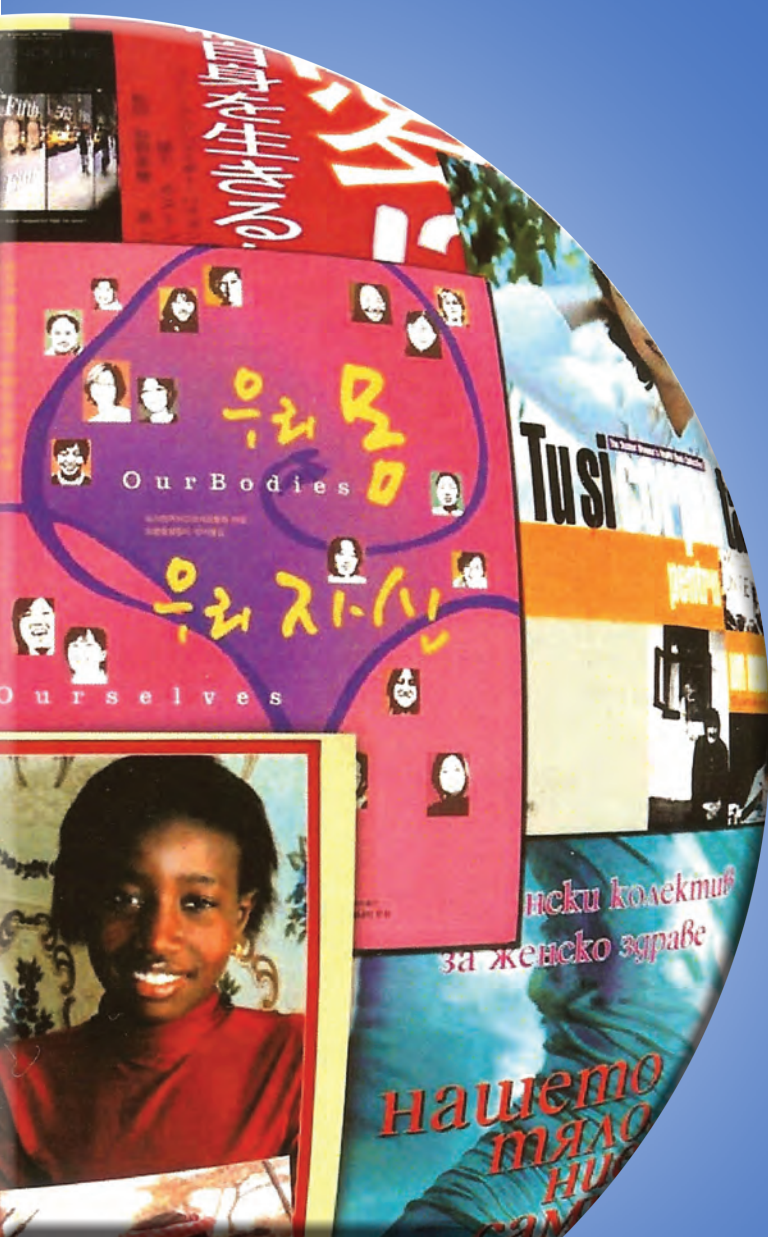


Our Bodies, Ourselves TRANSFORMED WORLDWIDE

A Collection of Prefaces from
Culturally Adapted Translations of
Our Bodies, Ourselves



Compiled by Ayesha Chatterjee

This is more than a collection of prefaces...

It is a journal, a colorful portrait capturing the transformation of *Our Bodies, Ourselves* as women around the world have assimilated it into their lives, giving their cultural adaptations identities that are unique and at the same time deeply entwined with the spirit and vision of the original book.

It is a collage of reflections, in the voices of women who have overcome tremendous barriers to produce health resources in languages and images that are meaningful and essential to women, girls, and men in their community.

It is a tribute to the resilience and courage of women who have coalesced around a single purpose – at times struggling to find common or middle ground – challenged the status quo, and embarked on a journey to inform themselves and their world.

Cultural adaptations of *Our Bodies, Ourselves* address women's health and sexuality within the social, cultural, political, and religious contexts that shape women's lives. They draw from individual and collective knowledge to bring basic health information, in accessible and simple formats, to communities that need it most. However, regardless of their form – from books, e-books, posters, and training booklets to content for digital media, such as mobile phones, grassroots peer education and motorcycle campaigns – they use *Our Bodies, Ourselves* as a starting point to fill a deep void in women's health knowledge.

With cultural adaptations of *Our Bodies, Ourselves* available in 23 languages around the world, and another 8 underway, we are continually humbled by the resonating need for its content and message, and its almost unfailing ability to mold to multiple yet distinctive realities. It is this enduring capacity to honor individual difference – so readers take from it what they need – as well as transform and connect with diverse audiences, that sets *Our Bodies, Ourselves* apart and makes it something more than “just a book.”

Yet, for most of our partners, even though the original book provides a stepping stone, the process of translating and adapting it is an ambitious and new undertaking. It is a journey fraught with challenges that rarely have quick and easy solutions, and triumphs that bring them closer to a deeply held vision and goal. And at the end of this eventful, demanding, and perhaps life-altering journey, writing a preface is one way to reflect and share with each other and us a deeper appreciation of a process and product; to build institutional memory and celebrate their contribution towards women's health literacy in their community; to recognize their imprint on a global call for social action and change; to capture their experiences so other women who undertake similar journeys learn and feel encouraged; to inspire all of us with their creative energy and audacity.

Sally Whelan and Ayesha Chatterjee

Global Translation/Adaptation Program
Our Bodies Ourselves

Our Bodies, Ourselves

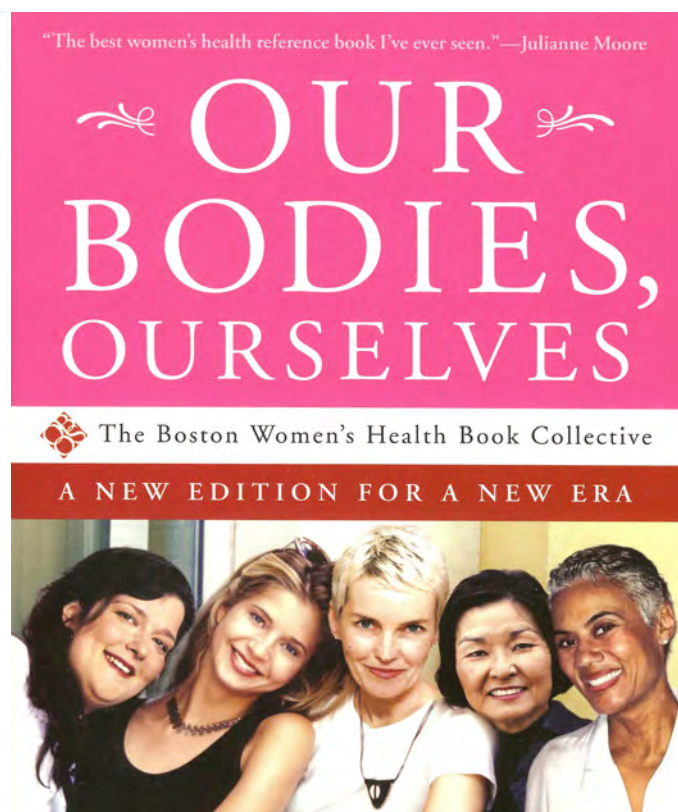
A New Edition for a New Era

Welcome to *Our Bodies, Ourselves*, the classic book about women's health and sexuality that is written by women, for women. Since its first newsprint version in 1970, *Our Bodies, Ourselves* has been created and revised by women speaking from our own research and experiences about our bodies, health, and medical care.

This edition reflects the work of more than four hundred women – and quite a few men – who share both personal stories and health information based on the latest scientific evidence. The result is a new *Our Bodies, Ourselves*, rewritten for today's realities.

Changing Times, Continuing Need

Much has changed since the late 1960s and early 1970s, when the group that became the Boston Women's Health Book Collective first started to meet. Abortion is now legal (though threatened), and birth control options have increased; the AIDS epidemic has made safer sex a subject of public discussion; and lesbian and gay couples have the right to marry, at least in Massachusetts. Many groups, including an active movement of women with breast cancer, have drawn new attention to environmental factors in disease and to the politics of research funding. More health care providers are women now, and doctors and medical researchers of both sexes tend to be more sensitive to and knowledgeable about women's concerns than doctors of an earlier generation. Information on women's health is widely available.



Our Bodies, Ourselves
United States of America
2005

But the need for a book like *Our Bodies, Ourselves* remains. Too much medical care still focuses on the expensive “solutions” of drugs and surgery, rather than on prevention or management strategies such as good food and exercise, a clean environment, and safe working conditions. Too often, women’s life experiences, from childbirth to menopause, are seen as diseases to be treated rather than natural, healthy processes that sometimes have problems. And too many of us still don’t have the knowledge and resources to participate effectively in maintaining our health.

Self-Help and Beyond

This book offers individual women the tools to take care of ourselves, from eating well and becoming more physically active to learning how to cope better with stress. It provides helpful, clear information about substance abuse, heart disease, eating disorders, and many other conditions that women confront. A new chapter, “Navigating the Health Care System,” provides practical advice for getting the best care possible.

Yet *Our Bodies, Ourselves* is about more than self-help. Many aspects of our health, from workplace safety to sexual violence, are often beyond an individual’s control. Therefore, this book addresses the political, economic and social factors that affect our health and medical care: the industrial plants spewing pollution, the fast-food giants pushing junk food, the pharmaceutical companies unethically promoting drugs, the government dismantling our social safety net. We can change these conditions only by working together, sharing our stories with other women and advocating for policies and programs that protect the health of our families, our communities, and the world.

More on the Web

With this edition, the print version of *Our Bodies, Ourselves* is for the first time accompanied by a website that provides more detailed and updated information, longer resource lists, and links to other helpful sites. This new feature was developed to respond to the rapidly changing world of women’s health.

Throughout the book, you will see references to the companion website, which can be found at www.ourbodiesourselves.org. To find the material referenced, type the title of the website material, or the corresponding number code, into the “Search” box. For example, if you read, “For more information, see ‘Women and Alcohol Use’ (W6) on the companion website www.ourbodiesourselves.org,” you can type in either Women and Alcohol Use or W6. You can also select a particular chapter to see all of its website content.

You will also come across many references to the “Resources,” comprehensive lists of trustworthy organizations, books, and other materials related to the many topics covered in this book. You can find the top ten resources for each chapter at the back of the book. Longer lists, including web links, are posted on the companion website.

Many Women’s Voices

Despite some changes, this edition retains one of the distinctive traits of *Our Bodies, Ourselves*: the use of real women’s voices. These first-person stories, set off in italicized passages throughout the text, have been collected from conversations, letters, and e-mail messages that spanned the globe.

Diverse voices are also embodied in the all-embracing “we” of this book. When the Boston Women’s Health Book Collective first wrote about “our bodies,” the “we” reflected the white, mostly middle-class, well-educated background of many of its founding members. But as more diverse women have helped revise the book, the “we” has grown to include a greater variety of experiences.

Making Changes Together

No matter who we are, we often need both information and support to make healthy changes. If we are trying to get more exercise, for example, inviting a friend to share a morning walk may make it more fun. Similarly, if we are feeling overwhelmed as new mothers, we may want to join a play group with other families in the neighborhood. The same principle extends to

issues beyond our individual well-being: By working together, we can bring about change and improve the health of our communities.

This new edition of *Our Bodies, Ourselves* serves as a first step on such paths, offering information, stories, and resources so that we can take care of ourselves – and one another.

Heather Stephenson, managing editor

For the Boston Women's Health Book Collective

July 2004, Boston

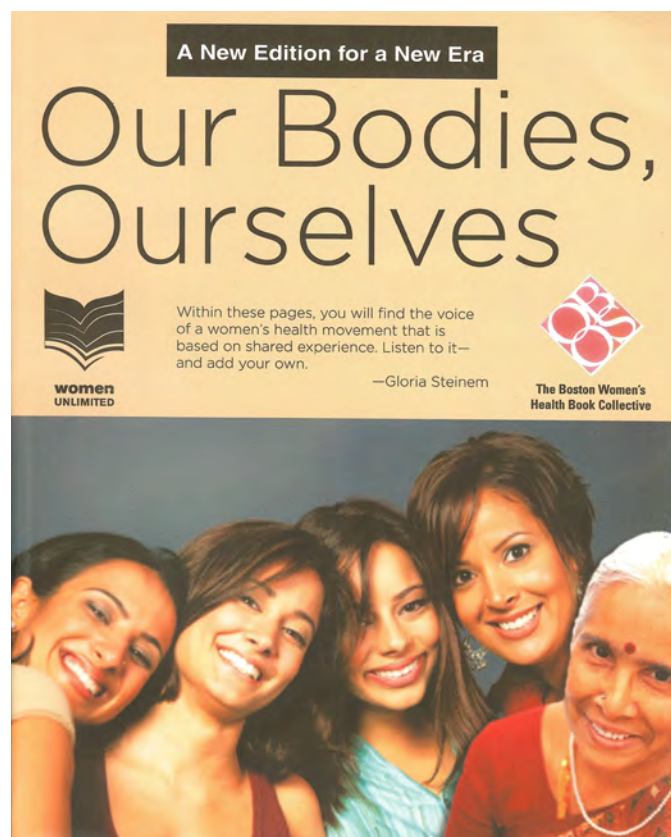
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Our Bodies, Ourselves

Our Bodies, Ourselves, first published in a newsprint version by the Boston Women's Health Book Collective in 1970, has become the definitive health resource for women, used as much by individual women looking for health information as by health rights activists and feminists. The book published in 1984 evolved from the work of this group of women whose own experience led them to realize the extent to which the misinformation and disinformation purveyed by the medical establishment was eroding women's right to health and undermining their control over their bodies. The 2005 edition was one of many major revisions of *Our Bodies, Ourselves* and the eighth edition of the book, and included several rewritten sections to reflect current realities.

Despite the impressive work done by the women's health movement in South Asia and the volume of learning and training materials on women's health, there is a serious dearth of material for the educated and aware woman who is looking for accurate information on health and sexuality. Non-technical materials are focused almost completely on pregnancy and parenthood or on specific medical conditions, while materials on broader issues almost always tend to discourage the non-technical reader. Self-help materials on the other hand, while engagingly written, are open to criticism for the scientific accuracy of the information provided.

The women's health movement has also been struggling with the challenge of taking women's health issues to a broader audience, to inspire and empower women across



Women Unlimited
An Associate of Kali for Women
India
2008

classes and backgrounds to become engaged in the political aspects of sustaining good health for themselves and their communities.

Our Bodies, Ourselves has filled this niche for two generations of South Asian feminists, providing basic information on the body and its workings, a political analysis of the health-care system and practical and usable information on self-care and self-help.

This South Asian edition of *Our Bodies, Ourselves*, while not departing from the basic structure and content of the original, contains updated and contextual information relevant to women in this region. Specific sections of the text have been amended, keeping in mind the Indian and South Asian contexts, as well as campaigns carried out by the women's movement on local issues such as invasive contraception; AIDS; domestic violence; etc. Additions and replacements have been compiled by an editor with experience and credibility on the issue of women's health, and reviewed by key members of the women's health movement.

This edition consequently, seeks to introduce some key ideas into the public discourse on women's health. Women comprise the largest segment of health workers, health consumers, and health decision-makers for their families and communities, but are under-represented in positions of influence and policy-making. The current pathology and disease-oriented approach to normal life events (birthing, menopause, aging, death) is not an effective way to consider health or structure a health system. Women have a right to know about controversies surrounding medical practices and issues on which there is consensus among medical experts and they can become their own health experts. By making our women readers and users of this book into well-informed health consumers, we hope that they can become catalysts for social change.

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Мы сами и наше тело Ourselves and Our Bodies

We Want to Walk Side by Side

As a physician in Russia, one thing always surprises me – the contrast between the high intellectual and spiritual level of Russian women, their familiarity with world literature and art, and at the same time their complete absence of knowledge about their own bodies, physiology and psychology. It is this ignorance that causes a lot of health problems, including a significantly high level of abortions in Russia, many sexually transmitted infections and the withholding of love from newborns because of unwanted pregnancies. There are still unreasonably higher rates of maternal mortality, of deaths as a result of breast cancer, as compared with those rates in industrially developed countries. Publishing the book *Ourselves and Our Bodies* in Russian provides a unique opportunity to fill the gap that exists in the Russian literature market and to help women learn a rational approach to their bodies, emotions and capabilities.

This book consists of 32 chapters organized into 8 parts. The first part, "Caring About Yourself" includes the information necessary, first of all, to question a self-consciousness which causes much needless suffering when women reject their natural external looks, such as body weight, shape of the nose and other bodily characteristics. This chapter pays a lot of attention to the importance of a good diet and adequate physical activity. It reviews the effects on women's health of psychotropic substances like cigarettes, alcohol and drugs, the environment, adverse emotional conditions, as well as gender-based violence. All these problems are universal for all



Women's Health in St. Petersburg

Russia

2007

women on earth and can be solved only through knowledge and working together to change conditions.

The second part of the book, "Interpersonal Relationships and Sexuality," mostly innovative and new to still patriarchal Russia, is often difficult to discuss in modern and quite conservative America. It sounds strange, but it is in the USA itself where efforts are made to ban abortions, where physicians and clinics are being harassed. This section criticizes sexism and homophobia. Its goals are to protect the right of each person to freely choose her sexual orientation and gender identification. In our Russian society, the word "gender" is interpreted in a somewhat different context related to the social specificities of sexual roles. Nevertheless, the American perspective can be interesting to a reader, and offers a different interpretation of a word as yet not well-defined, which can be helpful for its future life in the Russian language. This section certainly will be important and interesting for human rights organizations and simply for people who are different because of their sexual orientation and identification.

The section of the book entitled "Sexual Health" includes four exceptionally important chapters. It presents in an understandable, practical, and useful way, the anatomy and physiology of women's sexual system, ways to achieve safe sex and the prevention of sexually transmitted infections (STIs). It addresses problems of HIV and AIDS in current America and in the world. It takes into consideration the fact that Russians are infected at a very young age, and that there is a high morbidity rate among teenagers. While adapting this book we also included specific information about the possibilities of receiving information and treatment in Saint-Petersburg youth clinics.

The section "Reproductive Choice" is devoted to a conscious and comprehensive assessment of a family's decision about birth or adoption, assessing the financial, psychological and social problems related to these decisions. Unfortunately, our constant discussions and the unstable condition of the Russian adoption system did not allow us to adapt this part

of the book to our conditions. Yes, there is a real need to improve the adoption situation in America too. Nevertheless, this chapter can be quite useful for our legislators who work in the field of adoption, guardianship and temporary adoption of children. The same section of the book presents modern methods of contraception and practical methods for protecting women's reproductive rights related to the birth of a wanted child. Unfortunately in Russia we still hear in the media news about cases of young mothers killing their newborns, and the number of abandoned children in our country is shamefully high.

"Childbirth" is a large section. It reviews in detail, chapter by chapter, not only a description of pregnancy, delivery and the first year of motherhood, but also ways to support parents in case of loss of the newborn; it also helps women and men to deal with cases of infertility. The authors approach the modern methods of artificial fertilization quite critically, and frankly show all of its positive aspects in helping with fertilization as well as its negative aspects, related primarily to the unpredictability of short and long-term results and effects.

The next section of the book, "Growing Older," consists of two big chapters – "Middle Age and Menopause" and "Our Older Years." By critiquing the myth of the "miracle" of hormone replacement therapy during menopause, the authors quite fairly state that a healthy life style, reasonable diet, physical activity and getting rid of unhealthy habits such as smoking, alcohol and drugs are more important for maintaining youth and beauty than the most current hormone therapy. The latter can not only be useless, but risky, leading to early strokes and infarctions.

Yes, it is well worth it to read and re-read this book in order not to become victims of aggressive unethical advertisements announcing "the newest" achievements of medicine. There are many such examples in the book, all of them strikingly relevant for Russian women who are pressured by such advertising and conditioned to consider every published word as the Truth.

There are many older women. Although the average length of life of Americans lags behind many developed countries like France, Japan and Scandinavian countries, American women do live for a long time. The chapter "Our Older Years" relates not only to the medical issues of old people, but it advocates for the social support they need. Here, we can learn from American pragmatism! Although the authors are, as always, very critical about public health in the USA and want to improve it, we need to accept that the system of medical-social support for the American elderly is worth a careful study. We need to adopt it. While translating we did not want to compare it with the Russian system, which still leaves old women to die, their pensions only half the amount of men's.

The next largest section of the book is entirely devoted to the treatment of the most typical and important diseases. It is not a guideline for health providers, but a guide for laypeople and especially women. We have many medical textbooks, but manuals for patients are unreasonably few. At the same time we have so many questions – how to choose the most effective diagnostic test among a wide variety of tests strongly advertised but often unsafe and useless? How to protect our rights as patients to participate in the choice of treatment method? – it is our bodies that they are going to cut, irradiate or expose to other aggressive therapies, often with adverse complications. What questions do we need to ask of ourselves and our physicians before deciding about radical methods of treatment? What is necessary to know? How not to enter into dangerous conflict with physicians while protecting our own interests? The book gives interestingly wise, specific and professional answers to these questions. In Russia a physician is habitually viewed as an absolute authority, almost as a God, with whom discussing or disputing any problems of diagnosis and treatment is considered not only unacceptable, but impossible. At the same time, especially now that we have entered a market economy, the rights of patients for full information and informed choice is ensured not only by the "Declaration of Patients' Rights," which Russia

signed a long time ago, but also by the fact that patients largely pay for their health services out of their own pockets. Besides, physicians may have financial interests causing them to push for a particular medical diagnosis and treatment while serving a firm or company. The book emphasizes that acquiring informed consent is a process, and not simply a token signature on a piece of paper. You need to not only listen and read, but understand what is offered and what is necessary.

The last section of the book is called "Knowledge is Power." Here the current public health system in the USA is toughly and even cruelly criticized. The section also demonstrates that the social reforms of the last decades in the light of further globalization and the enrichment of international corporations lead to the deterioration of public health. The data from 2003 shows that 45 million Americans do not have guaranteed medical care. The newborn mortality is higher than, for example, in Cuba. Debt because of medical treatments become the leading cause of bankruptcy in the USA. In 1999, "approximately half of all bankruptcies were related to payments for medical care, and for certain groups, especially women with many children and for the elderly, these bankruptcies are very characteristic."

The whole book is written in the first person plural, which has a special impact on the reader. In reality the authors have a right to do that, as the book reflects the voices of many different women – women doctors, scientists, housewives, young and old, white and black, heterosexuals and lesbians, married and single, wanting partners and wanting to remain single. It is always possible to say "we."

While working on adapting this book, we tried to maintain the wonderful style of writing and to give Russian readers the opportunity to learn the opinion of American women about their physical, mental and social health. In reality, we incorporated only some data related to Russian women, carefully trying not to change the general style of writing. Meantime, we thoroughly examined all the pharmaceutical

links, and then the names of medications are represented in accordance with the 1999 edition of "Medication Registry of Russia." Some clarifications are also included for anatomical names, in accordance with international anatomical terminology. Several statements in the book are overemphasized, others are understressed, and the pictures and photos have been changed. This was done after considering our cultural and traditional specifications and after a detailed discussion by our Russian authors' group. We hope that these inserts and changes will not alter the overall impression of the wonderful book, which has been designed, republished and improved over a period of 35 years. In most people's opinion, the book is one of the best sources in the world for women to obtain information about their health, their sexuality and their reproductive needs.

This book is exceptionally important also for doctors if they want to learn an empathetic and highly professional attitude towards women's health. It provides an example of a holistic, comprehensive approach to women's health. In the preamble to the bylaws of the World Health Organization, it is written: "Health is a state of complete physical, spiritual and social well-being, and not merely absence of diseases and physical deficiencies." Exactly these factors comprise the foundation for the health of individuals, nations and whole societies.

Although the authors always emphasize that the book is written for women and by women, and we can add that the text is translated and adapted also exceptionally by women, it does not reject or diminish the role of men in health care and in society. Yes, we are different biologically and there should be a special approach to our health and to our needs, but it doesn't mean that we are better or worse than men. We do not want to follow, we don't want to lead – we want to walk side by side.

Lidia Simbirtseva

Professor, Doctor of Medical Sciences

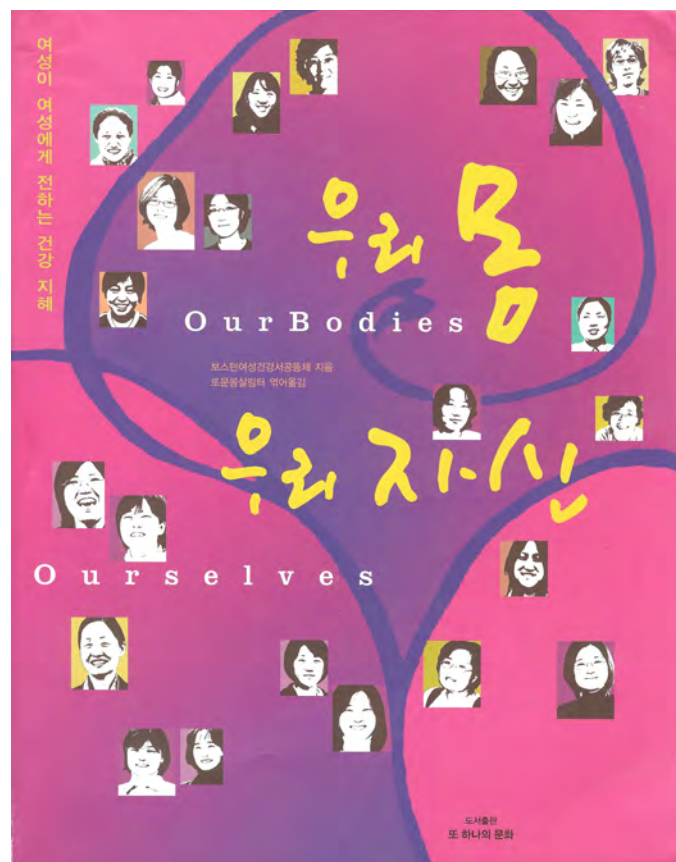
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우리 몸 우리 자신!

Our Bodies, Ourselves

It was more than 10 years ago that Alternative Culture Publishing Co, decided to publish the Korean edition of *Our Bodies, Ourselves*, and it took 4 years for translation and adaptation. Short of human and monetary resources, the company had delayed the publication for years. One day, several women anxious to translate the book proposed its publication to the company. They were the activists at Korea Sexual Violence Relief Center, who had met *Our Bodies, Ourselves* somewhere else and had deep impression. Soon they began to introduce the book, and persuade other feminists to participate in its translation. As a result, in winter 1991, the team for Korean edition of *Our Bodies, Ourselves*, consisting of about 30 volunteers, was organized. Each one took charge of one chapter, and in case the chapter was quite long, two co-worked for one chapter. It took almost a year to finish the translation. In January 2003, the team for editing and adaptation was formed, comprised of some members of the translation team, several women editors, and two Women's Studies graduate students. They had meetings once or twice a month for one and half years, reviewing and correcting the draft. They also refined the sentences and collected resources in Korean language. For 6 months, from November 2004, the editor at the company and feminist translators elaborated the draft again, and completed the Resources.

Doing this, we came to think about what was a "politically correct" translation. We paid attention not to use male-centered, ethnocentric language(s) or the terms which take non-disabled, heterosexual married couple as the norm when



Alternative Culture Publishing Co.

Korea

2005

translating into Korean. We chose rather unfamiliar words than commonly used ones based on the gender stereotypes or male-centered sexuality.

After selecting Korean terms, we cut out what was considered not to be useful for Korea readers because of quite different context from that of the U.S. For example, some sections focused on racism and the colored were cut out. However, some parts about American social systems, laws, and statistics survived, if they seemed to serve as references or models. We tried to put South Korean statistics instead of those of the U.S. or along with them, with their sources noted .

We inserted “in the U.S.” in many places, where readers could be mixed up. And when adapting and including Korean statistics, we clarified it by adding “in Korea.” But some chapters treating the situations far from South Korean women’s experiences, were translated in full, not being cut out. For example, what were in Chapter 10 on homosexuality and chapter 17 on abortion were not familiar to Korean readers, but we thought American laws, systems, and history of movements would be helpful to South Korean women. We noted it on the first pages of the chapters.

Other chapters such as 2, 7, and 8 contain relatively much information from Korean sources. Since women’s movements against sexual violence and domestic violence and ecological movements by women in South Korea had gained strength, and obtained excellent results, we had a lot to add about our experiences.

Much of Chapters 25 and 27 were deleted. The medical system of the U.S. which are treated in Chapter 25 are totally different from that of Korea. In that respect, we judged much of the chapter not to be helpful to Korean readers. In chapter 27, we cut out various movements in the U.S. and added Korean movements.

In Chapter 13 and 18, some parts of the 8th edition of *Our Bodies, Ourselves* (2005) were included, which treated new contraceptives and biotechnology.

We decided to omit references and some footnotes about sources in English in order to make the book accessible to general readers. Instead, at the end of every chapter, we listed Korean books, films, websites, and contact numbers. We also introduced English websites about women’s health at the end of chapter 27. They were selected from the updated list in the 8th edition of *Our Bodies, Ourselves*.

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འཕྲོད་བསྟེན་བཟང་པོ། མི་ཆེ་བཟང་པོ།

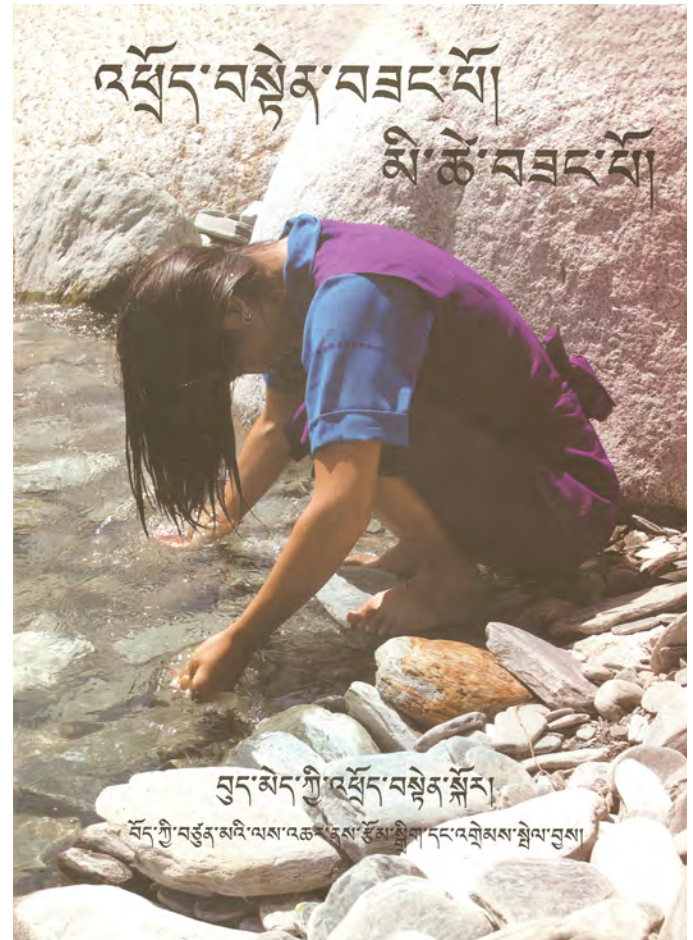
Healthy Body, Healthy Mind

This book has been made possible by the commitment and determined effort of many different people. It was written to fill a perceived vacuum – a lack of easily accessible information for Tibetan women on their bodies and related health issues. We hope that it will empower Tibetan women by helping them understand how their bodies work, how better to look after their own health, how to recognize symptoms of common gynecological problems, and by giving details of common medical treatments available.

The book was developed under the auspices of the Tibetan Nuns Project, based at Dolma Ling Nunnery, Sidhpur, Himachal Pradesh, and its development was managed by the Co-Directors of the Tibetan Nuns Project, Dr. Elizabeth Napper and the Ven. Lobsang Dechen.

The project was initiated by Marlies Bosch who not only organized the funding for the project but also produced the first draft of a health book for women based on the American publication *Our Bodies, Ourselves*, and took photographs especially for use in the book.

The first draft was then edited, revised and extended by Josephine Gibson. Tsering Lhamo, at that time working for the Tibetan Government in Exile Department of Health, provided advice and valuable input on local conditions, health problems and treatments available. Anie Greig, nurse and midwife, provided helpful comments. Sally Whelan and others at *Our Bodies Ourselves* and Marlies Bosch read the English manuscript and provided useful comments and refinements, which were then incorporated into the text.



Tibetan Nuns Project

India

2005

The book was translated into Tibetan by Karma Dorje. This was an immense task as many English medical terms and concepts do not have a direct correlation in Tibetan. It was Doctor Qusar Namgyal who provided expert knowledge of medical words and technical terms in Tibetan. During the translation process, there were frequent meetings between Karma Dorje, Tsering Lhamo and Josephine Gibson to discuss the translation and iron out any difficulties. The Tibetan was further checked by Wangdu Tsering.

Nyima-la volunteered his services to do the layout for publication of the Tibetan text, which included spending countless hours preparing the illustrations.

Finally, we would like to express our immense gratitude to the Global Fund for Women whose sponsorship made this book possible.

We hope that this book will be of benefit to all Tibetan speaking women.

We dedicate any merit gained from this project to the long life of His Holiness the Fourteenth Dalai Lama, Tenzin Gyatso, whose boundless love and compassion towards his people and to all suffering sentient beings is a constant inspiration.

...We hope (this book) will empower Tibetan women by helping them understand how their bodies work, how better to look after their own health, how to recognize symptoms of common gynecological problems, and by giving details of common medical treatments available...

Notre Corps, Notre Santé Our Bodies, Our Health

The Book

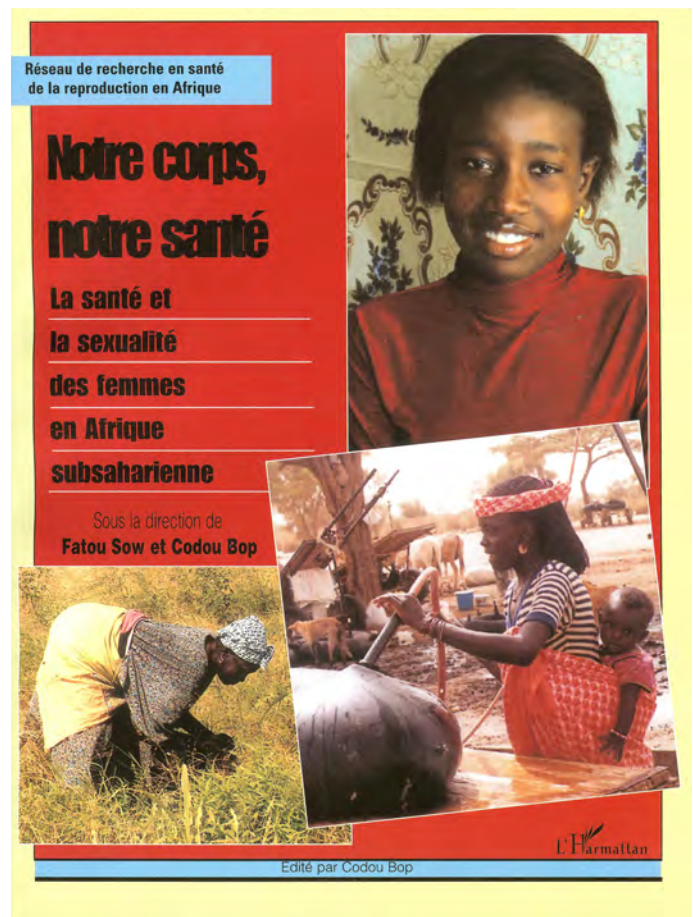
Notre Corps, Notre Santé is not an adaptation of *Our Bodies, Ourselves*, it is an original work. It needs to be said that the authors were inspired by *Our Bodies, Ourselves*, and from the beginning they received support from the Boston Collective, that sent a representative to the first workshop aiming at outlining the book. The group still continues to get support from the Boston Collective

The main objective of the book is to bring African women knowledge that will enable them to appropriate their body, take care of it and like it. In addition, the economic, political and cultural context within which African women live, having a huge impact on women's health, the authors put emphasis on it. Hence, an important part of the book is about the representations men and women have about women's bodies, health and sexuality, about the way women's bodies are used, taken care of, dressed, and/or violated.

The Content of the Book

It is made of 28 chapters that are as follows:

(1) Socio-Economic Context of health in Africa, (2) the Girl Child, (3) the Adolescent, (4) Woman's Bodies (5) Menstruation, (6) Sexuality, (7) Pregnancy, (8) Delivery and Post-partum, (9) Abortion, (10) Sterility, (11) Family Planning, (12) Sexually Transmitted Disease and Infection, (13) HIV/AIDS, (14) Women's Cancers, (15) Menopause, (16) Most Frequent Illnesses in Africa, (17) Traditional Medicine, (18) Mental



Groupe de Recherche sur Les Femmes et Les Lois au Senegal

Senegal

2004

Health, (19) Nutrition, (20) How to Take Care of Oneself, (21) Women in Society, (22) Prostitution, (23) Violence against Women, (24) Female Genital Mutilations, (25) Women living with a Handicap, (26) Health and Environment, (27) Social Perceptions about Our Body, (28) General Conclusion

Processes

In the beginning, the book was managed by the Réseau de Recherche en Santé de la Reproduction en Afrique (RESAR) that was an initiative funded by the Population Council in 1990. The members of the network are specialists coming from various areas of the field of population studies. Some women members of RESAR who have a more feminist perspective about women's health and who work in a women's group located in Dakar, Senegal (Groupe de Recherche sur les Femmes et les Lois) took over to get the book finished. The women's group received support from the Boston Collective for getting the book illustrated and printed.

Coordination

In the beginning the book was coordinated by a Program Officer appointed by the Population Council, but since GREFELS took over it has been coordinated by members of the group, who also are members of RESAR. For example the President of GREFELS is a board member in RESAR.

A consultant was appointed by the Population Council with the task of writing a concept paper that was discussed and amended. From the concept paper, the number and content of the chapters of the book were decided. According to their area, the members of RESAR were requested to write one chapter. Decision making never became a problem because a scientific committee was set up from the beginning to make collective decisions.

When the book was completed the scientific committee had a week long retreat to look at the whole content of the book, recommend corrections or improvements.

Problems

Aside from getting funds, the main problem encountered was the heterogeneity of the team involved in editing the book. It included men and women from very different backgrounds, visions, and countries: some were medical doctors, others sociologists, others biologists, others historians, and others journalists. Some came from West Africa and some from Central Africa. Despite this variety of background that is enriching, the difference in perspective (some members of the team being radical feminists, others very conservative and who wanted the book to be similar to the medical books used at the faculty of medicine) still was a big problem.

Another minor problem was to have homogeneous content written in clear and accessible language. Because some authors were high level medical doctors and professors of medicine and used to write in a "jargon" that is not accessible to anyone, it was the task of the editor to rewrite "problematic" chapters. But she was requested to submit the corrected version to the author for him/her to agree to the new content.

Many chapters were also written by the coordinator.

Translation Issues

Since the book is meant for a Francophone audience and the articles are written in French by Francophone authors, there is no translation problem. But due to the high level of illiteracy the language is still a problem, because the large majority of women do not speak French. Because of the large number of African languages in the region, the fact that these languages are not written and are still oral, and because French is the working language in West and Central Africa, the book is in French. To try to overcome the issue of language, the authors are looking at other possibilities such as translating some useful chapters into local languages, but for this we need funding. Another solution is to put a large number of pictures and illustrations and "comics"; in French it is called "bandes dessinées"

Reception of the Book

The book is not yet distributed. The evaluation will not concern only one country; it will concern all French-speaking countries in West and Central Africa as well as African migrant women in Europe and the US.

Due to the language problem, the intention of the RESAR and GREFELS is to get the book used by paralegal, health care providers and leaders in grass-roots associations who are literate. Those people will be sent questionnaires that will help in the evaluation of the book.

...The main objective of the book is to bring African women knowledge that will enable them to appropriate their body, take care of it, and like it...

Nasze ciała, nasze życie

Our Bodies, Our Lives

I first saw *Our Bodies, Ourselves* in 1991. In that year Linda Gordon – an American writer – came to Poland to visit the Women’s Section of the trade union “Solidarity”. She brought along a pile of publications. The book caught my attention immediately. Never before had I seen a medical book written with the pronoun “we” – first person plural. In that case the book was not written by an anonymous man, who had been taught at school that there is a medical problem called menstruation. The book was written by women who know their own bodies. I was stunned by their style: simple, easy, womanlike, feminist, presenting women as a subject, not an object. Plainly speaking, the book makes women important. It was my wish that Polish women could have access to a book like this. After three years of work my wish came true.

But the real story began much earlier, in the spring of 1969. There was a women’s conference in Boston and a group of women met in a small workshop devoted to health issues. For the first time they talked openly about their life and health. They were united by anger. They were angry at physicians and the incomprehensible system of health care. The conference was still going on when the women decided they would meet again on a regular basis to work for changes in health care.

During the following summer they met in a summer school of women’s health. In fall they started organizing meetings all over the US. There were gatherings for women in schools, kindergartens, churches and private apartments – anywhere they could meet and talk for free. The amount of publications



Network of East-West Women – Polska

Poland

2004

resulting from the meetings was snowballing. They started with descriptions of particular case studies conducted by the authors, collected pieces of information from women's magazines and feminist publications.

And this was how the huge book started – ultimately consisting of 1000 pages. A few dozen women worked on it, all united by their doubts about the existing health care and its poor support for women. But they believed that there is a big potential and capability in women themselves, in their solidarity and exchange of experiences. They also pointed to the fact that health and quality of life are influenced not only by medicine, but also by other factors, psychological and spiritual, often undervalued by physicians.

Publication of the book made a lot of splash in America. Thousands of women wrote to the Boston Women's Health Book Collective expressing their admiration and appreciation. They also pointed to some weaknesses: "I looked for information on in vitro fertilization and found nothing there" "My side effects after hormonal contraceptives were quite different from what you described." Some others could not find any information on sex life for people with disabilities or support groups for women who are alcoholics.

New editions would be more complete and comprehensive, thanks to suggestions from the readers. The latest US edition, which will be published in 2005, comprises things like genetic experiments and euthanasia, discussed only now.

Our Polish edition arrives at the most appropriate time. The reform of our health care seems not to serve the population well. Not only patients, but also medical professionals, are disoriented and confused about the rules of the new system. Moreover, market economy brought about new threats. Powerful pharmaceutical companies encourage physicians to prescribe pricey drugs, not always to the benefit of the patients. There are numerous new private clinics, which charge a lot for their services whose quality may be pathetically low. At the same time it is difficult to be well informed about the

rules on how to use the public sector of health care. The public sector often provides only very basic services. It takes months of waiting to get some tests prescribed by specialists. True, there are women's organizations supporting women who had to undergo mastectomy or for breast-feeding mothers, but they are all based in big cities. Thus, they are not accessible to masses of women. Circulation of information and exchange of experience are limited to some women only, and only a minority of them. Others have no chance to participate in support groups as there is no such thing in their towns or villages. Information or advice on the phone, legal or psychological assistance are not always readily available either.

That is why the value of the book is immense. It is of vital importance for Polish women to know where and how to get help in case they are sick, what questions they should ask when talking to a physician, what rights they have as patients. Women need to be aware of their health situation and this will help them choose what is best for them.

The selection of information and texts is deliberate and it aims at strengthening the position of women in their contacts with health care professionals. The book tells them explicitly they have the RIGHT to demand the information they need. It is also important to point to the readers that their active participation in the treatment is necessary.

In the US the feminist movement initiated changes in the health care back in the 70s. It was then when women started to talk aloud about the lack of appropriate information, abuses in medical procedures, lack of safe contraceptives. They rejected treating natural phenomena like pregnancy, birth, confinement after childbirth and menopause as diseases.

There is no social movement in Poland working to improve health care and probably it will not get started any time soon. You can easily count organizations or support groups for women, and fingers of one hand will suffice for that. *Our Bodies, Ourselves* can fill the gap and inspire changes.

American women wrote their book from their perspective including social and economic context in the US and human rights situation there. In our version we refer to our Polish reality. Hence, *Our Bodies, Ourselves* is more than a medical manual for women. This book is capable of being a true support for all of us in our tough times. It can inspire changes in some particular cases, but hopefully it can also initiate a broader movement for improvement of health care for women.

Many of us live some sort of “double lives”. We do not express disapproval of moral and legal bans and we learn to live omitting them. This enforced moral hiatus is the result of our fears. We are afraid to be publicly condemned. *Our Bodies, Ourselves* suggests an alternative to this attitude through discussing women’s issues openly and in a way which is socially involved. This book pertains not just to our bodies. It is a book about the world around us.

Malgorzata Tarasiewicz

Translation by Adam Jagusiak

...There is no social movement in Poland working to improve health care and probably it will not get started any time soon. You can easily count organizations or support groups for women, and fingers of one hand will suffice for that. "Our Bodies, Ourselves" can fill the gap and inspire changes...

Tu Si Corpul Tau Pentru un Nou Secol: O carte despre si pentru femei

Our Bodies Ourselves For The New Century: A Book By and For Women

The book which is written by a group of American women researchers, encyclopedically and effectively, all the aspects of a woman's life: the most important stages of physical development, the physiology of sexuality, the peculiarities of heterosexual and homosexual relationships, methods and ways of contraception, pregnancy, child-bearing, diseases and possibilities of their prevention, problems related to the period of the postmenopause and the old age. Also, they reflect the historical struggle of the women in USA for the gender equality.

The Romanian issue is substantially synthesized and adapted; we omitted some passages and images that are irrelevant for the realities of our country, as well as the whole bibliography, which can be consulted in the original version of the book.

Many thanks to the Boston Women's Health Book Collective, SOROS Foundation - Moldova, the National Women's Studies and Information Center from Moldova, especially to Sally Whelan, Antonina Sârbu, Galina Precup for their special contribution to publishing.

The medical institutions benefit by cuts in price.

In order to lead a really healthy and wealthy lifestyle, men and women should be, first of all, aware and well informed about what their bodies mean, which are the physiological and psychological peculiarities of the human organism, what it needs to be in a right and comfortable state, etc. The



*National Women's Studies and Information Center
Romania
2002*

lack of information (really good and authentic information) is one of the most complex and frequent problems of our post-soviet Moldavian society, which is still passing through a difficult period of transition. Women (especially women living in the rural areas) who are not yet aware of their rights and opportunities are the first to become victims of their own ignorance, which doesn't often depend on them. They are eager to learn more and more, but they have no possibilities and sufficient resources to consult.

Taking into account the crucial value of informing and training women on medical aspects, the importance of personal prevention when dealing with symptoms of every potential disease, the need and usefulness of a book "for women and about them" is undoubted in a society that is "thirsty" of being informed. Women feel a vital necessity to have a genuine source, which is concomitantly a scientifically based one (containing true information and real data about their body), and a very simple one, written in a language accessible for common people. The idea to bring *Our Bodies, Ourselves* to our women was firstly based on this reason. Another point is that well thought and well-organized books are very rare here in Moldova; as to the existing ones, sometimes they are not available, because women don't know about their publication.

The primary goal of our team, when working on the translation and adaptation of *Our Bodies, Ourselves* consisted in fitting it to our reality, in order to make the book really accessible and useful for Moldavian women.

We tried to keep the authenticity of the book, but however, there were performed some modifications (not within the content, but in the structure of the original issue). In comparison with the English version, ours is more medically focused – when working on the adaptation and translation we "were playing" according to our society's requests and needs. We didn't want to sacrifice quality for quantity, by introducing information which will be not used by our national women (see the explanations below).

After a detailed examination of the original issue of *Our Bodies, Ourselves*, the editor decided to omit some paragraphs describing problems, diseases, solutions proposed and realities that are not characteristic to our society, which is very different from the American one.

For making the book closer to our national reader, to make the women see themselves in the book, or at least, see an image similar to theirs, we excluded some photographs. As America is a multicultural country, there are women of different races and nationalities, and the images included in the original book highlights this variety. Thus, for the reason we mentioned above, we left in the Romanian version only the photos of white women who look like ours. As you see, the cover of the book was designed according to our realities, including images of Moldovan women.

The English issue contains descriptions of some histories, events related by international women, and passages from acts and documents adopted in USA, as well. As to our version, they excluded some of them, which are specific enough to your American society and have no tangencies with ours.

Another change made – the exclusion of the chapter "Introduction to Online Women's Health Resources". Unfortunately, in Moldova, especially in the rural area, there are a very restrained number of women who can use or have a personal computer, and of such ones who possess abilities of navigating throughout Internet. This is the unique, but motivated reason of the fact we considered evident the futility of publishing this introduction.

After each chapter of English *Our Bodies, Ourselves* there are Notes and Resources to be used by interested women. It is great! The reader can get informed about various informative materials in the domain: books, periodicals, articles, audiovisual materials, programs, on-line resources etc., and if necessary, to consult them as additional info. All these resources are not available in our country, because they do not exist here! To our regret, we had to renounce publishing

the final part of each chapter. But women who have larger possibilities (to use Internet, for example) can resort to the English issue, which is always accessible at NWSIC's library. (Note: at the meeting focused on the books presentation, the general sponsor of the edition – SOROS Foundation – Moldova decided to offer gratis both *Our Bodies, Ourselves* and *Sacrificing Ourselves for Love* to each women's NGO. For the moment, all organizations and individuals who have the books know about the existence of the original English issue in our Center, and have the opportunity to consult information excluded in the Romanian one.)

The last change operated – we omitted two final chapters: The Politics of Women and Health, and Organizing for change: U.S.A. The reason consists in the fact we prefer a book with a medically focused subject to a book with a political theme. That is why no problems and questions regarding the political orientation and choice arose, when working on synthesizing and adapting *Our Bodies, Ourselves*.

To our surprise and, of course, to our happiness we have no problems and difficulties when working on the translation and adaptation of the book. The publisher – who possesses the sense of responsibility – worked hard, and our collaboration was very pleasant and fruitful (the really pretty and elegant Romanian issue proves this fact, doesn't it?).

As to the methods and techniques used in translation and adaptation of the book, they were not so special to be mentioned. The translator – she is a woman, too! – a good professional (she has already experience in translating literature on medical issues) did her best to come to such a brilliant final result. We consider that a big role in assuring a high quality to the translation of a specialized book (*Our Bodies, Ourselves* is one of them) is the rich experience in a given domain of the translator who is performing the work. More the translator knows about the subject he will be working on, more qualitative will be the translated variant of the book.

As we mentioned, every local and national women's NGO from Moldova was given a book – this is one of the first steps in spreading information amongst women all over the country. The book is a valued tool in organizing trainings and seminars for women, in teaching schoolgirls physiological and psychological aspects of their body, in individual consulting and finding advice and possible solutions for troubles related to woman's health, to special situations and diseases.

After the meeting of presentation of *Our Bodies, Ourselves* we arrived to the conclusion that it would be very useful to extend the content of the book by additional information regarding our Moldavian society and woman's health condition. There were proposed two possible ways of performing this work: first, to add supplementary information to each chapter, second, to make a general appendix to the whole edition. There are a great variety of subjects to be developed in a future issue of our national *Our Bodies, Ourselves* – a book dedicated to every woman living in any Moldavian locality.

...Women feel a vital necessity to have a genuine source, which is concomitantly a scientifically based one...and a very simple one, written in a language accessible for common people. The idea to bring "Our Bodies, Ourselves" to our women was firstly based on this reason...

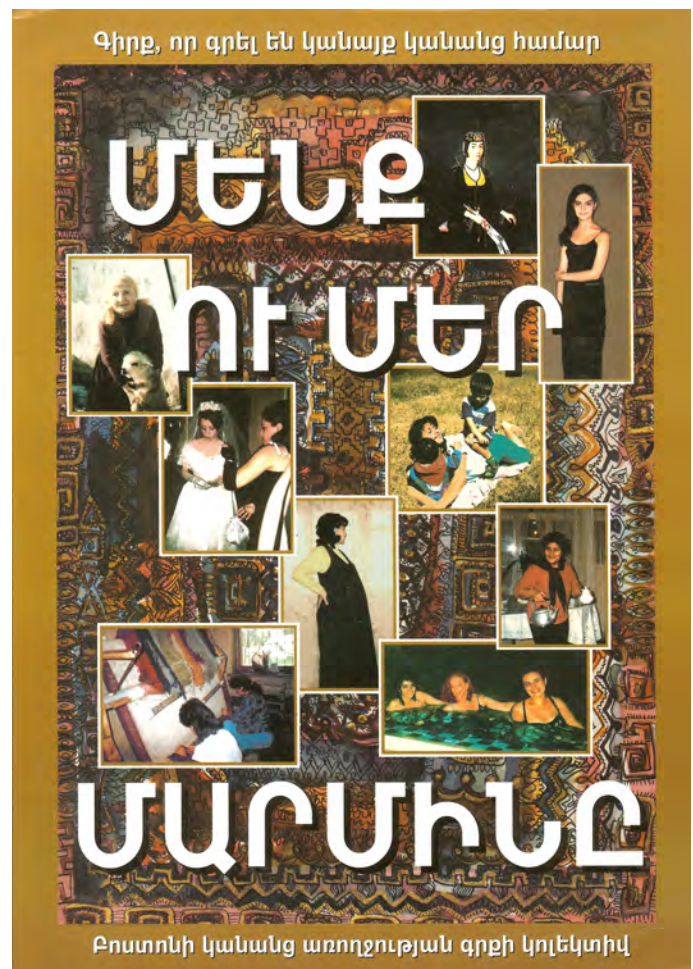
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Our Body and We

This translation and adaptation of the book *Our Bodies, Ourselves for the New Century* into the Armenian language is based on the latest English edition. It summarizes the achievements and approaches of traditional practices and modern medical science that relate to women's lives and health, and are useful for them. The book provides women, from their own perspectives, basic information about their bodies and sexual and reproductive health.

Women carry on their shoulders the overall responsibility for production of children, and therefore they have many and various problems that need to be resolved. Although these problems come from the very depths of the centuries, they still are not entirely resolved. Today they are still of high priority, and worrisome, even in developed countries and cultures, including the United States.

Some decades ago, as now, US women lacked information on such issues as painful menses, sexuality, child delivery, birth control, as well as abortion...In favor of women, and with the intention to find answers to many questions which concerned them, a group of women in Boston undertook the implementation of a very interesting program. In the aim of obtaining information they decided to make a list of all the midwives-gynecologists in the Boston area who took care of women. But surprisingly, the number of those doctors was very small and many did not want to share their knowledge. As for the disclosed information, it was strictly professional and not understandable for the ordinary reader.



Charitable Foundation on Population Development

Armenia

2001

This was the reason that the Boston women decided to gather information on reproductive health themselves. They soon realized that they had initiated a very important activity, the implementation of which also requires great research ability. During the discussions around the material gathered, the women in that group started to talk about their personal experiences and practices, which was another source of information.

Thus, the group generalized all the material gathered which was needed for the implementation of teaching programs on the “body” in the different institutions of the community, in a short period of time. Further, on the basis of this material the book *Our Bodies, Ourselves* was created. This was the beginning of the activity of the “Health Book Collective of Boston Women”.

The Armenian reader will probably be also interested in what questions the American women have focused on during the last thirty years. Let’s try to clarify some of them. It is known that the beneficiaries of the health services are mainly women. Even when they are mostly healthy, they apply to doctors for the regulation of birth, pregnancy and delivery. In addition, women live longer than men; therefore, they have more problems related to chronic diseases and functional disturbances which require special attention by the society and the family.

As everywhere, also in the United States, the woman is considered “an intermediary of the family health” who takes care of the children, the elderly, the husband, the relatives, as well as the surrounding people...However, in the USA which is one of the leading countries in the development of health and education policy, the role of women is insignificant, although they make up the majority in these systems. Currently their number does not exceed 10% in the management positions of these systems. American women are affected by gender, racial, age, sexual orientation and other kinds of discrimination. This discrimination is more obvious in the medical institutions, where they are exposed

to disrespect. Some elderly, black, fat and disabled women are more vulnerable in this respect.

Many of the women receive unnecessary medical interference. For example, assignment of drugs in large doses to relax the nervous system, doubtful hormonal treatment, unmotivated Caesarian section and removal of the uterus. The managers of the health system often neglect the importance of preventive and primary health care.

The current phase of the development of new medical technologies and medical care often includes such untested drugs and surgical interferences, which present danger for the health of the women. This is in the list of permanent issues of “Health book collective of Boston women”.

It should be noted that team work is characteristic in the creation of the original book, as well as for its translations in different languages. For example, more than 100 people have worked on the last, i.e. Japanese version (1998) as there was a demand to adapt the book to the Japanese traditions, as well as language features. In this respect we had also some difficulties as in different states of the United States, for people speak in different dialects and have different traditions. Many expressions can not be understandable for them. Censorship is also a problem. The chapters referring to certain groups of sexual minorities (for example, homosexuals) are not allowed everywhere for the broad audiences of readers, although these issues are currently subject to arguments. Despite all this, the demand for new publications is essential from the cognitive point of view.

The Armenian version of *Our Bodies, Ourselves*, which is currently presented to the reader, is relevant to the wishes of women worldwide, which derives from the requirements and ideas which suggested in the gender conferences and included in the international documents.

Greeting the Armenian translation of the book we should mention that one of its sources was the International Association of Armenian Women (AIWA) whose objective is

to unite all the Armenian women of the world in the name of protection of women's rights. In the struggle for their survival, Armenians have spread all over the world. Wherever they go, they try to maintain the cultural values of their motherland. Four generations that have seen the Genocide of 1915 and lived in foreign lands have not lost their awareness of their origins even now, and the International Association of Armenian Women has its great role in it. This organization approved the activity of the Boston group and decided to implement the publication of the famous book *Our Body and We* devoted to the fundamentals of the women greatly supporting it.

The Ministry of Health also encouraged the issuance of the Armenian translation of the book. The fact that the preface to the book has been written by the Deputy Minister of Health, Ms. Nune Mangasaryan, evidences the concern of the Ministry for the women and families of the republic.

The pre-history of the publication of the book is rather long. At the beginning of the 1990s, Doctor Seda Khachartyan, together with her daughter Anahit Tovmasyan and deputy of the National Assembly Hranush Hakobyan, initiated the Armenian translation of this book. In the aim of assisting the program, Caroline Mougar from the United States allocated a small grant to the initiating group, which included the following: Liliana Edilyan, Nora Melikyan, Jasmen Harutjunyan, Sophia Kalantaryan, Hasmik Movsisyan, Marine Sahakyan, Bela Sarukhanyan, Armine Shaboyan, Armine Simonyan, Larisa Yedigaryova, Artsrun Hakobyan and Andranik Mkrtchyan. Many of them worked free of charge, overcoming the difficulties of the blockade of Armenia and the energy crisis. Unfortunately, due to the lack of financial resources, the work remained unfinished.

Some years later, upon the initiative of the Director of Huys publishing house, honored journalist of the Republic of Armenia, head of the media department of Armenpress, Ms. Nora Melikyan, the work restarted. This time, in the aim of publishing the book *Our Body and We: For the new century* in

Armenian, the publishing house applied to the Health Book Collective of Boston Women asking for technical and financial assistance. They also submitted an application to the Open Society Institute (Soros Foundation) for receiving a grant.

I would like to mention the great investment of the Armenian Charity Fund of the Development of Population in the publication of the book in Armenian in response to the request of the publishing house Huys, that provided them with an office, free computers and stationery.

The Director of this Fund, qualified specialist in the sphere of reproductive health, doctor-gynecologist Mary Khachikyan, personally participated in the editing activities of the book on a voluntary basis. She united a large group of different specialists, which, together with the publishing network Artavazd, jointly supported Huys in all the stages of the publication of the book.

It should be noted that the old translation could not be used any more because the 1998 edition of *Our Bodies, Ourselves* had been rewritten, with new chapters and new approaches to the fundamentals added. Thus, a lot of material from the work done previously could not be used. Health Book Collective of Boston Women suggested creating a new working group which would include experienced translators, editors, doctors-specialists, artists-designers and other professionals.

I would like to express my special gratitude to the author of many scientific books and brochures, doctor Jasmine Harutjunyan, and to Editor Alexander Khachikyan, who made a significant input in the implementation of this publication.

It is worth mentioning the names of the translators – Hrachya Tatevyan, Zohrab Sargsyan, Hasmik Yernknyan, Lusine Khachatryan, Gegham Aslibekyan, Cristine Barseghyan, Aida Sahakyan, Armine Avagyan, Anahit Khachatryan, Hasmik Tevosyan, Ruzanna Sarukhanyan, Anna Grigoryan, Lusine Dadayan, Astghik Hakobyan, Astghik Avagyan – as well as the doctors Liana Galstyan, Lusine Harutjunyan, Ruzan Avetisyan,

artist Maro Sargsyan, computer operators Anna Hovhanissyan and Mary Gharibyan, proof-reader Mardgik Melkonyan.

As many of the ideas in the English publication do not comply with the Armenian national traditions, the publishers have not included some of the chapters of the book, did not translate certain issues and shortened several chapters.

Finally, I would like to thank the numerous Armenian women for placing the book squarely in the context of their own lives, without which it would have been difficult to make this valuable book, written by American women, relevant to Armenian readers. Many of them are from both urban and rural areas and find this book very necessary as they currently face difficulties in getting information on gender and reproductive health issues. They have evaluated what the American women tell about their experience and conclusions.

Some words about the sponsors of the Armenian publication of the book. In response to the letter-request of the publishing house Huys, Health Book Collective of Boston Women sought funding for the project, applying to different charity organizations and individuals. In 1999 we succeeded in obtaining a definite sum of money, for which I would like to thank the Lincy Foundation, especially Ellen and Francis Sargsyan and Iva Metsoryan.

On behalf of my American and Armenian colleagues I would like to express my deep gratitude, especially to a woman from New York who preferred to remain anonymous. This woman's donation helped the Armenian publishers and allowed to prepare the first 1000 copies of the book in 2001. The quality of the translation has been controlled and was assessed also by the Open Society Institute. As a result the publishing house Huys received an OSI grant that allowed us to print an additional 1000 copies.

We would like to thank also the publishing house Tigran Mets and publishing cooperative Printex for the implementation of printing and publication of the book on a high level.

To our Armenian sisters with kind regards from the Health Book Collective of Boston Women.

Judy Norsigian

Co-author of the book "Our body and we",

One of the founders of the "Health book collective of Boston women," and Program Director

USEFUL MANUAL FOR WOMEN

We represent to the reader the publication of the first Armenian large book *Our Body and We*. This book is about the different issues related to the health of women, first authored by the famous group, Health Book Collective of Boston Women. It has been issued regularly with changes, additions and new achievements in medicine, as well as personal experiences and practices of many women including new publications...

This kind of book is very important for millions of women, as well as for Armenian women. Perfect health is possible in cases where not only the qualified and permanent medical care is available but also the existence of comprehensive and necessary information on health protection. Such a manual of encyclopedical nature is the book *Our Body and We*. Armenian women have a great need for this information..

In Armenia at present, migration of population has been increased, there are a great number of vulnerable groups, the surrounding environment has deteriorated, the birth rate has decreased, the danger of dissemination of sexual infections (especially AIDS) has increased, and the indicators of maternal and infant mortality and infertility have also increased. As the result of global market relations, regular use of health services is not available to all. Under such conditions, giving information to the population through publications, newspapers, and TV and radio programs is very important.

The book *Our Body and We* will help women understand their bodies and physical and social requirements correctly through the absolutely appropriate medical-scientific and

social formulations. Having this book in their hands, Armenian women can go through it every moment and follow its advice, which include a broad range of subjects, starting from sexual development up to pregnancy, delivery, child care and many other issues, enabling women to make informed decisions on issues related to their health.

It should be mentioned that in the current stage of medical technologies and medical care, sometimes untested drugs and surgical interferences are used which present serious dangers to women's health. Representing these new technologies and treatment, the authors of the book warn that their impact is not been clarified yet...

The book *Our Body and We* is written in an understandable way which is clear to all women regardless of age and educational level. A woman can see herself in this book and compare her past experience with others in different situations. Sometimes the reader can read about approaches, viewpoints, spiritual experience and descriptions that she had not paid attention to before.

On behalf of *Our Body and We*, the Armenian reader gains a lot of much needed information. Therefore, it is worth mentioning the grateful work that has been performed by the Armenian staff, i.e. translators, editors, doctors-consultants and others. Maintaining the original, they tried to overcome many difficulties, thinking hard about the professional terms and concepts which would make the book accessible for the reader.

Good luck with the Armenian publication of the book *Our Body and We*. We hope that Armenian women will find the answers to many questions related to different spheres of life in this book.

Nune Mangasaryan

RoA Deputy Minister of Health

The Armenian publishing staff of the valuable book *Our Body and We* especially thanks our Armenian colleague Judy

Norsigyan who has been the initiator and the sponsor of this work. She is the representative of the fourth generation of the Genocide 1915. Living far from her motherland, by the call of the ancestors and by her soul, she is connected with her country and tries to assist in all ways in the health maintenance of her sisters. Judy Norsigyan is one of the founders of the Health Book Collective of Boston Women and one of the authors of the book *Our Body and We*. Her family comes from Western Armenia, Kharberd, Shapingarahisar originally, but due to fate she was born in North America. She graduated from Harvard University and has a Bachelor's Degree. Since her college years she has been involved in publication activity related to the issues of reproductive health of women. She gives lectures in medical institutions. In her words, she has...become a bridge between society and health workers. Let's remember Judy Norsigyan's mother, Ms. Agnes, who had a great role in connecting her daughter living in the American environment with her national background, maintaining the love of her grandfathers in her soul.

Her husband, a famous doctor-sociologist, taught at Brandeis University for 36 years. He is an author of many books under the title "Social autobiography," protected the disabled and was one of the soldiers struggling against the wrong treatment of them... Many thanks to Judy Norsigyan and to other women from the Armenian Diaspora who provided moral and financial assistance for the implementation of this difficult program. We wish them health and new successes in their gender movement, humanitarian and patriotic endeavors.

...A woman can see herself in this book and compare her past experience with others in different situations...

Нашето тяло, Ние самите Our Body, Ourselves

With great satisfaction we present *Our Bodies, Ourselves* to Bulgarian readers. The history of this book is intriguing. It began more than 30 years ago when a group of women, representatives of the emerging women's movement in the USA, established the Boston Women's Health Book Collective. Its goals were to provide education and advocacy and it was established due to the awareness of the extreme difficulties in finding accessible and understandable information on women's health and bodies. The first meetings and discussions started at the Armenian Church and the first activities were on a volunteer basis; nowadays the organization is known all over the world and is currently located at Boston University. Thus began a movement which has been provoking great interest in the last 30 years.

In 1969 Boston Women's Health Book Collective organized a one-day conference at Emanuel College on the topic of "Women and Their Bodies". This event and the appearance of the women's movement at this time had huge political significance. The conference was focused on women's reproductive health including abortions, which at that time are banned in the USA. The topic of women's bodies generally was taboo in that time context; strictly specialized medical texts and doctors' consultancies being the only sources of advice on these issues. The idea of creating a free course on the topic of "Women and Their Bodies", which would gradually fill this gap, emerged during the conference. The materials for the course included not only medical, anatomic and medication information, but also the personal



Women's Health Initiative in Bulgaria
Bulgaria
2001

experience of the women participating. The presence of personal experiences and the vivid knowledge of the women themselves was a central moment in these materials and in the whole ideology of the Collective that prepared and wrote the book.

The materials prepared for the course turned out to be extremely valuable and afterwards took on life of their own. In 1970 they were published in the form of a book, which at that point consisted of 138 pages and was entitled *Women and Their Bodies*. It was sold for 30 cents in order to be easily accessible to all who needed it. This principle of affordability continues to be valid nowadays and the authors insist on its being applied to all translated editions. 250,000 books were sold out for a very short period of time without any formal advertising. As the initial total print turned out to be inadequate for the demand, the prosperous publishing house Simon and Schuster offered to take up the further publishing of the book and the second edition appeared in 1973. The Boston Women's Health Book Collective again managed to negotiate a relatively low selling price and also offered the book to a large number of non-governmental organizations at an additional discount.

Through the years the book has been transformed and the first impression is that its size has increased considerably – the last edition, which came out in 1998 entitled *Our Bodies, Ourselves For The New Century*, consists of 780 pages. This enlargement is a result of the constant enrichment of the book with supplementary and contemporary medical information. But what is even more important is the addition of texts, which present the personal experience and correspond to the needs of a larger number of women, including women from different races and ethnicities. With its huge size the book is not expected to be read in one sitting, rather it has turned into an encyclopedic source for obtaining information on a specific issue. A woman can turn to it when she is troubled by a problem concerning her body. However, the book is not an anatomy and physiology textbook. Everyone who opens

its pages will become aware that women's bodies are not presented as an object of systematic and impartial medical study – they speak in a myriad voices of women who have been through first menstruations, conceptions, pregnancies, abortions, childbirths, adoptions, infertility, aging – all the events marking every woman's life.

The presence of personal stories is neither accidental nor simply an allurement for readers' interest – authors' ideology is to convince readers that medical knowledge and expertise can be understood only through the personal, experienced, felt and spoken of event and change. Thus the double-speaking of the text – once in the language of medicine and once again in the language of women's experiences – makes the book close and intimate to its readers.

After tracing its history and the importance of the reader-book dialogue, let us say a few words about the authors of *Our Bodies, Ourselves*. Because of the fact that the book is open to its readers, the authors' collective expands with every new edition exceeding the impressive number of 100. The book as a whole is written by women professionals in different fields while only a very small part of them are doctors. The larger part are health workers, women's health movement activists, patients' rights advocates, drug consumers, consultants, women with practical experience in medical treatment even without formal medical education. Due to the Boston Women's Health Book Collective's location in an area rich with health institutions, part of the authors and editors are practicing health workers from Harvard University Medical Faculty, Massachusetts University, and one of the chief editors is a sociologist at Brandies University. In the book the authors speak as "we" – which can be understood as all women round the world, "we" – the authors of a chapter, "we" – the women of a specific group – women with disabilities, women victims of violence, women from minorities, etc. Thus the identification of "we" opens the book to its future authors who are ready to share their life experience and knowledge, not less valuable than the university medical science. Following the "by

women for women" principle the book is not only a medical encyclopedia but also a significant companion and a partner for privacy in minutes of joy, sorrow and despair.

In every edition the scope of presented topics and issues broadens. While the first editions are focused on women's reproductive health (pregnancy, childbirth, postpartum, abortions, contraception, etc.), the next include the subjects of menopause, food, psychotherapy, alternative medicine, violence against women, alcohol, tobacco and drug use and misuse – all of them subjects that are linked directly to the holistic vision of woman and her health. In the last edition there is even a separate chapter on the use of the Internet for obtaining health information.

From its very beginning *Our Bodies, Ourselves* is not only a medical information source but also a political program of the women's health movement. This ideology is the red thread that runs through the whole book and is strongly synthesized in the last Chapters 25 and 26. An element of this ideology is the conviction that "knowledge is power" and thus by having knowledge women become active and critical users of health information, consultations and services in medical institutions. Another element is the belief in the necessity of political activism, lobbying and advocacy aimed at developing health legislature that adequately takes into account women's rights. An example in this respect is the role of the women's health movement in influencing the legalization of abortions in the USA, in the removal of dangerous contraceptive pills and other medications from the market, in providing state subsidies for medical research on breast cancer, etc. On the other side, authors warn us about the forced medicalization of women's health under the pressure of the medical and pharmaceutical industry in the USA. One of its consequences is the implementation of millions of unnecessary and harmful procedures. All these are openly presented in the book in a dialogical tone that provokes discussion.

What is the situation like today? Beginning as a revolutionary, radical publication of a volunteer organization, often

forbidden because of the open opposition to the taboo on discussing women's bodies, *Our Bodies, Ourselves* today is an institution with a significant international impact. The book has been through 5 editions in the USA, translated in 19 languages and has sold 4 million copies. It is of special interest to look at its international life.

The first translated edition of the book was published in 1972 in Japan where the third edition came out recently. Afterwards the book was published in Italian, in English – separately in England and Australia, in French and in other European languages. In 1976 the Spanish version came out, chiefly to correspond to the needs of the Spanish speaking community in the USA. Recently the second Spanish edition appeared which is almost a newly written book. While the first edition is a direct translation of the American text, the second has continued to resonate with the original book but has been planted more firmly in the context of Latin American women's problems and culture. The authors of the Spanish version realized that the direct translation of the American book did not meet with an enthusiastic response in Latin America and even among the Latin Americans in the USA. For example, the American context is more individually focused, while the Latin American – on family and community mutual help. There are other differences that are also taken into consideration – such as the fact that abortions are illegal in most of the countries in Latin America. Thus the authors undertake the significant project, which continued for 10 years, to write a book close to their readers – it is entitled *Nuestros Cuerpos, Nuestras Vidas* and includes stories and photographs of women from South America.

In China the publication of a direct translation in 1998 met with serious government opposition because of the contradiction between the book's message for a woman's right to control her body and the Chinese State policy for birth control. In order to be published it was turned into a purely medical text and the ideological elements were removed. However, an unofficial version was also put into circulation. All copies of the first

edition sold out in 20 days, two additional prints were made afterwards. Currently a new version has been prepared and it is more seriously adapted to the needs of Chinese women. A transformed and consistent with Islam version was published in Egypt. Topics that had been considered inapplicable were removed and others, such as the topic of female circumcision as a form of violence were added. Currently 13 projects for translating and publishing of *Our Bodies, Ourselves* are being carried out – such as the second Russian edition, and also Polish, Serbian, and Armenian versions.

The examples above illustrate a basic principle in offering the book for translation and distribution in other languages, which is again carried out through the dialogical and collaborative tone characteristic of the book and its ideology. The authors consign the copyright to their foreign colleagues for a symbolic price and understand the term “copyright” quite freely. They insist on adapting the book in a way that it will make it maximally useful in the specific context even if some radical changes are to be made. At the same time they provide consultation based on the experience of other collectives that have translated the book.

The first Bulgarian edition of *Our Bodies, Ourselves* is a translated and adapted version of the fifth – and last – edition of the original book. As a whole the Bulgarian version follows the authentic contents and presents all chapters included in the last edition of the original. The efforts of editors from the Women’s Health Initiative in Bulgaria who prepared this book were focused not only on presenting a translation with the necessary for the purpose abridging of texts that describe in detail medications and health practices known only in the US, but also on providing supplementary materials written by Bulgarian professionals. Thus 11 chapters of the book were adapted with materials describing the situation in Bulgarian society. These are Chapter 2 - Food, Chapter 3 - Alcohol, Tobacco and Other Mood-Altering Drugs, Chapter 5 - Holistic Health and Healing, Chapter 6 - Our Emotional Well-Being: Psychotherapy in Context, Chapter 7 - Environmental and

Occupational Health, Chapter 8 - Violence Against Women, Chapter 13 - Birth Control, Chapter 14 - Sexually Transmitted Diseases, Chapter 15 - HIV, AIDS and Women, Chapter 17 - Abortion and Chapter 26 - The Global Politics of Women and Health. Readers can find additional texts either at the end of each chapter or as footnotes. Because of their specialized terminology, these chapters as well as those with additional medical terminology have been consulted with professionals in the respective areas.

In this adapted version of the book we have also included a list of Bulgarian NGOs active in the field of health and human rights. In this list, which is possibly not complete, we have included all organizations that volunteered to become a part of this important informational resource. We have also included the information on on-line health resources, which the readers can find in the Chapter: Women’s Health Information on the Internet.

The translated and adapted version of *Our Bodies, Ourselves* in Bulgarian undoubtedly provokes the questions: who are its readers and how it will find a place in the context of Bulgarian society in the beginning of 21st century? We are convinced that the book’s size, balanced tone of medical information and multiple sources cited by the authors in each chapter will find a wide audience and will be a valuable reference book for doctors and health workers. And once again, we would like to underline that it is not only medical information but also knowledge and self-knowledge that are power, as the authors point out. We hope that Bulgarian readers will resonate with the political messages in this book, seen in the critical pathos towards the American health care system, which limits the access of many social groups to quality medical help, mainly the poor and disabled. In Bulgarian society today, with the health care reform and stratification processes, these critiques can be a useful warning about creating conditions for unequal health service for people belonging to different social, ethnic, age and gender groups. On the other hand, the threat of the negative sides of the medicalization of women’s

bodies in the American reality, of which the authors warn us, is less relevant to the situation of health services in Bulgaria. In this respect it is quite on the contrary here – Bulgarian people do not suffer from excessive medical control but need more health care, medicine and competent observation and help. The authors' criticism needs to be adapted to our reality, in a way that makes us realize that medicalization, of course, can be a possible threat for us also, as well as for every society where commercialization principles guide the health care system.

Finally, we think that the book will fascinate its readers with the humane pathos arising from every page. We are accustomed to thinking that our health is in doctors' hands and in health care system but they are in our hands too, the authors say, because it is created and guarded by us each day, by our knowledge, attitude and care. And knowledge without love and belief is not possible. That is why this book teaches us to love, to enjoy, to appreciate and not be ashamed of our bodies, gifted with the power to create new life and to renew the human race. Be sensitive to the symptoms of your bodies; enjoy them, do not take the top models' bodies which you see in magazines to be your ideals, be proud of your pregnancies and childbirths; don't be ashamed of your sexual life and sexual partner choice; suffer, grieve for abortions, children, relatives and lost friends, accept the aging processes – don't be afraid of these things happening inside you and through you. These are the book's messages that we hope will be accepted by Bulgarian readers.

We would like to thank all who in the past two years have helped us to realize our idea to have the bestseller *Our Bodies, Ourselves* speak in Bulgarian. Thanks to the extremely precise translation of Kornelia Slavova who made the English text accessible to Bulgarian readers with high professional skill. Thanks to Dr. Ventsislav Daskalov who ensured the exact translation of the chapters containing medical terminology. Thanks to our consultants, editors and authors – Assistant Professor Dr. Stefka Petrova, Zachari Nikolov, Dr. Peter

Stoyanov, Professor Dr. Bojidar Nikiforov, Dr. Dimiter Kakaikov, Maria Minkova, Marta Dyavolova, Assistant Professor Dr. Krassimira Daskalova, Roumyana Gotseva-Iordanova and specially to Dr. Krassimira Denkova from the Women's Health Initiative in Bulgaria – for their valuable expert supplements, specifications and texts. Thanks to Sociological and Marketing Research Agency Alfa Research and Assistant Professor Dr. Boryana Dimitrova for conducting the interviews with representatives of nongovernmental organizations and also to Diana Nenkova for preparing the list. Thanks to the photographer Maya Munk who enriched the book with interesting pictures during her stay in Bulgaria sponsored by the Fulbright Foundation.

This book would have not been possible without the financial help from the "Women At Risk" Program for translations of the Open Society Institute and without the grant we received from the American foundation Global Fund for Women. They sponsored the publication of the translated and adapted version in Bulgarian. Thanks for the trust and support which we received during these two years of work from Boston Women's Health Book Collective and especially from the Program Coordinator Sally Whelan. Thanks to Colibri Publishers and especially to Jechka Georgieva for their active collaboration in our joint work in preparing this book.

Irina Todorova, Tatyana Kotzeva

Sofia, May 24, 2001

Translated by Leda Avramova

*...This book teaches us to love, to enjoy,
to appreciate, and not be ashamed of our
bodies, gifted with the power to create new
life and renew the human race...*

Naša Tela, Mi

Our Bodies, Ourselves

Our Bodies, Ourselves is a book that we have anticipated for a long time. It is the first published text and the first source of information available in Serbian language that deals with woman, woman's body, and woman's health. It has been written by women and they dedicated to other women. This book should enable us to get to know ourselves, as well as to start exploring ourselves, to discover the possible choices and opportunities for protecting our health. It is not a medically orientated book, but it does put emphasis on women's health by introducing the perspective of what are the things that we can do for ourselves and for each other, all by drawing the strength and the energy from our everyday experience.

The aim of this book is to provide information about women's health, to make the different female experiences 'talk' by making it available for as many women as possible and empowering them to take the full engagement in the care of their bodies and their lives, to encourage women to fight for advancement and progress in the health security system, to support both women and men that are working on the restructuring of the existing health system and the system of medical security in order to create the society in which health will be a right not the luxury and to give way to a society without gender inequity.

For a long time, it has been presumed that men's and women's health differed due to men's and women's biological differences. This perspective defines women's health strictly through the family and the society of the existing culture,



Autonomous Women's Center Against Sexual Violence

Serbia

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through the tradition and the medicine, in which the key decision-makers are men. So far, the concept of women's health has been (and still is) closely related to pregnancy and child-delivery. Most women accept the state of ill health as though it was a prize of a lifetime and consider themselves healthy for as long as it is required by their socially allocated role. Millions of women all around the world live their lives suffering from bad nutrition, chronic conditions of reproductive organs and many other diseases. They tend to neglect the signals that their bodies are sending them until they are no longer able to get up in the morning, perform their everyday duties and look after their families and households.

The knowledge about women's health allows us to better understand women's needs as well as women's fears regarding their needs. The feminists dedicated to the problem of women's health are devoted to the fight demanding that the attitude of treating women as men of a different packaging should cease, for that is definitely something that we are not. It is the reason why it is not sufficient to merely collect the problems regarding women's health and women's health safety, but these problems also need to be further analysed from women's perspective. It is obvious that health is determined by gender, and that the gender discrimination does influence health. The issues such as the male aggression, the poverty and the less-paid jobs, the responsibility pressure brought about the role of a mother and a housewife and so on are all undoubtedly the factors that have a large impact not only on the physical integrity of a woman, but also on the control she exercises over her life, her chance and her right of choice.

The authors of the book *Our Bodies, Ourselves* are women. They are the feminists from the United States of America who, thanks to their enormous energy and devotion to women, approached the task of collecting and writing down the medical facts, the significant information and the necessities drawn from the female experience. This book

treats the concept of woman's health as a continuous process that requires to be constantly worked on and that is indeed constantly worked on. Hence, the text is regularly being updated with new data and modern approaches, which should provide all women with worthwhile information about their bodies, their health and their rights to health safety. Another aim of the book *Our Bodies, Ourselves* is to induce each one of us into the thinking and taking the initiative for active participation in the processes of determining and changing the current reality regarding this issue. The book emerged as a result of the enduring and devoted work of a large number of women from Boston Women's Health Book Collective together their fellows from the medical as well as the non-medical circles. The book had several editions and got translated to a number of international languages.

Summing up their work, the authors wrote: "Being feminists we feel strongly bonded with all women. We appreciate the solidarity that the women from different countries and different environments express when they meet up and when they listen to each other and share their experience. We believe that feminism as a political perspective needs to jump over and by-pass all national boundaries and to devote itself to all kind of problems that affect the lives of women no matter where they are. For the issues like denial of reproductive rights, domestic violence, rape, sexual harassment at work or in the street, racism, sexism, disclaiming of lesbian rights, threats at workplace, economic exploitation, and war horrors do not respect the legal borders of a State.

The translation and edition of this book, that for the first time appears in Serbian language, has been brought about by the activists from five different women's groups. These women invested their enthusiasm, their enormous will and work in order to bring the text closer to the women from this linguistic area. The following women Sunčica Vučaj, Tanja Drobnjak, Milica Minić, Dušanka Vučinić, Isidora Jarić, Slavica Stojanović, Lepa Mladenović, Stanislava Otašević, Tanja Labus, Bobana Macanovič and Violeta Krasnić have tried to give their

contribution by providing translation, editing and technical arrangement of the text, or by supporting the enlargement of knowledge and by encouraging women to bring more security and hope into their lives. We want to generate further reflection and change of attitude, so that the activities and the activism of women may influence and alter the current state of affairs.

We hope that you shall enjoy reading this book and we invite you to call us, write to us and share your experience and participate in the realisation of the following editions of this book, which will allow us women to replace the uncertainty by courage.

And do not forget that women write books like this one and they dedicate them to other women.

Stanislava Otasevic

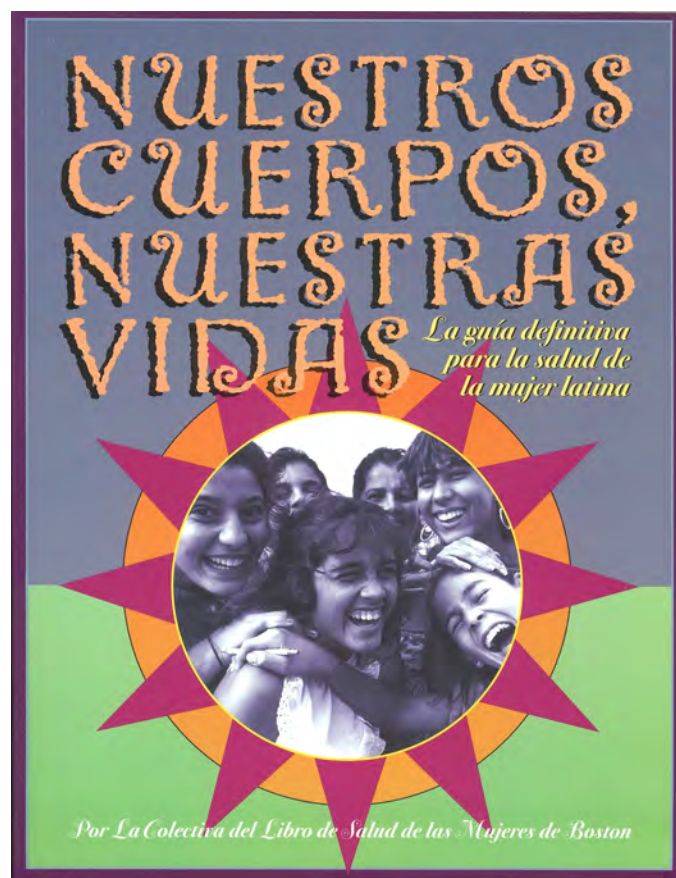
Translated by: Maja Sotra

...“Our Bodies, Ourselves” is a book that we have anticipated for a long time. It is the first published text and the first source of information available in Serbian language that deals with woman, woman’s body, and woman’s health...

Nuestro Cuerpos, Nuestras Vidas Our Bodies, Our Lives

Boston Women's Health Book Collective,
dedicated to women's health: twenty-five years
of achievements

The struggle for justice in our lives as women is intertwined with the daily realities of our bodies. In a world where all types of privileges are offered to men, we are asked to achieve a lot for little in return. Women all over the world, with all our cultural and individual differences, need information, support and political solidarity from other women in order to improve our lives and the lives of our families. In the United States, a political movement specifically of women has achieved significantly promoting women's rights in the areas of work, family and health. In 1969, a group of women in Boston got together to discuss their negative experiences with the health care system at that time. As a result, in 1972, the first book about women's health with a political and feminist focus, *Our Bodies, Ourselves*, was born. The first edition of the book offered us basic information on specific subjects of women's health in a social context. This was a significant step forward for us, since at that time, all the control of our bodies was still given to men, since they were either our doctors or our husbands. The first edition of the book educated us about subjects, many of which we did not dare to speak about, since they were considered taboo. These subjects were a big help for us to understand and control our own sexuality, our decisions on reproduction and contraception methods. *Our Bodies, Ourselves* awoke a series of concerns that culminated



Boston Women's Helth Book Collective

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in more open communication amongst ourselves. This labor of raising awareness that began in 1972 continues today with the latest edition, published in 1998.

As a result of the exchange between women within the United States and their communication with women from other parts of the world, the book continues to expand and change with the goal of including diverse experiences and current medical information that reflect the transformation of political conditions that affect human rights and women's health. For example, when the Boston Women's Health Collective began its work, abortion was still illegal in the United States. Despite the fact that in this country abortion was legalized in 1973, the political struggle to preserve this right continues today, and this process has remained reflected in the subsequent editions of the book. When the book was published for the first time, the medical system, consisting mainly of men, dominated the world of health with almost an absolute authority and power. Today, private for-profit companies, who move billions of dollars, dominate almost entirely the health market. These private organizations, looking for higher earnings, try to control the use of the medical system, limiting access to health services for those groups of people who are the poorest and the most in need. At the same time, we are told that without the biomedical industry, we cannot maintain good health. In reality, 90% of good health indexes depend on our condition in life, such as nutrition, housing, education, economic resources, and social support. In the United States, during the last three decades, an abyss has grown between rich and poor, the majority of the latter group consisting of women with children, African Americans and Latin American women. To maintain a system of life with so much privilege for so few, an economic ideology is exported that glorifies the wealth of few and ignores the misery of many; the work force of legal and illegal immigrants is imported for the most miserable and dangerous jobs, rejecting completely responsibility for their human presence among us. Although we have achieved a lot in the area of women's health, we need more than ever for our voices to

unite to preserve our achievements, to include all women, and to continue fighting for economic and racial justice as an integral part of justice for women.

In the United States, the book in English created a revolution in so far as how women use health resources that they have at their disposal in their daily lives, and in how to use the resources of the medical system, when they are necessary. To link a woman's health to her daily life by the processes of raising awareness and political solidarity, the book satisfies some essential needs, and is enormously popular. Millions of copies have been sold of all the editions, the most recent being the 1998 edition, which has been translated into dozens of languages. Offering the book at a modest price, placing it in such places as women's clinics and public libraries, has broadened access to valuable information about health. The book has brought information and support to many women, and by doing so has helped them to better understand their own health needs and their sexuality, so that they feel in control when they have to make decisions about their own lives. The information in the book, which can be used like an encyclopedia, helps us to better evaluate when it is necessary to go to a doctor and when it is not. When we need to go to a doctor, the information that the book offers, with its voice of respect and support, helps us to better understand and participate actively in health decisions that are so important for our own lives. *Our Bodies, Ourselves* united the feminist movement, raising the awareness of thousands of women about their personal and political rights and creating a movement of consumers that watch out for individual interests against the companies that put our lives in danger for their own financial gain. This book recognizes that for all women, taking care of our loved ones has a very high priority, but in order to take care of others, we must also take care of ourselves.

Despite the fact that this book is written for all women, we recognize that perhaps it might be easier to use for those women who are used to reading books or manuals of this size.

Many of us prefer to learn from our grandmothers, mothers, friends or in support groups, especially when it is about the personal subjects of our lives and bodies. The utility of this book is even greater when it is used as an educational tool about health in community groups dedicated to mutual help, personal growth, raising of political awareness and collective action. There are even educational groups for adult women who have used the English version to teach reading and writing. The book continues to change thanks to the participation of many women who continue sharing their experiences to transform it.

Language and Cultural Context: Of the Translation to the Adaptation

Over the 25 years of its publication, *Our Bodies, Ourselves* has converted into a health encyclopedia for women of the United States. At the same time, it has created the necessity of new versions that reflect the health needs of other countries. We realized that a simple translation does not communicate the cultural and social context where women, their lives, and their health is involved. We have worked with groups of women to create adaptations that contain basic and useful information for any woman in their own country, and at the same time recognize big economic, social and cultural differences that affect the lives and health of women. Ideally, this work of adaptation occurs directly in countries with groups of activists and organized women that transformed the book so that it is useful to them in the actual context of their lives and struggles. This has happened in countries most similar to the United States, such as Germany, and in others as different as Tibet. A women's collective in Egypt adapted the book with the participation of women of all ages and social classes, and including their religious values. They used an Islamic framework, supported by the words of the Koran, to confront sexism in their countries and their religious beliefs. Without an adaptation that recognizes the differences between the lives of the women in their own countries and in the United States, the information based on the experiences of some

North American women limits its utility and can be potentially destructive. Information that does not reflect the conditions of the current lives of women from other countries and their social contexts, implicitly communicates the idea that the reality of North American women is more important than the reality of other women from other parts of the world.

The adaptation in agreement with each culture is necessary in order not to recreate the conditions that made this book necessary, and so that we don't only listen to the voices of North American women, but also to those of the rest of the women of the world.

Our Bodies Our Lives: The Process of Adaptation

Since the first publication of *Our Bodies, Ourselves* in 1972, the Boston Women's Health Collective (BWHBC, its abbreviation in English) recognized the importance of bringing this information in Spanish to Latin American women, whether they live inside or outside their country. In 1976, Raquel Scherr-Salgado and Leonor Taboada prepared a translation with a non-commercial format. Later, in 1979, a second edition followed. Groups of Latin American women who worked in Boston reviewed the translations and included some cultural aspects. For the English versions as for the translated versions, women who wanted to participate were asked to offer their own experiences, criticisms, and comments. This invitation has always been part of the book, with the goal that the book could go along adapting and changing according to the different experiences of women who read it. We receive a lot of letters with positive reactions to the book, with personal testimonies and accounts of how they used the book in very diverse situations. Both the Latin American women who live in their countries of origin, and those who live in the United States, offered their comments on the utility of the book for community based educational and mutual assistance groups.

After the publication of the editions in Spanish of 1976 and 1979, a group of Latin American women in Boston got

together to develop a second stage of the adaptation of the book in Spanish. María Lourdes Mattei, Lolly Carrillo, and Elizabeth McMahon Herrera were in this group. A group of these women, organized by Elizabeth McMahon Herrera, founded the group ALAS, Latin American Women Friends in Action for Health, that has been dedicated to health care work for women in the Latin American female community of Boston. Since its beginning, ALAS always worked with a base of community commitment, and in collaboration with agencies that work with Latin American women. Elizabeth McMahon and the original group of ALAS, that included Iris García, Vicky Nuñez, Miriam Salomé Havens, María Rolof, Mygdalia Rivera and Raquel Shapiro worked together to create a way of working with Latin American women of Boston in such a way that respects and includes their cultural values. Right from the beginning, they recognized that the information about women's health could be used with the biggest benefit if this information arrived through their own communities. The ideas and comments of this group were integrated into the new editions of the English book, so that the book could reflect the lives and voices of the Latin American women who live in the United States. In this project, the book was not the only educational and inspirational tool; Elizabeth, Caty Leignel and Mirza Lugardo used theater and video.

The desire to publish an adaptation into Spanish based directly on the experiences of women in Latin American countries culminated with the integration of two groups in Mexico, CIDHAL in Cuernavaca and Study Group of Women "Rosario Castellanos" in Oaxaca, who worked with the editions of the 1980s and began their own process of translation and adaptation. This project proved to be too big, because it limited the time that they needed for community work. Due to the big national and regional differences that characterize Latin America and the enormity of the book in its new editions, the opportunity did not come up to deliver the book to a group of women in each country so that they could transform it within their communities and in accordance with their experiences. In order for this book to be truly useful for women in Latin

America, it had to respond to the large national and regional differences of said countries. The women in the Hispanic Caribbean, Central America and the Southern Cone live with enormous differences between them, independent of the homogeneity of the language, the history of colonialism and the conditions that are derived from the exclusive power of men that harm their health. In all of Latin America, the majority of women live under economic conditions of great poverty, and in a reality very different from the women of the upper and middle classes of their same countries. Even language is a vehicle of racist and destructive practices, and it very easy for us to forget that for the indigenous women of Latin America, Spanish is a second language that comes together forcibly with many other indigenous dialects.

A Step Forward: Translation with a Collaborative Adaptation

In 1990 Esther Rome and Norma Swenson of BWHBC attended the Fifth Meeting of Women of Latin America and the Caribbean in Argentina to discuss a possible collaboration of a group of women of the region that might be interested in participating in the process of translation and adaptation. Once there, groups were identified who were willing to adapt translated chapters in English so that they would reflect realities of the experiences of Latin American women. In 1992, the Noyes foundation awarded funds for the translation into Spanish of the edition of *The New Our Bodies, Ourselves* of this same year. This translation was organized under the direction of Gabriela Canepa. In 1993, The Ford Foundation provided funds for the collaboration with groups of Latin American women that work in the field of women's health, with the goal that they would participate in an adaptation of the book, beginning with said translation and utilizing a perspective that would reflect the realities in their own countries. In 1993, a team of Latin American women of diverse countries (Peru, Puerto Rico, Colombia, Chile, Cuba, Venezuela and El Salvador) that live in the United States dedicated itself to coordinate this collaboration with their sisters in Latin America. Rosie

Muñoz López was the director of the project from 1994 to 1996, and thanks to her vision, knowledge, organization, and energy the unattainable dream was achieved. She identified the most appropriate groups to achieve the adaptation of the chapters, selecting them with her knowledge and activism in women's health in all regions of Latin America and the Caribbean. Rosie completed the difficult task of establishing long distance links with our collaborators for the adaptation. As a Puerto Rican woman who grew up both on the island and in the United States, Rosie understood very well the complexity of living between two worlds. Thanks to her creativity and her knowledge of the two communities, we resolved the big problem of how to create a book that was adequate for women in the north as well as in the south. It was her idea to include in the book voices and experiences of different women in the Americas, and the Latin American women living in the United States.

Mayra Canetti worked with the project from the beginning, offering administrative assistance but also was an integral part of the editorial group of Latin American women in Boston. Her command of Spanish and her political conscience as a Puerto Rican woman living in the United States contributed enormously to the quality of the book. Mayra read all of the chapters and made recommendations for each one. She directed the project from January to August of 1997, and initiated the organization of the bibliographic resources and materials for the groups of the north and south that enriched the book so much. Alba Bonilla, Salvadoran, was named as the assistant of the project, and Liza Avinami, Colombian, and a student at Tufts University, contributed to the organization of the bibliography and other tasks that arose. A group of the board of directors and the administration of BWHBC supported the work of our editorial group, composed at different times of Elizabeth McMahon Herrera, Ester Shapiro, Judy Norsigian, Judith Lennett, Norma Swenson, and Claudine Mussuto.

In the first stage of adaptation, 19 groups of 12 Latin American countries presented their adaptations of one or

several chapters that they themselves selected. Each chapter was adapted by at least one group, and ideally by two, to offer various perspectives of the national differences in Latin America. Some chapters, for example, those that are dedicated to physiological information about anatomy and reproduction or pregnancy and birth, changed very little. Other chapters, such as those on abortion and AIDS, offer radical changes that reflect the enormous political and medical differences in Latin America. Each chapter was revised by an editorial group of Latin American women in Boston. This editorial group, at different stages made up of Rose Muñoz, Mayra Canetti, Elena Brauchy, Lucia Ortiz-Ortiz, Miriam Hernández Jennings, Ester Shapiro, María Laura Skinner, and María Morison Aguiar, organized the comments and changes offered by the Latin American groups and added information about Latin American women in the United States, incorporating information, materials and resources of many groups of the entire region. We collaborated with various groups that have centers of documentation or databases of Latin America and the Caribbean, and we incorporate these materials to enrich the perspective and the resources that the book offers. Many women offered us materials and support. This book would not have been possible without the generosity, creativity and commitment of the groups that fight for justice for the woman in Latin America and the Caribbean. We are especially grateful to Nirvana González of Taller Salud (Health Workshop), to Leopoldina Rendón of CIDHAL, to Isabel Duques of ISIS in Chile, and to Adriana Gómez of the Health Network for the Women of Latin America and the Caribbean.

After these multiple processes of adaptation, Veronica Nielsen-Vilar was named editor of the book in Spanish, to give consistency to the language and to the voice. Veronica demonstrated a great spirit of collaboration. She insisted that each sentence was as direct and simple as possible to facilitate the use of so much information, and to preserve its content and social framework. The voice of this book is her voice; patient and lyrical. Thanks to her extraordinary talent as a translator, we have created a book that recognizes the

regional differences of Spanish, but achieves communication in a more universal manner.

One decision that we debated passionately was the decision of whether we should direct ourselves to the readers of the book using “tu” (you- familiar form) or “usted” (you- formal form). The custom in many of our countries is to use “usted” as a symbol of respect, and even more so in a medical context. We decided that a book like this, whose utility depends so much on establishing a conversation on the most private subjects of our lives, needed the intimacy of “tu”. Also, we wanted to communicate in a way that would express mutual respect, solidarity and equality between all of us who share a common struggle. Keeping in mind how important respect is in our culture, we also recognize the ties that unite us, and with this trust we speak to each other as friends and sisters.

During the editing and adaptation process, we asked ourselves if the book could be utilized by Latin American women in the United States, or if we saw the necessity to create another adaptation in Spanish for those Latin and Latin American women in this country. However, we did not want to divide our energies or our communities by creating two separate books in Spanish; furthermore we thought that as the new Latin American diasporas in the United States, we have very strong ties with our countries of origin. Many of us, second and third generation immigrants, value our Latin American language, culture and identity, although sometimes we prefer certain aspects of the North American life. We further recognize, that the individualism of North American feminism does not satisfy us in our personal and social relationships. Parts of our own political movements emerge from an interest to combine the two cultures to live with the best from each one. Our own experiences as immigrants, refugees or in exile are useful subjects in the North, the South and the Center of the Americas. In exploring the political implications and the practices of the life of an immigrant, we can create a book that recognizes our similarities as well as our differences. We realize that what unites us as women of the north and of the south

is the bond of language and the cultural cross mix of Europe, Africa and the indigenous cultures of our continent. For the Latin American women in the United States, the book offers a way to understand the movements of women in support of the health of Latin America, and with this knowledge, to nourish our own understanding and political activism. We have all, as women of the world, learned from the heroism of the mothers of the “missing” of Argentina, Chile and Uruguay and of the Guatemalan Rigoberta Menchú, exiled for many years. All these women created political revolutions demanding justice for their children, brothers, fathers and family members. Their examples have transformed our ideas as to what is possible to achieve with political movements although they may be under circumstances of repression and life threatening danger. The decision to dedicate ourselves to an adaptation in Spanish for both communities helped us to understand that the book would initiate conversations with possibilities to transform relations between two worlds and unite us profoundly.

Because the book was written in Spanish, and also due to space considerations, we did not present much about the extraordinary work of our colleagues in Brazil. Their many activist groups for women’s health and justice are named in our list of groups and organizations, at the end of Chapter 4. We know the enormous loss that this decision represents, and we hope that in the future an edition in Portuguese is developed based on the projects and experiences of the Brazilian women.

After the chapters were adapted and edited, we initiated a last stage of adaptation, to cover an all-encompassing view. Ester Shapiro, a Cuban brought up in Miami, began with the project in 1993, and offered a vision of how to adapt the book inspired by the work of our great master Paolo Freire. Due to the fact that the book could not be rewritten entirely, we wanted to invite the reader to participate critically in her own reading. For this reason we dedicated ourselves to changing key chapters that allowed for a dialogue between the text

and the current and diverse situations of our female readers. Beginning in 1998, María Laura Skinner, an Uruguayan woman brought up in Long Island, New York, worked as the editorial coordinator and made the last stage possible for us to incorporate so much of the good work of our colleagues in Latin America, the Caribbean, as well as that of the Latin American women of the United States. She also brought us her knowledge and creativity in the field of comprehensive health care. Due to her work as a dancer, herbalist, and as a sorceress, an expert in life between two worlds, she knows very well how to support women's health using all the tools of our cultural wisdom. María Morison Aguiar, a Brazilian adopted by Puerto Rico and the coordinator of ALAS, brought to our work her three decades of political activism dedicated to social justice, and 20 years of experience in community-based public health. With affection and humor, she always insisted that the most useful information was the most simple and direct. Alan West Durán, a Cuban brought up in Puerto Rico, and husband of Ester Shapiro worked on translating and editing the chapters that were adapted in this last phase. His experience as a poet, teacher, and activist as well as translator, helped us to maintain a high level of lyrical and political expression. Alan and Marjorie Agosín helped us to select a lot of the poetry that we used in various chapters. Antonia Marmo, a Spanish teacher from Uruguay and the mother of María Skinner, was always available for our many questions of content and expression. She helped us especially to refine the wording of many of the completed chapters.

The work of adaptation that we created with the collaboration of Latin American groups accomplished much more than to offer a new perspective of the book. It made us see how much we could bring to the movement of women's health in the United States with the wisdom coming from the experiences of our colleagues in Latin America. Many of these women put their lives in danger in order to talk about and confront the political, social, cultural and religious realities that adversely affect their lives. In our countries, the topic of abortion is clandestine and dangerous; abortions are

legal only in Cuba and Puerto Rico. The topic of domestic violence is ignored in our countries whose governments are repressive and violent because the control of the man over the woman forms an integral part of their control over the society. The groups adapted these and other chapters to include the perspective of our Latin American sisters. In Latin America and the Caribbean, the perspective of women's health forms an integral part of the movements for human rights and economic justice. Many times, the "experts" of the United States think that their knowledge of the "first world" are concepts which are superior and which can be used to elevate the "third world" from a primitive state to a superior level. We are quite clear on the fact that for our sisters in Latin America, their social and political relationships are a source of richness, in contrast to the United States, which is an individualistic country where everything is for sale, including social relationships which you must buy or reinvent. In other words, we have a lot to share, and a lot to learn together.

The limitations of the book arise from the difficulty that exists in long distance collaboration, coordinated by a group in Boston, given it is problematic to work via telephone and fax. The book is still missing conversations and collaborations that we believe are ideal and necessary in order to present a true Latin American perspective. To get that, we are counting on you, the new readers of the book in Latin American countries, and the Latin American women who read it in the United States. Starting from this adaptation, we need you to share with us your experiences and for you to help us to change and improve the future editions.

First Steps in a New Conversation

Struggling with the difficulties of creating an adaptation of *Our Bodies, Our Lives* for use in Latin America, we have come to understand that our lives as Latin American women, whether living in our countries or in the United States, have a lot of in common. Among the women of Latin America that helped to prepare the adaptation, and the Latin American women of Boston that participated in the coordination, a dialogue

was opened. This dialogue is the first step in the conversation that we will maintain with Latin American women. This new conversation has permitted us to use the resources and the ideas initially organized for the book in English, and transform them in accordance with the experiences of the Latin American group and the many Latin American women in Boston and in the rest of the United States. We consider this first edition of the Spanish adaptation to be just the first step in a process of political organization that recognizes how much we have in common and how much we can learn critically reflecting on our differences. We think that with the publication of a book in Spanish about women's health, that can be used in Latin America as well as for Latin American women in the United States, we will be able to face our common needs as women. If we explore the diversity in our race, nationality, social class, education, access to medical systems, traditional medicine, and the presence or absence of women's political organizations that consider our realities, in an open dialogue, critical and respectful, we would be enriched and learn from each other.

Organization of *Our Bodies, Our Lives*: How to Use This Book

For the collective of women in Boston, the book has been not just a resource of personal and political support, but also a collection of essential information. Exploring our needs, knowing that other women have given their voice to common experiences and wait with respect and interest to hear ours, continues to be a process of transformation. The book offers a conversation that promotes the connection, self-determination, heightened awareness and the political justice between us within our own communities and in collaboration with the communities of solidarity. It must be recognized that the book continues to be based fundamentally on the realities of North American women, and that certain information makes more sense in the health system and social life of the United States. The project of adaptation began with the book in English, translating it to Spanish, preserving the basic

organization of the 1992 and 1998 editions. We did not ask the Latin American groups that participated in the adaptation if they wanted to add new chapters. In this edition we changed the order of the chapters, because we decided to begin the book in Spanish with international and political perspectives, to return to women the power to evaluate the medical system and use it (with all its defects) within a broader framework to affirm their capacities and responsibilities. The book in English begins with chapters about body image, nutrition, and exercise, topics that focus on the women individually, and that are of interest fundamentally to women who are in economically privileged conditions in countries with stable economic systems. Also, we had to reduce certain chapters, since the text in Spanish is longer than the English text. The chapter most reduced was 24, the longest of the English book, which is about common and uncommon medical conditions that can affect women, including, for example, arthritis and cancer. In the adaptation, we preserved some sections of extreme importance, but gave priority to information sources such as publications or Internet resources. We also gave information about groups with whom communication could be established by telephone or computer, who are prepared to collaborate to disseminate information about health. In this way, women can get in touch with health centers in their countries that would provide recent and direct information. In order for the book to also be useful for Latin American women in the United States, we did everything possible to communicate with the health networks for Latin American women. With the publication of this adaptation, we are beginning a process of communication and compilation of information that will serve as a base so that future editions are more complete and useful.

Steps Towards the Future: Let's Write a New Book Together

The participation of all of you in an open and sincere conversation will help us to transform the book. For those of us who worked on the project in Boston, this first step to

create a broader conversation between women that fight for women's health in the Americas has been a great incentive. We are confident that the publication of the book will give us a new way to learn about our sisters and Latin American colleagues. Once you read the book, we would like to know what you think about it, what material you found useful and what you would like to change for future editions. We are beginning a new process of communication, critiquing, and collaboration to incorporate the experiences in our community in a more complete manner. We hope that you unite with us to share this process.

Ester Shapiro

...For the English versions as for the translated versions, women who wanted to participate were asked to offer their own experiences, criticisms, and comments. This invitation has always been part of the book, with the goal that the book could go along adapting and changing according to the different experiences of women who read it...

からだ・私たち自身 Bodies, Ourselves

From OBOS to SOFL: Why and How We Have Adapted Them into Japanese Society

The history of *Our Bodies, Ourselves* coming to Japan begins in the early 1980's. In 1984, Chizuko Ueno, a feminist sociologist who is currently teaching at Tokyo University, was then staying in Chicago on a professional exchange. She came to know the newly published *The New Our Bodies, Ourselves* there and introduced it in a Japanese quarterly newsletter, *Women's Books*.

The publisher of this feminist newsletter was Toyoko Nakanishi. In 1975, she started a small bookstore specifically for women called Shokado Women's Bookstore in Kyoto. In those early days of Japanese women's liberation movement, she could not find any information helpful for women in Japan, although she keenly felt the need for it. So she decided to launch on a difficult task of collecting, introducing, and publishing women's books and circulating information for women.

When Chizuko introduced *Our Bodies, Ourselves* and appealed to readers of women's books to attempt a Japanese translation of this marvelous book, many women, including myself, responded earnestly and volunteered translation work. We faced difficulties immediately, however, in finding a publishing house brave enough to take on this hard task. Not only was the book so huge but also it dealt with women's bodies and sexual issues with daring frankness – at least,



Shokado Women's Book Store

Japan

1988

according to the Japanese standard in those days. Then, dauntless Toyoko decided to publish it by herself, saying, "If I won't do it, I am not a woman!"

At that time, Japanese women were more or less ignorant of their own bodies; they were not being educated about their own bodies and women's health. Furthermore, there was a vast lack of self-control generally because husbands as well as doctors (who were mostly men) had almost complete authority over all the decisions concerning women's health, thus giving men control over women's bodies and rendering women powerless about their own health. Along with this, women were not accustomed to talking openly about their bodies and sexuality, even with other women, because of the strong sense of shame and filth attached to women's bodies.

One horrific example of such ignorance on the part of women is the case of Fujimi Hospital which was revealed in 1981. About one thousand and three hundred unnecessary hysterectomy and/or ovariectomy operations were conducted on women at this hospital for a period of many years. These women were told that "Your uterus is rotten" or "Your ovary is cancerous and in a mess," and were urged to undergo an operation immediately. They obeyed. However, later it was found that their removed organs were healthy and that the hospital had performed those operations just for money's sake. Although this case was a real tragedy for these victimized women, it worked as a strong warning to Japanese women of a danger of being ignorant of their bodies.

Translation and Adaptation

Shokado was (and is?) a small bookstore/publisher with chronic financial shortage, and it is very difficult in Japan to find a fund or some public financial aid for publishing activity. Accordingly, the making of Japanese version of *Our Bodies, Ourselves* was carried out totally on a voluntary base. Twenty-three women participated in translation work, and twenty-five women, some of whom overlapping with the translation team, took charge of editing and collecting information

necessary for Japanese adaptation. Many of these women were housewives who had had no experience and/or training of translation and editing until then. Since I had some experience of professional translation, I took charge of proof-reading to check translation with Mioko Fujieda, a feminist scholar. Dr. Miyoko Kawano, a feminist obstetrician-gynecologist, took upon herself the responsibility of checking all technical terms and pointing to many differences among medical systems, medical treatments, and medicines between the United States and Japan. She also introduced us to the photographer who took pictures of women giving birth at her hospital in Hiroshima, so that we could use those wonderful pictures in our book. Since we decided to replace all the pictures of Western women in the book with those of Japanese women, many people offered their own or their family's photos for us. One of our friends who was pregnant then even posed in the nude as a model for us. Finally, a famous artist, Chizuru Miyasako, readily accepted our request and made a charming collage work for the cover of the Japanese edition.

Apart from this translation/editing team, many people including lesbians (who were mostly in the closet in those days) lent a helping hand to our project. While the earlier shortened version of *Our Bodies, Ourselves* published in Japan in 1974 was entitled 『女のからだ』 (Women's Bodies), we chose a title more faithful to the original, that is, 『からだ・私たち自身』 (*Bodies, Ourselves*).

It took more than three years from 1985 to 1988 for translation, research work and editing of the Japanese *Our Bodies, Ourselves*. Many members of the project team met every week for the three years, and near the end of the period, they met more often. The location for all the meetings was on the second floor of Toyoko's small book shop in Kyoto. Toyoko's role was the overall management and coordination of the members. She was present at almost all of the meetings. As there were no fax machines nor e-mail in the period of 1985-88, Toyoko was always on the phone networking to hundreds of people and organizations. The OBOS team contacted and

met with over 80 major women's groups in Japan during this process.

While we decided to use pictures of our own and to write new prefaces for the Japanese *Our Bodies, Ourselves*, it was our policy to translate all chapters of original *Our Bodies, Ourselves* faithfully. It was not only because the contract with BWHBC required that but also because we felt that we shared many problems treated in the book as women living in a highly industrialized capitalist society. On the other hand, some parts of the book such as the chapters on lesbianism, masturbation, sexuality of aged or disabled people were quite new as a topic and a real eye-opener for most of us. I do not mean that such issues did not exist in our society, but they remained largely as issues without name until *Our Bodies, Ourselves* taught us how to see and talk about them clearly and openly.

Fortunately, we did not encounter any problem of censorship in publishing those chapters treating sexual issues. Kathy Davis mentions in her paper that, as late as 1990, the Japanese customs officials seized copies of the book showing genitalia and pubic hair as 'pornography' (Davis 2001:10). It is true. Nevertheless, we could publish pictures of a delivering woman with her pubic hair and genitalia clearly shown without receiving any admonishment! Also, we did not need to worry about the issue of induced abortions, the center of much heated controversy in many other countries including the United States. The Japanese Government legalized induced abortions as early as in 1948 as a countermeasure to the rapid population growth after the World War II.

Although the Japanese version is a faithful translation of the original *Our Bodies, Ourselves*, it is not that we found no adaptive contrivances necessary to make the book more useful and effective for Japanese audience. The major points of adaptation are as follows:

1. Changes in the Chinese Characters for Certain Terms

In Japanese language, the terms indicating parts of woman's body such as the pubic hair, the pubic bone and the vulva are ordinarily written using the Chinese characters which have a very negative connotation like "shameful (恥)" or "dark and shady (陰)." So we substituted the Chinese character 性 which means "sex" or "sexual" for those negative-nuanced characters to give these terms more neutral or positive impression. By thus changing the Japanese words, we tried to tell our readers that the language plays an important part in framing our consciousness of the body and that there is no need for us to feel ashamed or degraded when we think or talk of our bodies.

2. Addition or Changes for More Relevant Information

Since there are many important differences as regards health insurance system, medical care and education system, and the laws between Japan and the United States, information necessary to understand the Japanese state of things was added or substituted for the original description. Names of foods and drugs unfamiliar to Japanese people were changed to those available in Japan. In addition, since the threat of HIV/AIDS was just becoming of great concern in Japanese society, the latest information on this topic was newly added.

3. Information Based on a New Research

While we omitted the bibliography and the list of various American groups in the original *Our Bodies, Ourselves*, we conducted our own path-breaking research of obstetrical-gynecological clinics, hospitals, and midwifery clinics all over Japan. One hundred and eighty clinic/hospitals and twenty-nine midwifery clinics responded to our questionnaire. The results were given in the form of tables in our book, indicating each institution's policies on the Lamaze method, postures during labor and delivery, whether the presence of a laboring woman's partner or family is permitted or not, provision

of information about the pre- and post-delivery periods including contraception, provision of counseling, as well as the method, required time and expense of induced abortion. Such research and information were very much needed by Japanese women, because they were frustrated with the haughty and unkind manner of male doctors, humiliating and inhumane treatment on a high, strapped and uncomfortable delivery table, abuse of induction and/or episiotomy, and many other unpleasant experiences in medical facilities.

4. New Prefaces

Each of three chief editors, that is Dr. Miyoko Kawano, Mioko Fujieda, and I, wrote a new preface for the Japanese version, respectively, to facilitate understanding of the book by the Japanese audience. Miyoko wrote about the state of Japanese medicine and its treatment of women, Mioko described briefly the history of women and health movement in the United States and how the original *Our Bodies, Ourselves* was born and spread around the world, and I explained about the adaptations and changes we had made for the Japanese edition.

Effects and Influence of *Our Bodies, Ourselves*

In October 1988, 6,000 copies of Japanese *Our Bodies, Ourselves* were published. Within a decade, all the copies have been sold and the book is out of print now. But this does not mean that the book is considered out of date or forgotten today. You can find the manifold effects of publication of *Our Bodies, Ourselves* in various places. First, although the number of copies sold was not quite large, partly because of the relatively high price of the book, at least one copy was purchased and housed in almost every women's center scattered in many prefectures of Japan as well as many public and university libraries, providing an easy access to the book for a large audience. One example to show that *Our Bodies, Ourselves* has faithful readers even today is given by a feminist activist with disability who told Toyoko that she was overwhelmed with joy when she first read the part written of

sexuality of people with disability many years ago and that she still uses that chapter every year as the text for their study group.

Second, *Our Bodies, Ourselves* became a source of inspiration for other books and activities. Under the far-reaching impact of *Our Bodies, Ourselves*, numerous groups of women were formed to discuss and make research on various women's health issues such as the oral contraceptive pill, which was not officially approved in Japan until as late as June 1999, endometriosis, menopause, reproductive technologies, adolescence and sexuality, sexual harassment, and domestic violence. Based on such researches and bodily experiences of Japanese women, many new books have been written and published. As a result of increased interest in and visibility of women's health issues, the atmosphere of shame and secrecy surrounding women's bodies and sexuality has been dispersed to a considerable degree. In 1981, the victims of the Fujimi Hospital had a difficult time even to utter the word "uterus" in front of many people. Today, the situation is far better and to talk about women's bodies is no longer felt as a taboo among many women.

Third, *Our Bodies, Ourselves* and the books and activities inspired by it have brought about some favorable changes among medical professionals. For example, some hospitals came to listen more attentively to women's complaints of uncomfortable and inhumane ways of giving birth at hospitals, and improvements have been made concerning the design of delivery beds and women's postures during labor and delivery. The number of women who, wishing to give birth in a more natural way, prefer private midwife's office to hospitals is increasing, and attendance of partners during delivery has also become common both at hospitals and midwife's offices.

Last but not least is the effects of *Our Bodies, Ourselves* on individual women of the translation/editing team. Many of them, including myself, remember the encounter with *Our Bodies, Ourselves* as an unforgettable experience which

enabled us to see our bodies more positively and encouraged us to live more freely. Personally, *Our Bodies, Ourselves* even marked a turning point in my career. I was a post-graduate studying women's history when I first met *Our Bodies, Ourselves*. The book opened my eyes to the fact that there was almost no history of woman's body in Japan, and I decided to make it my specialty. Thus it was through *Our Bodies, Ourselves* that we learned both personally and collectively that OUR BODIES DO MATTER and also OUR SELVES DO MATTER.

Translating SOFL

In 1996, a book called *Sacrificing Ourselves for Love* written by Esther R. Rome, a member of Boston Women's Book Collective, and Jane W. Hyman, a co-author of *The New Our Bodies, Ourselves*, was published. And the Japanese version of this book was published in June, 2001. Once again, the publisher is Toyoko's Shokado Women's Bookstore and a team consisting of 13 women, some of them overlapping with members of OBOS team, collaborated on a voluntary base in translation, research and editing. Once again, I participated as the proof-reader.

The reason why we chose this book for translation is because the issues dealt in it, such as dieting and eating disorders, cosmetic surgery, domestic violence, rape, and STDs, are all serious problems currently in Japanese society, and we thought ideas and information in this book can be very helpful for Japanese women. For instance, several large-scale researches on domestic violence were conducted during recent years, and the research in Osaka City revealed that two out of three women have experienced some kind of physical and/or mental violence from their husbands or lovers. The law inhibiting violence from partners was enacted in May 2001. In view of such conditions, we made special efforts to include necessary information on shelters and counseling services for battered women available in Japan.

Thus, we are still treading the path which started from *Our Bodies, Ourselves*, and our story of transplantation and re-

contextualization of this book is still under way.

Kathy Davis, "Translating Feminist Body/Politics: The Globalization of *Our Bodies, Ourselves*," paper presented at the meeting, "Crossing Cultural Borders with *Our Bodies, Ourselves*," in Utrecht, the Netherlands, June 2001.

Miho Ogino

Osaka University Faculty of Letters

...Under the far-reaching impact of "Our Bodies, Ourselves", numerous groups of women were formed to discuss and make research on various women's health issues...Based on such researches and bodily experiences of Japanese women, many new books have been written and published. As a result...the atmosphere of shame and secrecy surrounding women's bodies and sexuality has been dispersed to a considerable degree...

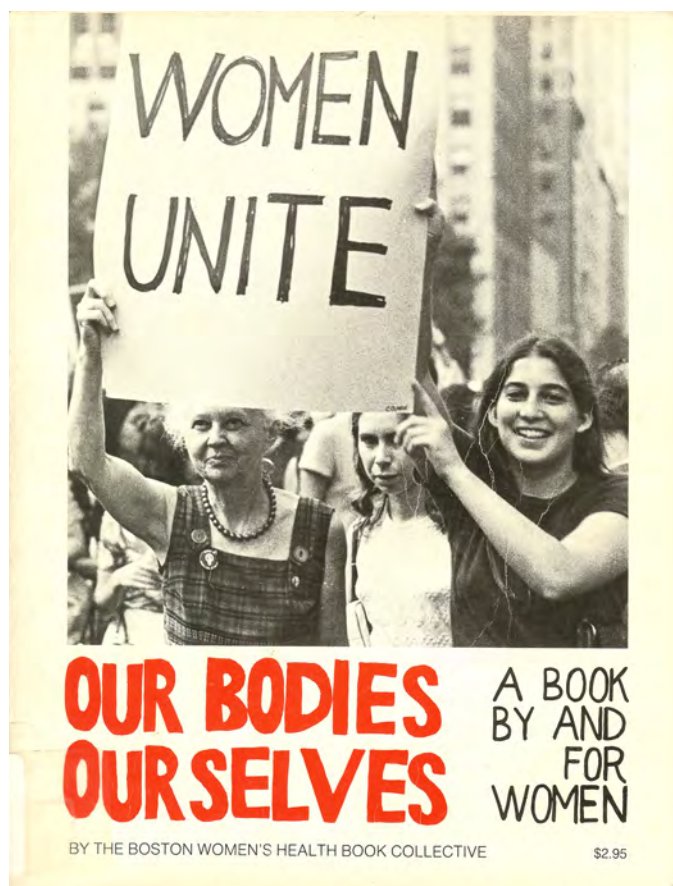
Our Bodies, Ourselves

A Book By and For Women

In the spring of 1969, a group of us met at a women's conference in Boston. The conference was one of the first gatherings of women meeting specifically to talk with other women. For many of us it was the first time we had joined together with other women to talk and think about our lives and what we could do about them. At one point, we took part in a small discussion group on "women and their bodies." Not wanting the discussion to end, some of us decided to keep on meeting as a group after the conference.

In the beginning we called ourselves "the doctors group." We had all experienced similar feelings of frustration and anger toward specific doctors and the medical maze in general, and initially we wanted to do something about those doctors who were condescending, paternalistic, judgmental and noninformative. As we talked and shared our experiences with one another, we realized just how much we had to learn about our bodies. So we decided on a summer project: to research those topics which we felt were particularly pertinent to learning about our bodies, to discuss in the group what we had learned, then to write papers individually or in groups of two or three, and finally to present the results in the fall as a course for women on women and their bodies.

As we developed the course we realized more and more that we really were capable of collecting, understanding, and evaluating medical information. Together we evaluated our reading of books and journals, our talks with doctors and friends who were medical students. We found we could



Boston Women's Health Book Collective

United States of America

1973

discuss, question, and argue with each other in a new spirit of cooperation rather than competition. We were equally struck by how important it was for us to be able to open up with one another and share our feelings about our bodies. The process of talking was as crucial as the facts themselves. Over time the facts and feelings melted together in ways that touched us very deeply, and that is reflected in the changing titles of the course and then the book, from *Women and Their Bodies* to *Women and Our Bodies* to, finally, *Our Bodies, Ourselves*.

When we gave the course we met in any available free space we could get: in day schools, in nursery schools, in churches, in our homes. We wanted the course to stimulate the same kind of talking and sharing that we who had prepared the course had experienced. We had something to say, but we had a lot to learn as well; we did not want a traditional teacher-student relationship. At the end of ten to twelve sessions, we found that many women felt both eager and competent to get together in small groups and share what they had learned with other women. We saw it as a never-ending process always involving more and more women.

After the first teaching of the course, we decided to revise our initial papers and mimeograph them so that other women could have copies as the course expanded. Eventually we got them printed and bound together in an inexpensive edition published by the New England Free Press. It was fascinating and very exciting for us to see what a constant demand there was for our book. It came out in several editions, a larger number being printed each time, and the time from one printing to the next becoming shorter. The growing volume of requests began to strain the staff of the New England Free Press. Since our book was clearly speaking to many people, we wanted to reach beyond the audience who lived in the area or who were acquainted with the New England Free Press. For wider distribution it made sense to publish our book commercially.

From the very beginning of working together, we have felt exhilarated and energized by our new knowledge. Finding

out about our bodies and our bodies' needs, starting to take control over that area of our lives, has released for us an energy that has overflowed into our work, our friendships, our relationships with men and women, and for some of us to our marriages and our parenthood. In trying to figure out why this has had such a life-changing effect on us, we have come up with several important ways in which this kind of body education has been liberating for us and may be a starting point for the liberation of many other women.

First, we learned what we learned both from professional sources – textbooks, medical journals, doctors, nurses – and from our own experiences. The facts were important, and we did careful research to get the information we had not had in the past. As we brought the facts to one another we learned a good deal, but in sharing our personal experiences relating to those facts we learned still more. Once we had learned what the “experts” had to tell us, we found that we still had a lot to teach and to learn from one another. For instance, many of us had “learned” about the menstrual cycle in science or biology classes – we had perhaps even memorized the names of the menstrual hormones and what they did. But most of us did not remember much of what we had learned. This time when we read in a text that the onset of menstruation is a normal and universal occurrence in young girls from ages ten to eighteen, we started to talk about our first menstrual periods. We found that, for many of us, beginning to menstruate had not felt normal at all, but scary, embarrassing, mysterious. We realized that what we had been told about menstruation and what we had not been told – even the tone of voice it had been told in – had all had an effect on our feelings about being female. Similarly, the information from enlightened texts describing masturbation as a normal, common sexual activity did not really become our own until we began to pull up from inside ourselves and share what we had never before expressed: the confusion and shame we had been made to feel, and often still felt, about touching our bodies in a sexual way.

Learning about our bodies in this way is an exciting kind of learning, where information and feelings are allowed to interact. It makes the difference between rote memorization and relevant learning, between fragmented pieces of a puzzle and the integrated picture, between abstractions and real knowledge. We discovered that people don't learn very much when they are just passive recipients of information. We found that each individual's response to information was valid and useful, and that by sharing our responses we could develop a base on which to be critical of what the experts tell us. Whatever we need to learn now, in whatever area of our lives, we know more how to go about it.

A second important result of this kind of learning is that we are better prepared to evaluate the institutions that are supposed to meet our health needs – the hospitals, clinics, doctors, medical schools, nursing schools, public health departments, Medicaid bureaucracies and so on. For some of us it was the first time we had looked critically, and with strength, at the existing institutions serving us. The experience of learning just how little control we had over our lives and bodies, the coming together out of isolation to learn from each other in order to define what we needed, and the experience of supporting one another in demanding the changes that grew out of our developing critique – all were crucial and formative political experiences for us. We have felt our potential power as a force for political and social change.

The learning we have done while working on *Our Bodies, Ourselves* has been a good basis for growth in other areas of life for still another reason. For women throughout the centuries, ignorance about our bodies has had one major consequence: pregnancy. Until very recently pregnancies were all but inevitable, and biology was our destiny: because our bodies are designed to get pregnant and give birth and lactate, that is what all or most of us did. The courageous and dedicated work begun by people like Margaret Sanger, to spread and make available birth control methods that women could use, freed us from the traditional lifetime of pregnancies. But the

societal expectation that a woman, above all else, will have babies does not die easily. When we first started talking to each other about this, we found that old expectations had nudged most of us into a fairly rigid role of wife-and-motherhood from the moment we were born female. Even in 1969, when we first started the work that led to this book, we found that many of us were still getting pregnant when we didn't want to. It was not until we researched carefully and learned more about our reproductive systems, about birth control methods and abortion, about laws governing birth control and abortion, and not until we put all this information together with what it meant to us to be female, that we began to feel we could truly set out to control whether and when we would have babies.

This knowledge has freed many of us from the constant energy-draining anxiety about becoming pregnant. It has made our pregnancies better because they no longer happen to us, but we actively choose them and enthusiastically participate in them. It has made our parenthood better because it is our choice rather than our destiny. This knowledge has freed us from playing the role of mother if it is not a role that fits us. It has given us a sense of a larger life space to work in, an invigorating and challenging sense of time and room to discover the energies and talents that are in us, to do the work we want to do. And one of the things we most want to do is to help make this freedom of choice, this life span, available to every woman. This is why people in the women's movement have been so active in fighting against the inhumane legal restrictions, the imperfections of available contraceptives, the poor sex education, the highly priced and poorly administered health care that keep too many women from having this crucial control over their bodies.

There is a fourth reason why knowledge about our bodies has generated so much new energy. For us, body education is core education. Our bodies are the physical bases from which we move out into the world; ignorance, uncertainty – even, at worst, shame – about our physical selves create in

us an alienation from ourselves that keeps us from being the whole people that we could be. Picture a woman trying to do work and to enter into equal and satisfying relationships with other people when she feels physically weak because she has never tried to be strong; when she drains her energy trying to change her face, her figure, her hair, her smells, to match some ideal norm set by magazines, movies and TV, when she feels confused and ashamed of the menstrual blood that every month appears from some dark place in her body; when her internal body processes are a mystery to her and surface only to cause her trouble (an unplanned pregnancy, cervical cancer); when she does not understand or enjoy sex and concentrates her sexual drives into aimless romantic fantasies, perverting and misusing a potential energy because she has been brought up to deny it. Learning to understand, accept, and be responsible for our physical selves, we are freed of some of these preoccupations and can start to use our untapped energies. Our image of ourselves is on a firmer base, we can be better friends and better lovers, better people, more self-confident, more autonomous, stronger and more whole.

Norma, Pam, Judy, Nancy, Paula, Ruth, Wilma, Esther, Jane, Wendy, and Joan.

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Our Bodies, Ourselves

TRANSFORMED WORLDWIDE