A Brief History of Women’s Health in the U.S.

At the turn of the millennium, women’s health has finally made front-page news. This shift to the spotlight has largely occurred in the last 100 years. The traditional (and erroneous) medical model assumed that health and disease followed the same course in men and women. Thus, inadequate attention was paid to women’s unique needs, resulting in major gaps in the understanding of prevention, diagnosis, and treatment of illnesses affecting women. Women themselves deserve prime credit for turning this tide and shedding light on the distinct face of women’s health.

The women’s health movement and women’s struggle for equality are inextricably linked. The opportunities that women fought for – such as suffrage, access to higher education, equal pay for equal work – opened doors for women in the health field. Similarly, the gains that women made within the health scene – access to birth control, safe and legal abortion, opening women’s clinics – propelled the larger agenda of the women’s movement forward.

Today, “women everywhere are bringing a new vision of women’s health and wellness, and of identity. Central to their vision is that we trust what we know in our bones: that our bodies are our allies...” With a groundswell of support, women across the country are pushing for a more holistic model of health care. While maintaining that reproductive issues are important, women are demanding services that meet their needs throughout the life span – from adolescence to old age, from eating disorders to incontinence. We are also exploring more closely the role that race, socio-economic status, and culture play on a woman’s access to accurate information and quality care. As a result of these efforts and many more, the women’s health movement has improved health care for all, women and men alike.

Women have successfully advocated for groundbreaking changes in the delivery of health care:

- Federal regulation of drugs
- Promotion of out-of-hospital-birth centers and midwifery
- Promotion and acceptance of alternative and complementary therapies
- Improved communication between patients and health care providers
- Access to medical information and health education
- Policies requiring health care providers to secure informed consent from patients
Margaret Sanger opens the first US Birth Control Clinic in Brooklyn, NY. Ten days after opening, it is shut down and Sanger is imprisoned.

Planned Parenthood opens. As the world’s largest and oldest voluntary family planning organization, Planned Parenthood is dedicated to the principles that every woman has a fundamental right to decide when or whether to have a child, and that every child should be wanted and loved. (www.plannedparenthood.org)

Federal Drug Administration (FDA) approves the birth control pill.

California becomes the first state to legalize abortion.

Our Bodies, Ourselves is first published. Considered radical for its time, the book provides factual and frank information about cultural taboos – topics like menstruation, masturbation, and people with physical disabilities having sex. Our Bodies, Ourselves quickly becomes the women’s lay health bible, selling more than four million copies in 15 languages. (www.ourbodiesourselves.org)

First Battered Women’s Shelter opens in Urbana, Illinois.

The Supreme Court rules on Roe vs. Wade making abortion legal in the United States, and opening the door to safer, more accessible procedures.

Older Women’s League (OWL) is founded. As the only national grassroots membership organization to focus solely on issues unique to women as they age, OWL strives to improve the status and quality of life for midlife and older women. (www.owl-national.org)

National Black Women’s Health Project established. (www.nationalblackwomenshealthproject.org)

National Lesbian Health Care Study surveys over 1000 women to explore the health issues and care of lesbian women in the United States including: general and gynecological health, mental health, stress and coping, substance abuse, eating disorders, violence and sexual abuse, discrimination and self-care.

National Latina Health Organization formed. (www.nlho.org)

Congress passes the Women’s Health Equity Act, dedicating federal monies to research on women.

Office on Women’s Health established by the National Institute of Health to improve the health of women across the life span by directing, developing, stimulating, and coordinating women’s health research, health care services, consumer education, and training for public health professionals. (www.4woman.gov)

Women’s Health Initiative (WHI) begins – a 15 year research program, WHI addresses the most common causes of death, disability and impaired quality of life in older women, including heart disease, cancer, and osteoporosis. (www.nhlbi.nih.gov/wh)

National Asian Women’s Health Organization founded. (www.nawho.org)

FDA approves the female condom.

Native American Women’s Health Education and Resource Center opens its doors. (www.nativeshop.org)

UCSF designated one of 6 vanguard National Centers of Excellence in Women’s Health. Using a five pronged approach – research, clinical care, leadership, education, and community – the UCSF COE is committed to developing partnerships with individuals and organizations to foster and support activities geared toward improving the health and well-being of women and girls across diverse communities. (itsa.ucsf.edu/~ucsfcoe)

Violence Against Women Act passes, providing badly needed funding for programs addressing domestic violence and sexual assault, and media campaigns condemning all forms of violence against women. (www.nowldef.org)

Emergency contraception, commonly known as “the morning after pill”, approved for distribution by the FDA. (ec.princeton.edu)