

The Dark Ages: Man's Vengeance on Woman— The Penalty for an Unwanted Pregnancy

We now find it hard to realize that only a short time ago the word "abortion" was not used in normal conversation. Those who had experienced abortions knew and belonged to a large sodality of women which had no secret handshakes or symbols and whose members only accidentally knew each other. But members of this group were more numerous than those attracted to the ranks of the later women's liberation movement. Somewhere in the personal history of millions of women in this nation there was an ugly, traumatic drama stashed in the bank of unforgettable memories. It was an *illicit abortion*.

Even though the dark ages of pre-abortion reform was only a few years ago, we will need to put ourselves back into that time to recall what it was like for a woman to have an unwanted pregnancy and desire to terminate it. What happened to her at that time? Even in a state with a law as strict as New York, a woman who had "connections" (a doctor friend, a psychiatrist) and *money* could, in a New York hospital, terminate the pregnancy under the guise of a "therapeutic abortion." It is important to understand the terminology that medical and legal persons invented to rationalize the ignoring of the law in certain cases. The term "therapeutic" was both hypocritical and euphemistic. It was used to describe an abortion that was ascertained as necessary to "save the life of the mother," that being the only legal reason for the act. "Therapeutic," as used by the medical profession, was a term of justification. In fact it was only a term to describe the difference between rich and poor, white and black, the privileged and the underprivileged, married and single.

Almost all of the abortions performed under this rubric could not by any stretch of the imagination or language be construed to fall under legal justification. In 1967 in most of the states a

“therapeutic abortion” simply meant a “legal” abortion in contrast to a so-called “criminal” abortion. This phony distinction and widespread practice of discriminatory abortions was one of the impelling reasons which led us not only to fight for the reform of the law but also to consider seriously the “disobedience” of the law.

Not only were “legal” therapeutic abortions done in hospitals, but “illegal” abortions were also performed there, i.e., abortions done without formal acknowledgment of hospital personnel. Several large hospitals had “under the table” arrangements to do first trimester (within the first twelve weeks of pregnancy) abortions which cost somewhere between \$1,500 and \$2,000. The desperation of women was enough to encourage a black market even in “therapeutic abortions.” These were a kind of “illegal” legal abortion. If you understand these fine distinctions, you could have been a legislator in New York State in 1967.

But what about those women without means, unmarried, very young, or poor, or black? How did they get abortions? They relied on the “grapevine.” The “grapevine” is the interconnected, survival cord in the illicit underground which develops to fulfill any prohibited need. In this case, it was a list of “abortionists,” passed from hand to hand, usually on college campuses or among single women in large metropolitan areas. In those days, an individual clergyman who had experience in counseling women in difficulty (and there were practically no such clergy) had the names of several “doctors” who for \$500 or \$600 would perform an abortion. A major disadvantage and even danger of the list was that each person who referred women sent so few that there was no effective method of checking on these “abortionists” and the medical procedure they were using. The known list of persons performing abortions was long. There were, of course, the celebrities like Dr. Spencer in Pennsylvania, Dr. Rappaport in New York, and Dr. Raymond in New Jersey, but unfortunately for women the medical credentials and experience of the lesser known “doctors” were not verifiable. Those women, mostly poor and members of minority groups, who had no access to the grapevine had their own prescriptions for self-induced abortions, which often resulted in sterilization and death; or they used the services of a practicing midwife who lived in the ghetto.

If we look at the experience of those women who were “lucky” enough to have access to the grapevine, we may be able to under-

stand the psychic scars that probably contributed to the psychiatric profession's "mythology" regarding the ill effects on the mental health of women who had abortions. The fear and shame of the criminalizing process, having to do something that was made to appear "dirty" and "unsavory" in order to achieve some control of her life, the physical pain that came from what was often the absence of anaesthesia, the anxiety that came from not knowing the credentials or the skills of the practitioner—all of these factors increased immeasurably the psychic pain and physical suffering of a woman forced to resort to this kind of solution by a medical/legal system that simply did not care.

Let's look at a typical situation in New York of a woman who took the route of illegal abortion in the time before abortion reform or professional counseling and referral were available. The woman called a phone number, and a man answered. He said he was busy, but he would call back if she would leave her number. This man was not a doctor but a "middleman" in the abortion business who worked for the "doctor" and was paid a set amount for each woman he referred to the "doctor." He called her back and told her how much money she needed to bring in cash and made arrangements to pick her up somewhere in Manhattan. When they met, he took her to an office where the procedure was performed. The woman never knew in advance where she was to be taken nor did she know the name or the qualifications of the person performing the procedure. Like most women in this situation, she was *not* permitted to bring a relative or friend along with her. Her anxiety was thus compounded by the anxiety of those closest to her who, had she not returned, would have had no information about where she was or whom she was with. Since both the name and the phone number of the "middleman" were constantly changing, his whereabouts would have been hard to trace.

This situation, believe it or not, was one of the better ones. Other women wound up in motel rooms where a so-called doctor would do the procedure on the bed while the woman was blindfolded so as not to discover his identity. He would do the procedure and disappear. The woman, still blindfolded, would be driven back to the parking lot where she was picked up; the whole transaction would take place in complete silence except for the cries of pain and shame from the lips of the victim. If she was very fortunate, had lots of money but no hospital connections, she might

have her abortion done in a luxurious hotel suite by a Park Avenue doctor, using an alias, with nurses in attendance. The cost would be about \$1,000 for such an abortion. Some loss of dignity might be spared the woman in this kind of situation, but her anxiety was probably no less. It is hard to imagine an experience more traumatizing or dehumanizing for a woman or more likely to have a deleterious effect on her psychic health.

One of the most sophisticated and humane abortion rings we encountered in those days operated out of Washington, D.C. It consisted of a group of very reputable doctors in the Washington/Baltimore area. The "middleman" was a charming, middle-aged Southerner by whom we were contacted. In this procedure the pregnant woman was picked up at the train or plane by a limousine driven by the "middleman." The limousine had a two-way radio that enabled him to keep in constant touch with the doctors and receive calls from the patients as they arrived in the city. When a woman was picked up, she paid the money to the "middleman" in the car. He then transferred her money to a brown envelope addressed to the "accountant" for the business and dropped it in a mailbox. (This way the doctors never touched the patient's money.) At the end of each week the "accountant" wrote checks for all the staff including the "middleman," who was paid a flat fee for every patient he delivered to the doctors. A number of women who went through this procedure were recruited to be agents in their town or on their campus. As agents they would receive a "kickback" of \$25-\$50 for each woman they sent to the Washington doctors. In this way the ring was able to establish a network which seemed to operate throughout the southern part of the United States. The existence of this network explained why, at least in the experience of the clergy, women in the South seemed able to attain abortions without a professional counseling service. We suspected, but never knew, that the ring had some connections or understandings with Washington authorities since it operated in a relatively open and public way.

One of the interesting phenomena of the illicit abortion business in the United States was that the "Mafia" or the underworld syndicate never moved into the field and dominated it even though it was a multimillion dollar business annually. It may be a little cynical to suggest that the reason the "Mafia" stayed out was on moral and religious grounds, but it is hard to find another explana-

tion. The only place that seemed an exception to this rule was the state of New Jersey where there was evidence of outside controls over doctors and "middlemen."

In these dark days of pre-abortion reform one might ask where the medical profession was in a matter almost completely medical by nature. That profession was paralyzed by prejudice (against abortion as life-negating), fear (of losing their licenses), and ignorance (most of them had only delivered babies). When a patient discovered that she was accidentally pregnant, even when the obstetrician-gynecologist was her personal doctor and had prescribed the contraceptives, the physician became nonfunctional as far as that patient was concerned. Often a doctor refused to discuss the "problem," pretending the patient was a stranger; he would not suggest alternatives but would merely suggest that if she planned to go through with the foolish notion of having an abortion she could "come back and see me when it is all over." We met many an angry and disillusioned woman in those days who had believed that her physician really cared about her only to discover at the moment of this terrible medical and ethical dilemma that he offered neither medical help nor even moral support.

The attitude of doctors toward those persons in the profession who became "abortionists" was one of absolute contempt. This attitude was held even by those doctors who were "liberal" enough to refer wealthy patients to them. One of the great failures of those in the medical profession who did refer women to or give them phone numbers of "abortionists" is that, because of their desire to be medically pure, they refused to "police" or call into account, in any way, the colleagues whom they considered pariahs of the profession unfit for licensing but whom they used to perform a medical service which they refused their patients. The hypocrisy and double standards of many in the medical profession were exceeded only by their irresponsibility toward their women patients whose health and life depended on these "abortionists."

In all fairness it must be said that probably a majority of the profession in those days did not believe that abortion was right for everyone; they did not refer women because they did not believe that women should have abortions except for the most compelling reasons. Abortion certainly was not a medical procedure that most doctors felt a woman was entitled to by request. It was the conservatism of the medical profession as much as that of the legisla-

tors that kept the harsh, restrictive laws on the books until the latter part of the twentieth century.

A word should be said here about the "illegal abortionist" whose *genre* was generated by the law of supply and demand that accompanies every prohibitionistic culture that makes certain personal services and needs "illegal" and "criminal." It should be noted here that nomenclature is very revealing. The "abortionist," as the doctor was called, was a term of opprobrium approved by the medical profession for putting him outside the pale. But when the law changed and abortions were legal, a physician who worked full time in an abortion clinic was never called an "abortionist" even though he performed the same services.

These doctors who were performing at that time outside of accepted medical practice and procedures were cut off from their profession in every way. All the checks and balances that come from medical practice in the acceptable forms had to be missing while at the same time these doctors were earning more money than their colleagues. All of this produced a certain pathology contributed to by the illegal nature of the practice as well as being "dumped on" by their profession. Many of them deserved the unsavory reputation they earned, but we found later that not all of them were as bad as their "reputation." It does seem unfair that the psychiatric profession gave a great deal of study and attention to the "personality disorders" and psychological problems of women who had unwanted pregnancies or abortions, but on the other hand never studied the problems or pathology of medical men engaged in a lucrative business that thrived on the desperation and misery of helpless women.

We heard countless lectures in those days about how damaging to one's mental health abortion really was. Many psychiatrists, buttressed by studies and the reports of other doctors, prolonged that myth without reference to the social context in which the abortion actually occurred. It was similar to another myth about women which the psychiatric profession encouraged and that was about "unwanted pregnancies" which were really "wanted" in order to hurt somebody or punish someone. Many psychiatrists believed devoutly that all so-called unwanted pregnancies were forms of acting out anti-socially or rebelling against parents. Very few were willing to admit that the reasons a woman became pregnant when she preferred not to be had to do with a whole complex of prob-

lems related to unsatisfactory sex education, inadequate birth control measures, the heavy moral burden placed on single women if they performed sexually out of marriage, and most importantly related to a way in which men looked at women and put them in their place.

When one looks back even over the space of a few years and sees what women were put through in order to pay lip service to a discriminatory and outmoded statute, one can only conclude that abortion was directly calculated, whether consciously or not, to be an excessive, cruel, and unnecessary punishment, physically and psychologically, of women.

In 1967 Al Blumenthal, the Chairman of the Health Codes Committee of the New York State Assembly, was trying to get out of his Committee onto the floor of the legislature a mild abortion reform bill. Early that year a small group of clergy, under the impetus and encouragement of Lawrence Lader, a longtime proponent of abortion law change, had conversations about what we would do to help women if the legislature failed to act. The suggestion put forth was to establish a counseling service to assist women in the difficult time of an unwanted pregnancy. The final blow, giving impetus to the clergy, was the refusal of the lawmakers even to let the bill out of committee. It seemed to us ironical that the legislators who refused even to talk about reforming the law were all men who had never been pregnant, and the group of persons preparing to give aid and counsel to the women were clergy (mostly men) who belonged to an institution that was more responsible than most for the law staying on the books.

Those of us clergy in New York City who had gathered together at the Washington Square Methodist Church in the early spring of 1967 did so out of some strong convictions that leadership for the reform of that heartless and inequitable law should come from those of us who preached justice without demanding it and admonished mercy without giving it. It seemed to us only right that the counseling, encouragement, and assistance which women needed under this unjust law should come from that institution, the Christian church, so responsible for the origins and perpetuation of that law.