increasing production and widespread promotion of contraceptives in England and Wales then suggest that contraceptives were more significant among an array of consumers during this period than has hitherto been presented; certainly both male and female householders within working, middle and upper social classes consumed both male and female contraceptives (sheaths in particular via mail order but also via social networks within the workplace), although they seemingly did so in much smaller numbers than other household products. With a deeper analysis of these production infrastructures, it therefore might be possible to ascertain further

⁴⁰ Peel, 'The Manufacture and Retailing of Contraceptives,' 119.

⁴¹ Fisher & Szreter, Sex Before the Sexual Revolution, 229-67, in particular 241, 232. 254.

details on consumers targeted. Yet, while companies increasingly encouraged custom from all social classes via mail order, they also increased their presence on the high street.

Over-the-Counter and On the High Street

By the late nineteenth century, mail-order catalogues and other forms of promotion explicitly targeted male and female householders from all social classes at their place of residence, thus providing them with access to contraceptive products at a discreet distance. Yet, while catalogues were important for contraceptive distribution to householders across much of England and Wales, the rapid expansion of urban areas - almost 80 per cent of the population lived in large towns and cities by 1900 – also provided suppliers with greater opportunities to target all types of consumers, via a chronically neglected site of contraceptive consumption: the high street.

As retail historians have acknowledged, the high street was rapidly becoming an increasingly important site within urban centres for late nineteenth and early twentieth century consumers to purchase all manner of household requisites. 42 Urban consumers began to demand a central shopping location from which to purchase medicinal herbs, pre-packaged proprietary medicines, appliances and contraceptives, alongside groceries and household luxury items. Yet historians have tended to dismiss contraceptive retailers, even into the twentieth century, on the grounds that their products were inaccessible and hidden behind shop counters and in shop drawers, meaning that only the most knowledgeable and unashamed upper-

⁴² For example, Fraser, *The Coming of the Mass Market*.

and middle-class consumers would make purchases.⁴³ This assumed absence of contraceptives on the high street may also explain why historians have tended to focus on rising numbers of birth control clinics, from those first established in London by Marie Stopes and in Northern industrial towns from the 1920s to those across England and Wales brought under medical control by the Family Planning Association by the 1940s.⁴⁴ A closer analysis of retail outlets, however, particularly in the twentieth century and in the south of England, along with a greater consideration of the history of retailing, seemingly contradicts this view and demonstrates the importance of retailers in shaping the visual culture of contraceptives in towns and cities. While it is important to point out that the sale of such items remained controversial at the turn of the twentieth century, department stores, such as those run by The Army & Navy Cooperative Society in London, retailed enemas, caps and douches to female middle-class consumers already eager to consume other household goods, and, according to the authors of the Contraceptives (Regulation) Bill, sheaths were openly available from garages, public parks, public houses, hygiene and chemists' shops, as well as more longstanding urban distribution points, such as the barber and tobacconist into the 1930s.⁴⁵

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⁴³ Stuart Anderson & Virginia Berridge, 'The Role of the Community Pharmacist in Health and Welfare, 1911-1986,' in Joanna Bornat, Robert Perks, Paul Thompson and Jan Walmsley (eds.), Oral History, Health and Welfare (London: Routledge, 2000); For a short account of retailers in the late nineteenth century, see Knight, 'Women and Abortion in Victorian and Edwardian England,' 59. ⁴⁴ For example, Claire Davey, 'Birth Control in Britain During the Interwar Years: Evidence from the Stopes Correspondence,' Journal of Family History, 1988, 13, 329-45; Emma L. Jones, 'The Establishment of Voluntary Family Planning Clinics in Liverpool and Bradford, 1926-1960: A Comparative Study,' Social History of Medicine, 2011, 24, 352-369; Kate Fisher, "Clearing Up Misconceptions," The Campaign to set up Birth Control Clinics in South Wales between the Wars,' Welsh History Review, 1998, 18, 103-29; Julie Grier, 'Eugenics and Birth Control: Contraceptive Provision in North Wales, 1918-1939,' Social History of Medicine, 1998, 11, 443-48. ⁴⁵ Evidence for contraceptives products sold within the Army & Navy department store on Victoria Street, London is contained within the company's 1907 catalogue, Army & Navy Co-Operative Society, Yesterday's Shopping: The Army & Navy Stores Catalogue, 1907 (London: David & Charles, 1969); Fraser, The Coming of the Mass Market, 7. 'Growth of Contraceptives,' Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC. For a US comparison of female contraceptive retailing in the 1930s, see Tone, 'Contraceptive Consumers,' 497-8.

It was the late nineteenth- and early twentieth-century rise of the retail chemist - distinct from the pharmaceutical chemist - that seemingly made the most impact on contraceptive availability on the high street, particularly as it aimed to shape itself into the 'one stop shop' for all household medicaments and appliances for the entire family.46 While the Pharmaceutical Society prohibited its members from retailing or promoting contraceptives without prescription until 1953, retail chemists could, if they so chose, sell such products from the 1880s due to their status as limited liability companies. Boots & Co., one of Britain's most successful and recognized high street chemists, were an important exception and chose to refrain from selling diaphragms, caps and pessaries without a doctor's prescription until 1949, and sheaths until 1965. Yet, despite Boots' absence from the market, the increasing prevalence of contraceptives sold by other retail chemists throughout the period serves to demonstrate the power of the consumer in determining his or her own healthcare regimes and by extension, the resistance to the medical profession's control over prescription for such products.⁴⁷ The retail chemists' increasing promotion of themselves as 'family' chemists was also no accident; it urged all types of family members to draw on their goods and services, including contraceptives. As one commenter suggested in 1932, 'there can be no doubt that people take a great deal more medicine nowadays than they did 25 or 30 years ago.....the very fact that peoples' minds dwell on these matters makes it easier for the pharmacist to obtain an interested hearing when pushing his medical preparations.'48 Accordingly,

⁴⁶ For nineteenth century chemists, see P. S. Brown, 'The Providers of Medical Treatment in Mid-Nineteenth Century Bristol,' *Medical History*, 1980, 24, 297-314; Hilary Marland, 'The Medical Activities of Mid-Nineteenth Century Chemists and Druggists, with Special Reference to Wakefield and Huddersfield,' *Medical History*, 1987, 31, 415-39; 'The Doctor's Shop': The Rise of the Chemist and Druggist in Nineteenth-Century Manufacturing Districts,' in L. Curth, *From Physick to Pharmacology: Five Hundred Years of British Drug Retailing* (London: Ashgate, 2006), 79-105.
⁴⁷ Fraser, *The Coming of the Mass Market*, 120. Monopoly & Mergers Commission, *Contraceptive Sheaths*, 12.

⁴⁸ Business Methods for Chemists, (London: Retail Pharmacists' Union, 1932), 38.

contraceptives gradually emerged from under the counter and were more prominently displayed as 'sanitary' domestic appliances alongside other household rubber products. In the 1930s, it was increasingly obvious that chemists' were responding to consumer demand and were abiding by professional marketing literature advising them to display rubber goods with toilet articles, sick-room requisites and cameras all year round in order to increase profits.⁴⁹

Chemists' continuing aim to provide the 'respectable' household with all its medical supplies, alongside longstanding anxieties from all types of consumers about purchasing contraceptives from retail outlets, led both chemists and contraceptive suppliers to take seriously not only the ways in which products were displayed inside their premises but also the way they presented their window displays at least from the 1930s. Indeed, shop and window design was not simply a way of enticing and exciting new types of customer but also contained messages about the value, quality and origins of a retailer's products; it was a response to attitudes towards consumption, the problematic nature of medical commodities, and concerns about their reliability, trustworthiness and honesty. Historian Patrick Wallis' assertion that the material culture of an apothecary's shop in early-modern London could resolve some of the anxieties that enveloped consumption of retail medicine in this period also seemingly rings true for contraceptive retailing several centuries later.⁵⁰

Window displays of chemists' and specialist stores, in particular, became the most 'powerful selling force in modern sales promotion' for its ability to bring in passers-by, as well as soliciting custom from those purchasing other medical supplies, and yet, the significance of those beyond late nineteenth-century Holywell

⁴⁹ Business Methods for Chemists, 54; Fraser, The Coming of the Mass Market, 23.

⁵⁰ Patrick Wallis, 'Consumption, Retailing and Medicine in Early Modern London,' *Economic History Review*, 2008, *61*, 26–53, 29.

Street, London, are yet to be examined.⁵¹ London had, of course, long been an important contraceptive retailing centre and recent studies have suggested that contraceptives, particularly latex sheaths, were at first only prominently available from chemists' in the city and the home counties, seemingly because demand in these locations was higher than elsewhere.⁵² In one London district, only seven out of 280 chemists did not visibly stock contraceptives in the late 1930s; in another London district, 40 chemists' shops were supplemented with 34 specialist birth control shops.⁵³ The latter were an increasingly popular retail outlet which again allowed discerning consumers to purchase goods without consulting medical professionals, but nonetheless attracted them with company names including words from the profession's vocabulary such as 'surgical' and 'hygienic', as in the cases of Allen Surgical Hygienic Co. Ltd and the Stockwell Hygienic Co. Ltd. Some hygiene shops continued a barber shop tradition of providing discreet separate entrances for those wanting to purchase contraceptive appliances, and, to better promote respectability and avoid consumer embarrassment, a number of stores provided separate male and female entrances and offered female only attendants to assist female customers [INSERT FIGURE 4. AROUND HERE].⁵⁴ Fisher and Szreter's oral history evidence suggests that this method of sheath consumption was growing in popularity among London-based middle class married males. 55

Yet, further evidence about the shops pieced together from Elderton's report, catalogues, business archives and parliamentary reports suggests that householders

⁵¹ Business Methods for Chemists. Nead, Victorian Babylon, points out that the street was knocked down in 1901.

⁵² Fisher & Szreter, Sex Before the Sexual Revolution, 239.

⁵³ 'Growth of Contraceptives,' Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC; 'Sales of Contraceptives: A Regulating Bill,' *The Times*, 31 March 1938, 47957, 7.

54 Ada Willis, *How To Limit Your Family* (London: The Stockwell Hygienic Co. Ltd, 1940), frontispiece.

⁵⁵ Fisher, "She was Quite Satisfied with the Arrangements I Made," 170; Fisher & Szreter, Sex Before the Sexual Revolution, 259.

in other parts of the country were also exposed to prominent contraceptive displays, both inside the premises of chemists' shop and within their windows. Elderton's report, while flawed, does provide some indication that contraceptives were displayed inside chemists' shops in parts of Northern England as early as 1900; the report's middle-class respondents mentioned the presence of chemists' contraceptive displays, both in textile manufacturing working-class districts of Lancashire, where wages could be as much as 15 per cent above the national average, and in well-to-do York. While there is no description of the form of these displays, they were presumably visible to consumers. York respondents seemingly stated that customers could barely 'miss seeing them' on entrance to the premises.⁵⁶

In the 1930s, retailers across London, as well as in the under-researched cities of Birmingham, Manchester and Leeds, had prominent window displays but claimed that those containing contraceptives were displayed 'in a manner which cannot offend the most sensitive or fastidious person.'57 [INSERT FIGURE 5. AROUND HERE] A typical display within the windows of specialist birth control shops in London contained boxes of contraceptive ointments, such as Hygeolene; chemical pessaries, such as Hygeon (the successor of quinine pessaries); female pills, such as Dr Paterson's; reusable sheaths and those branded such as the 'Poor Man's Friend' and Lambert's 'Pro-Race' rubber sheaths, and enemas of various kinds, alongside products such as 'toilet rolls, children's teething aids and Dr White's sanitary towels.'58 While it is difficult to know with certainty how typical such window displays were beyond London, the catalogues of stores and chemists' shops with

⁵⁶ Elderton, Report on the English Birth-Rate, 35, 134.

⁵⁷ Hancock & Co, *Catalogue of Rubber Goods* (London: Hancock & Co., 1931), preface, referred to its shop window in Fleet Street.

⁵⁸ Typical window display is based on the windows of three London specialist birth control outlets in Cambridge Circus, in Praed Street and in Euston Road. Report on The Growth of Contraceptives, Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC.

multiple premises, such as the Stockwell Hygienic Co. Ltd, suggest that they were replicated in their branches in towns and cities as far afield as Brighton, Bradford, Manchester and Hereford by the 1940s.⁵⁹ Certainly, the 20 per cent of its products Lambert supplied to retail and wholesale chemists with branches all over the country, such as Timothy Whites and Taylors, John Bell & Croydon, Sangers Ltd, and May, Roberts & Co Ltd, were likely to form part of window displays, as were the London Rubber Company's pessaries and 'Durex' brand sheaths supplied to over 8,000 chemists nationwide.⁶⁰

The range of birth control products displayed highlights retailer attempts to attract different types of consumer. For example, the 'Poor Man's Friend' may have attracted those on lower incomes, while the display of 'Pro-Race' rubber sheaths suggests retailers' attempts to make contraceptives appeal to middle-class eugenicists. A crucial part of displays were colourful and highly decorative showcards, banners and posters with written descriptions, because without them 'these appliances themselves are extremely dull-looking things. They would not attract the attention of anybody more than once.'61 Several birth control shops also began to invest in illuminated signs announcing the availability of birth control requisites to attract even greater attention and to encourage repeat business.'62

While there was opposition to prominent window displays, particularly from organizations such as PMC and the Association for Moral and Social Hygiene, these displays were also successful in informing consumers and encouraging

⁵⁹ Ada Willis, *How To Limit Your Family.*

⁶⁰ Letter from London Rubber Company, 1 September 1936, SA/FPA/A7/129, Family Planning Association Archive, Wellcome Library, London (henceforth FPA); Letter to Mrs Pyke, June 1944, SA/FPA/A7/66, FPA.

⁶¹ Lord Dawson, 'Contraceptives Bill,' House of Lords, 27 February 1934, UK Parliamentary Papers, 954

⁶² Lord Dawson, 'Contraceptives Bill,' House of Lords, 27 February 1934, UK Parliamentary Papers, 954.

contraceptive consumption.⁶³ Indeed, it is possible that shop and window displays played a part in informing the married middle-class men of London studied by Fisher and Szreter, who reportedly had no difficulty purchasing sheaths between the 1920s and 1950s – either the thick reusable type or the thin latex type – from local chemists' shops.⁶⁴ Evidence of married middle- and working-class women purchasing sheaths from chemists' shops is certainly wanting, but the increasingly blatant display of this contraceptive alongside other medical and sanitary goods largely aimed at women (particularly toiletries), demonstrates its need for further investigation.⁶⁵

However, the focus on commerce also allows us to read the discourse about retail regulation against the grain to recover less prominent consumers from the history of birth control literatures. Neglected evidence within the archives of these organizations, for example, suggest that such displays encouraged sheath consumption not only from working-class married men in London, Oxford and South Wales but also among adolescent unmarried middle-class male and female consumers. Unmarried adolescents were largely passers-by, who relied on window displays to present them with sufficient information on birth control appliances, less easy for them to access elsewhere. Adolescents in the middle and working classes had long been wage earners by the 1930s and retail chemists sought to take advantage of their disposable income, which they spent on items beyond the control of their parents. The seeming success of chemists' shop window displays in

 ⁶³ "Ban Slot Machines In Public," Women Urge,' *Evening Post*, 20 October 1949, 3AMS/2/09,
 Association for Moral and Social Hygiene Archive, Women's Library London (henceforth AMSH).
 ⁶⁴ Fisher, "She was Quite Satisfied with the Arrangements I Made,"169, 175. Fisher & Szreter, *Sex Before the Sexual Revolution*, 230.

⁶⁵ Fisher, "She was Quite Satisfied with the Arrangements I Made," 177.

⁶⁶ The Growth of Contraceptives, Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC; 'Contraceptives Bill: Official Report,' House of Commons, 16 December 1938, UK Parliamentary Papers, 2426. Gittins, *Fair Sex*, 55.

encouraging adolescents, typically with less knowledge about birth control than other types of consumer, into the chemists' shop is suggested by a 1939 report conducted by the PMC demonstrating that 300 young unmarried men and women inspected the contraceptive window displays of five London-based shops during three nights between 6 and 8pm and of those, 35 entered the shops to purchase goods. Along with their attractive nature, the success of these window displays lay in the fact that they prevented customer embarrassment by allowing them to point out to the shop assistant the product they required from a window rather than having to request it by name.⁶⁷ This method of purchasing was therefore relatively unregulated and unmonitored.

Contraceptive manufacturers' increasing employment of vending machines is also barely mentioned in historical studies, yet such machines were established in public places all over England and Wales from the late 1920s and represented an extension of the unmonitored purchasing method begun by chemists' window displays. Consumers of any type were thus completely unmonitored when obtaining sheaths from such machines, and they provided these consumers – the married and 'respectable' as well as the young and unmarried - with an easy and convenient method of purchasing the goods they required outside normal retail hours. Over 160 machines selling the London Rubber Company's 'Ona' sheaths were placed all over London between 1929 and 1949, including on the high street and outside chemists', barber and hairdressers' shops, at garages, in public houses, and in new sites of leisure activity common among adolescents: the cinema, the dance hall, and the amusement and shopping arcade. Several dozen machines also occupied areas outside hygiene and chemists' shops in the cities of Birmingham, Leicester, and

⁶⁷ The Growth of Contraceptives, Contraceptives (Regulation) Bill 1939, A/PMC/067, PMC; 'Contraceptives Bill: Official Report,' House of Commons, 16 December 1938, UK Parliamentary Papers, 2426.

those in the West Riding, while licenses were issued for the establishment of machines in Kent, Surrey, Sussex and the more populous cities in Scotland [INSERT FIGURES 6 AND 7 AROUND HERE]. 68 Priced at between 1s and 2s 6d, packets of three contraceptives were sold in machines alongside razors, Aspirin, cough lozenges and cigarettes. While it is difficult to establish how many contraceptives in total were sold from these machines, the fear among social organizations that they would prompt higher levels of trade led to their extensive study and the commissioning of various reports. One report suggested that children, boys and girls not yet in their teens, purchased sheaths from such machines partly because they were attracted to the bold lettering of the brand name 'ONA SUPERTRANS' and that 'the girls carried them in their bags ready for any boys who wanted them.'69 The Ministry of Supply were keen to encourage further expansion of such machines across the country but the adoption of a byelaw prohibiting contraceptive sales from slot machines by 90 per cent of local authorities across the country by 1951 meant that this method of distribution did not again reappear on the country's high streets. 70 However, by the time the contraceptive pill had been introduced on the market, householders, both in the traditional sense and the youth alike, could obtain sheaths, alongside Aspirin and other products, from machines in the male toilets of cafes and licensed public houses, which is where they largely remain today.

Conclusion

⁶⁸ 'Contraceptives Bill: Official Report,' House of Commons, 16 December 1938, UK Parliamentary Papers, 2428; Birth control and Contraceptives, 1932-1949, 3AMS/B/09/06, AMSH.

⁶⁹ Capitals in original. 'Contraceptives Bill: Official Report,' House of Commons, 16 December 1938, UK Parliamentary Papers, 2426; Basil L Q. Henriques and Cynthia Colville, 'Temptation to Youth,' *Times*, 12 September 1949, *51484*, 5; J. Dillon Maccarthy, 'Temptation to Youth,' *Times*, 15 September 1949, *51487*, 5.

⁷⁰ Sale of Contraceptives from Automatic Machines, *Daily Telegraph*, 25 October 1949, PC/SHO/1/49, newspaper cuttings 32c, PMC; 'Slot Machines Law Protests – Loopholes Left Say Councils,' *Daily Telegraph*, 31 March 1950, 8; Contraceptives Sales (Vending Machines), House of Commons, 16 April 1964, UK Parliamentary Papers, col 83.

By the introduction of the contraceptive pill in the early 1960s, birth control appliance manufacturers had succeeded in supplying British consumers with many varied products. By 1968, no fewer than 100 million Durex, Prentifs, Prefax and Ona brand name condoms, 95 per cent of which were manufactured by the London Rubber Company, were sold each year and by 1974, more than 200 brand names for sheaths were available in Britain.⁷¹ Yet, such success was not inevitable, nor was it wholesale. Its industrial and commercial foundations – from mass production in manufacturing hubs to vending machine distribution on the high street – were laid in the late nineteenth and early twentieth centuries and gradually allowed a range of consumers all over the country to replace or supplement non-mechanical or homemade methods and appliances with those produced outside the home.

A more complete assessment of the prevalence of contraceptives is possible when historical studies of birth control take seriously the commercialization of birth control appliances, employ a range of methodologies, such as those from analytic bibliography, and combine a wealth and variety of source material, from those already well mined and critiqued by historians, such as Elderton's report, to those which have been chronically neglected, such as trade literature. Certainly when combined, such an approach and wealth of source material offers the medical historian a powerful new analytic tool. Yet, historians focused on different questions, namely the efficacy and the role played by mechanical methods of birth control in fertility decline, may miss this commercial approach, overlook archive material that may seem outside immediate interest, and disregard the significance of this small but growing industry. Such appliances may well have been too statistically

⁷¹ 'Contraceptives Industry,' House of Commons, 24 May 1968, UK Parliamentary Papers, vol. 765 cc1192-8; The Monopoly and Mergers Commission, *Contraceptive Sheaths*, 1974, 7-8.

insignificant to influence fertility rates during this period but their visual presence – in media ranging from mail-order trade catalogues to window displays – not just in London but in urban areas across the country, is enough to suggest the ways in which medical cultures and consumption patterns everywhere were changing. The industry's adoption of promotional and distribution methods attuned to moral concerns over birth control appliances, such as discreet mail-order and an alignment with healthcare products within the hygiene and retail chemist's shop, demonstrates the relevance of product commercialization for even the most delicate of subject matters.

While the broad overview presented here has opened up new avenues of future study of contraceptive commercialization, it has also broadened our knowledge of sites of medical decision making. It is clear that contraceptive consumption patterns were diverse and varied in terms of class, gender and geographic location, but this paper has presented a broad picture of those who made purchasing decisions and where they did so. Certainly, married couples were likely to have made decisions about purchasing birth control appliances within the home, alongside the many commercially manufactured medical goods that became increasingly available. Yet, women of all social classes were also likely individual purchasers of caps and douches obtained from chemists' and department stores and of sheaths disguised as cosmetic powders from mail-order catalogues; men of all social classes purchased sheaths, particularly via mail-order and specialist hygiene shops, and even unmarried adolescents, as typically neglected consumers, made consuming choices, encouraged by window displays and vending machines. Consumption was also spread across all urban areas of England and Wales, and not just in London and the south east, as has typically been assumed.

Variety in purchasing decisions is therefore not something to be swept aside and ignored, but should be further embraced through more detailed comparative case studies, analysis of a variety of evidence and adoption of a range of historical methods. After all, such diversity reflects a more accurate picture of consumption patterns in England and Wales during this period, as an increasing numbers of studies are beginning to recognize. Even within one household, couples might adopt a variety of contraceptive appliances and birth control methods, which changed over time.

Further adoption of this commercial approach and deeper analysis of the commercial infrastructures and surrounding socio-political debates than has been possible in this short paper may thus help to stimulate renewed and more detailed attention towards not only the history of birth control, the reciprocal relationships between the production and consumption, and between the supply and demand of medical goods, but also to illuminate the often neglected but much needed consumer responses to all manner of medical goods and technologies. Indeed, the rise of the retail chemist is one important response to increasing demand for products through which consumers could control and monitor their own health within their home. Far from shrinking during the nineteenth and twentieth centuries then, household medicine operated in parallel with professional medicine. Yet, at the same time, it is important to recognize that contraceptive appliances were not like other medical commodities, despite suppliers' best efforts; they remained morally questionable beyond the 1930s, as protests about shop window displays and vending machines suggest. Contraceptive purchasing decisions therefore continued to be much more discreet than other medical goods. Tracing such decisions provides a challenging but potentially fruitful topic for future study.