

ESSAY REVIEW

## Commerce and modern reproduction

### Camilla Mørk Røstvik, *Cash Flow: The Businesses of Menstruation*

London: UCL Press, 2022. Pp. 228. ISBN 978-1-78735-556-9. £40.00 (hardback).

### Claire Jones, *The Business of Birth Control: Contraception and Commerce in Britain before the Sexual Revolution*

Manchester: Manchester University Press, 2020. Pp. 256. ISBN 978-1-5261-3628-2. £85.00 (hardcover).

### Jesse Olszynko-Gryn, *A Woman's Right to Know: Pregnancy Testing in Twentieth-Century Britain*

Cambridge, MA: MIT Press, 2023. Pp. 424. ISBN 978-0-262-54439-9. \$60.00 (paperback).

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We now take for granted finding menstrual pads and tampons, condoms and home pregnancy tests on pharmacy and supermarket shelves. So integral have such products become to experiences of ‘everyday health’ that it is hard to believe they were ever controversial.<sup>1</sup> If their ubiquity makes them invisible, their pervasiveness and variety also make it easy to overlook their identity as consumer products and the fundamental significance of commercial processes in shaping how people do and do not reproduce. Yet despite long-standing interest in the pharmaceutical industry’s role in the making of biomedicine, until recently few histories have thematized the pivotal role of commercial concerns in shaping modern reproduction. Yet, as the books reviewed in this essay show us, menstruation, contraception and pregnancy testing were, and are, big business.

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<sup>1</sup> For the history of ‘everyday health’ see Hannah Froom, Tracey Loughran, Kate Mahoney and Daisy Payling, ‘Introduction: “everyday health”’, in Tracey Loughran, Hannah Froom, Kate Mahoney and Daisy Payling (eds.), *Everyday Health: Embodiment, and Selfhood since 1950*, Manchester: Manchester University Press, 2024, pp. 1–28.

In the twentieth century, reproduction acquired unprecedented political prominence and was transformed by state intervention, and by science, medicine and technology.<sup>2</sup> The medicalization of contraception and childbirth, alongside the roles of social movements – notably feminism – in producing a new politics of reproduction, have invited the most attention, with the post-Second World War move to hospital birth, the ‘sexual revolution’ and arrival of the oral contraceptive pill traditionally seen as inflection points. The involvement of industry, not least in the manufacture and testing of new reproductive technologies and in the promotion of private fertility care, has been too important for historians to ignore commercial processes altogether.<sup>3</sup> Yet that importance has been assumed more than explained. Framing the history of reproduction within commerce and commodification can help revise established stories, tell new ones and bring little-studied actors and activities into view.<sup>4</sup>

Three recent monographs offer complementary accounts of different classes of commercial product that have played transformational roles in the intertwined histories of menstruation, contraception and pregnancy. Camilla Mørk Røstvik’s *Cash Flow*, a sweeping history of the menstrual-product industry, uses case studies from Scandinavia, Germany, Britain, the Soviet Union and the United States to recover the importance of manufacturing and branding in making a transnational menstrual culture. In *The Business of Birth Control*, Claire Jones spotlights little-studied interwar commercial contraceptive firms that made birth control lucrative and shaped the availability of and access to contraceptive products and sexual knowledge. Jesse Olszynko-Gryn’s *A Woman’s Right to Know* explains the remarkable trajectory of the pregnancy test from esoteric laboratory service to ubiquitous consumer product. These works have significant differences of emphasis, methodological approach and chronological focus, but share a concern with the complex and under-researched roles of commerce and commodification in the history of modern reproduction.

Focusing on the multinational menstrual-products industry, Mørk Røstvik explores the dynamics between shifting corporate strategies and broader changes in menstrual culture. Examining seven major companies across around a hundred years, Mørk Røstvik challenges assumptions about a single ‘industry’ and emphasizes the breadth and heterogeneity of a global corporate landscape that has continually redrawn boundaries between the technologies, regions and marketing strategies that have defined ‘menstrual capitalism’ (pp. 16–19). Through an interdisciplinary synthesis of business history and cultural studies, archival research and interviews, Mørk Røstvik devotes each chapter to a different company. Though each chapter works as a case study, together they illuminate the creative means through which companies have both navigated and exploited menstrual taboos, controversies and activism. As Mørk Røstvik astutely notes, this industry revolves around the enduring and

<sup>2</sup> Nick Hopwood, Rebecca Flemming and Lauren Kassell (eds.), *Reproduction: Antiquity to the Present Day*, Cambridge: Cambridge University Press, 2018, pp. 499–656.

<sup>3</sup> The classic work is Nelly Oudshoorn, *Beyond the Natural Body: An Archaeology of Sex Hormones*, London: Routledge, 1994. For fertility care see Naomi Pfeffer, *The Stork and the Syringe: A Political History of Reproductive Medicine*, Cambridge: Polity Press, 1993; and Vera Mackie, Nicola J. Marks and Sarah Ferber, *The Reproductive Industry: Intimate Experiences and Global Processes*, London: Lexington Books/Fortress Academic, 2019.

<sup>4</sup> See Andrea Tone, *Devices and Desires: A History of Contraceptives in America*, New York: Hill and Wang, 2001, for a preliminary discussion of contraceptive commerce and the agency of consumers. More recent work on this topic includes Rose Holz, *The Birth Control Clinic in a Marketplace World*, Rochester, NY: University of Rochester Press, 2012; Ben Mechen, ‘“Closer together”: Durex condoms and contraceptive consumerism in 1970s Britain’, in Jennifer Evans and Ciara Meehan (eds.), *Perceptions of Pregnancy from the Seventeenth to the Twentieth Century*, Basingstoke: Palgrave Macmillan, 2017, pp. 213–36; and Jessica Borge, *Protective Practices: A History of the London Rubber Company and the Condom Business*, Chicago: McGill–Queen’s University Press, 2020.

profitable idea of menstruators as consumers, and menstruation as a renewable commercial resource.

Chapters 1 and 2 trace two companies that have monopolized the Scandinavian market in menstrual products – Saba (Norway) and Essity (Sweden) – from national start-ups to multinational corporations. Mørk Røstvik shows how they positioned themselves against foreign competitors and responded to feminist critique, including by invoking narratives of Scandinavian exceptionalism and progressive menstrual consumerism. Chapter 3 reconstructs the rise and fall of Femtech, a collaborative Soviet, British and American effort to establish a tampon company in Ukraine as Cold War tensions thawed in the 1980s and 1990s. Femtech's history illuminates how menstrual capitalism functioned outside the West while revealing, Mørk Røstvik argues, the agility of manufacturers in adapting to different cultural contexts and markets. Chapters 4, 5 and 6 explore more recent examples of branding menstrual products, each successful on its own terms. These include the mobilization of activist rhetoric and use of new media by the American companies Proctor & Gamble and Kimberly-Clark in marketing to global consumers, and efforts by start-ups Clue and Thinx to present themselves as female-led, eco-conscious consumer champions and more ethical alternatives to traditional products and corporations. By the 2010s, Mørk Røstvik argues, industry and critics had converged, turning the menstrual-product industry into a pseudo-activist space, and menstrual-activist spaces into testing grounds for branding ideas.

Jones began interrogating the symbiotic relationship between medicine and commerce in her 2013 book on Victorian and Edwardian medical trade catalogues.<sup>5</sup> That milestone work recovered the importance of trade literature and advertising material in shaping professional understandings of modern scientific medicine. Jones first encountered advertisements for condoms, pessaries and other contraceptive goods during the PhD research that grounded the book. Such advertisements, though often euphemistic, revealed the expansion of an interwar contraceptive trade that made birth control more visible to consumers, but hosted struggles over authority and respectability. Jones's thematic concern with print and material culture, marketing and commerce engage a wider historiography on sexual knowledge and behaviour. This literature confronts fertility control largely through prominent reformers, philanthropists and medics, and the clinics that supplied only a fraction of end users. As Jones points out, interest in contraceptive commerce waned from the 1980s as historical demographers rejected causative links between the rising availability of artificial birth control and Britain's fertility decline. Such assessments of the relative quantitative insignificance of such methods have contributed to historical neglect of contraceptive firms and their goods. Jones, in contrast, stresses the centrality of commercial processes – the manufacture, display, promotion and sale of contraceptives – to shaping public discourse on sex and birth control before the sexual revolution.

The chapter structure is thematic; Jones aims to bring contested processes into focus rather than the teleological narratives she sees as simplistic artefacts of the dominant stories told about contraceptives by reformers and clinicians. As the book persuasively demonstrates, contraceptives were not merely pregnancy prevention technologies, or symbols of social morality or sexual liberation, but commodities. Jones's analysis of production, packaging, trademarks, branding and commercial print culture, and their importance in shaping both contraceptive visibility and consumer confidence, is nuanced and informative. Brand loyalty, price, ease of use and access influenced consumer choices alongside efficacy and reliability, understandings of which were both contingent and contested. Moreover, the book illuminates how deeply embedded commerce was in running birth control clinics, through the development, testing and dissemination of contraceptives. Of

<sup>5</sup> Claire L. Jones, *The Medical Trade Catalogue in Britain, 1870–1914*, London: Pickering and Chatto, 2013.

particular utility is Jones's mapping of an evolving contraceptive retail landscape in which professional chemists were increasingly prominent. Growing visibility formed part not only of the liberation of sexual attitudes but also of the modernization of retailing and consumer culture. The meanings and values that birth control products acquired and communicated as they circulated the market, Jones argues, were essential to the emergence of a mass contraceptive industry, and the arrival of the contraceptive pill.

The first home pregnancy tests of the early 1970s belonged to the same permissive moment that brought the pill, and improved access to contraception and abortion. Since then, home pregnancy tests have become ubiquitous and familiar tools. It is tempting to see the availability of self-testing as revolutionizing the experience of pregnancy, satisfying an assumed transhistorical demand for reproductive self-awareness. Yet as Olszynko-Gryn explains in his social history of pregnancy diagnosis in Britain, over-the-counter tests neither fell from the sky, nor swept away alternatives, any more than the pill displaced other forms of contraception; moreover, demand was constructed. The book reconstructs three overlapping pregnancy-testing regimes: animal assays (1920s–mid-1960s), laboratory test kits (from the early 1960s) and the now commonplace home tests (since the early 1970s), with commercialization a crucial factor at almost every stage. The institutionalization of animal assays for pregnancy testing in the interwar period relied on a growing commercial market for clinical diagnostic testing, and the ability to generate demand from doctors as clients. Initially available only to doctors, laboratory-based pregnancy testing expanded under the NHS, especially after the Family Planning Association established its own diagnostic lab, and advertised in trade journals, tabloids and women's magazines. Though still an expensive luxury, pregnancy diagnosis had become more accessible, efficient, cost-effective and socially acceptable by the 1950s.

Olszynko-Gryn persuasively shows how the adoption of immunological test kits by commercial laboratories and pharmacies in the mid-1960s sidelined bioassays and decentralized diagnostic services. Immunoassays also helped forge a new culture of direct-to-consumer pregnancy testing, which sparked confrontations over reproductive rights, medical authority and consumerism. The book reconstructs debates over 'social' (non-medical) pregnancy testing, the advertising of diagnostic services and the roles pharmacists should play; these would set the scene for the first generation of DIY test kits in the 1970s. Olszynko-Gryn's account positions *Chefaro's Predictor* and *Unilever's Clearblue*, launched in Britain in 1971 and 1985 respectively, as outcomes of a protracted series of technical and social innovations that made self-testing first thinkable, and then widely accepted as a 'woman's right'. *Clearblue*, the first iteration of the now familiar home pregnancy tests, brought monoclonal antibody technology to the consumer market. But its rapid commercial success, Olszynko-Gryn shows, had as much to do with slick design and forms of advertising that would, over the next decades, cultivate new kinds of demand, from younger women, and those either yearning for pregnancy or dreading a positive result. NHS cutbacks pressured doctors to offer tests only when needed, while the imperative for early detection fed off and reinforced changing public cultures of health and reproduction. By the 2000s, home pregnancy testing was ensconced in modern life.

There is far more to each of these meticulously researched, abundantly illustrated and analytically stimulating monographs than brief summaries can possibly encapsulate. The books represent the state of the historical art and reflect the breadth and vitality of the scholarship in this field. Read together, what can they tell us about the importance of commerce to reproductive and menstrual histories?

Mørk Røstvik's multi-sited account offers a template for studying how companies established a global consumer reach. Jones and Olszynko-Gryn focus on Britain, both a historiographically significant case and an important site of innovation for contraceptive

commerce and pregnancy testing. We need more international comparisons and global histories, but there remains much to explore for specific places, even the most researched. More concerned with long-term use than with invention, these accounts are especially successful in broadening historical attention beyond the most intensively studied innovations and actors. They illuminate the neglected labour of small-scale entrepreneurs, factory workers, laboratory technicians and pharmacists, and the gendered nature of these activities. The authors share an interest in exploring how commercial processes intersected with the growing visibility and social acceptability of taboo subjects, practices and products, as well as end-user experiences. They each resist assuming inherent user expectations about particular technologies, instead showing how demand for and trust in these products was constructed and mediated by manufacturers, marketers and retailers. By thematizing how gendered understandings of knowledge and ignorance, privacy and visibility, efficacy and reliability framed user experiences, they each point to the agency of retailers and consumers of menstrual products, contraceptives and pregnancy tests in driving historical change.

Exploring menstrual and reproductive cultures through the lens of commerce, from product development to end use and everything in between, also complicates assumptions about turning points, notably around the sexual revolution and the pill's arrival in the permissive 1960s. It also helps us rethink received views about drivers of historical transformation, such as the role of liberal feminism. This was important, but in more and different ways than discussed in established accounts of, for instance, birth control; moreover, we learn how businesses instrumentalized feminist politics for commercial gain. These works emphasize more incremental timescales of change. Each author covers around a century, highlighting continuity as well as transformation of practices and social relations. Each resists linear narratives of technological progress and is alert to paths not taken. Olszynko-Gryn, for example, highlights the peculiar and troubling history of the hormonal pregnancy test Primodos and related products, as well as debates over the ambiguous implications of increasing sensitivity and early detection for user experiences. Moreover, his account clarifies that the commercialization of pregnancy testing was far from inevitable, given the state's consistent reluctance to intervene. Similarly, Mørk Røstvik asks what menstrual culture would look like without corporate involvement. Even so, her account stresses the obstacles to menstruating 'free from the industry' (p. 193) given how enmeshed commercial products have become in menstruators' experiences. All three authors demonstrate that the impact of commerce, although diffuse and nebulous, has been more influential for menstruation and reproduction than is commonly acknowledged.

Of broader significance are these accounts' contributions to historical understanding of the commodification of health and health care.<sup>6</sup> A key theme is the dynamics between commercialization and medicalization, the latter long the dominant explanatory framework for historical change in reproduction. Mørk Røstvik's account barely mentions medicine. It does not need to; medical practitioners, in her telling, were marginal in the cultivation and expansion of the market for menstrual products. Jones and Olszynko-Gryn, on the other hand, show how interrogating the interplay of medicine and commerce complicates established narratives about the 'medicalization' of reproduction. Jones stresses that medicalized contraception, with the pill the best-studied case, followed from medical practitioners' search for authority in an arena in which the market had long dominated. Medicalization, her account suggests, was a rhetorical move by medics and birth control campaigners who

<sup>6</sup> For the history of the patient as consumer see Alex Mold, *Making the Patient—Consumer: Patient Organisations and Health Consumerism in Britain*, Manchester: Manchester University Press, 2015; and Nancy Tomes, *Remaking the American Patient: How Madison Avenue and Modern Medicine Turned Patients into Consumers*, Chapel Hill: University of North Carolina Press, 2016.

sought legitimacy in a society which increasingly viewed medical science as the ultimate modernizer. Pregnancy testing, by contrast, was enmeshed with the wider reconfiguration of patients as informed and empowered consumers, with post-Second World War commercialization, especially in the 1960s, helping to drive public visibility, the decentralization of services, diminished medical authority and, ultimately, normalization. Olszynko-Gryn concludes with some tentative comparisons with other reproductive and sexual-health technologies that suggest both shared trajectories and important differences. His analysis invites further questions about the interplay between commercialization, medical authority and state regulation, and how commercial actors such as pharmacies have mediated doctor–patient relationships.

Menstrual products, contraceptives and pregnancy tests inhabit a larger world of ‘personal care capitalism’ (p. 184), Mørk Røstvik’s useful term to describe the normalization and ubiquity of a class of product rooted in gendered power hierarchies, designed to regulate, manage and profit from bodily processes and substances such as blood and semen. Menstrual and reproductive cycles have intertwined with consumer habits, becoming commodities in their own right: through menstrual tracking apps, condoms and lubricants, and home pregnancy tests. It is important to have this spelled out. As each author shows, corporate interest profiting from menstruation and reproduction was not new in the later twentieth century. But it has arguably ballooned since the 1980s, in tandem with the expansion and diversification of markets for over-the-counter health care products, transformations in sexual- and reproductive-health services and wider changes in digital communication and commercial practices that mediate reproductive experiences.<sup>7</sup> More work is needed to historicize and periodize the sites, practices and social relations of personal-care capitalism, commerce and consumerism. These outstanding books show us how, and deserve to be read widely and closely.

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<sup>7</sup> Social scientists have described the growth of the fertility industry since the advent of IVF as the ‘enterprising-up’ of reproduction: see Marilyn Strathern, ‘Enterprising kinship: consumer choice and the new reproductive technologies’, *Cambridge Anthropology* (1990) 14(1), pp. 1–12.