WHEN ABORTION WAS ILLEGAL:

Untold Stories

Discussion Guide
WHEN ABORTION WAS ILLEGAL: Untold Stories was produced and directed by Dorothy Fadiman, of Concentric Media, in association with KTEH-TV.

The discussion leader’s guide was written and the resource list compiled by Karen Mulhauser. For over two decades, Ms. Mulhauser has dedicated both her professional and voluntary activity to mobilizing informed constituencies to enter policy debates and to become involved in shaping solutions. The discussion questions in this guide were supplied by Concentric Media.

© Concentric Media 1993

To order a VHS video or 16mm film copy of

WHEN ABORTION WAS ILLEGAL:
Untold Stories

contact Bullfrog Films, Box 149, Oley PA 19547
(800) 543-3764
WHEN ABORTION WAS ILLEGAL:

Untold Stories

Compelling first person accounts reveal physical, legal, and emotional consequences when abortion was a criminal act

The following guide can be used to facilitate discussion in:

- **A College, high school or other classroom situation** in which students in subjects such as Women's Studies, Sexuality, the Social Sciences, Health Care, etc. view the film and take the opportunity to pursue in greater detail one or more of the topics which the film touches.

- **A meeting sponsored by an organization or group** to which members, clients, guests and perhaps the larger community are invited.

Contents

Discussion Leaders' Guide 2
The Discussion Leader 2
Discussion Questions 4
Abortion: Facts at a Glance 10
Resource List 12
Annotated Bibliography 18
Discussion Leaders’ Guide
No matter how you decide to use the documentary, this guide will assist you in opening discussion. The film is 30 minutes long. If possible, plan on a total of two hours for the screening, personal sharing and discussion. For classes which meet for one hour, we suggest setting aside two sessions, so that there will be time to discuss personal reactions, as well as ideas and social concerns.

In preparing for a group viewing of WHEN ABORTION WAS ILLEGAL, be aware that it may be an emotional experience for some participants who will be reminded – or informed for the first time – of the difficult realities of the situation when abortion was a criminal offense. At your gathering you may intend simply to open discussion, or you may wish to focus on the legal and social situation concerning abortion in your own community and beyond.

The Discussion Leader
The discussion leader should be prepared to elicit people’s reactions to the film, as well as their personal views and experiences; provide basic information about the legal status of abortion; have information about the local situation; and be prepared to offer suggestions to people who want to become more involved in the issue.
Suggestions:
Remember that you are more likely to engage people’s interest with a discussion than a lecture.

1. Immediately after the screening, allow time for the viewers to talk about their own reactions to the film. Women and men who have memories of the era of illegal abortion may want to speak about their recollections – about their own experiences, or about an abortion that a friend or family member had. Be prepared with information about when abortion was illegal. Perhaps you can invite a doctor who remembers that time, or a clinic worker who has information.

2. BRIEFLY review the status of the abortion in the U.S. and in your state. Refer to fact sheets to save time. With this information, your group will become more fully aware that in the twenty years since the Supreme Court made abortion legal, this privacy right has been increasingly challenged. You may want to cover the U.S. Supreme Court Roe v. Wade decision in 1973, federal and state attempts to limit abortions, the actions of the current Supreme Court, and the Freedom of Choice Act. Any clinic which provides abortions can help you with information about what is happening locally; you may want to address access to clinics, the “provider crisis,” socio-economic issues, state legislation, candidates’ positions, etc.

4. Conclude with specific action ideas such as ways to learn more, notice of other related events (i.e., an educational activity sponsored by a local group), or resources for further research.

5. Have pamphlets, fact sheets, etc. available as
handouts. Some suggestions:

- A list of local services and referral information
- A list of national organizations (provided at the back of this guide)
- Fact sheets on the safety of legal abortion, national and state laws, etc. (You can get such information from the Alan Guttmacher Institute, the National Abortion Federation, or the local Planned Parenthood.)
- Information on national, state, and local candidates’ positions on abortion, including voting records, if the gathering takes place before an election (Voting records are available from NARAL or their state affiliates.)

**Discussion Questions**

The following questions, based on the content of the film, provide a springboard for further in-depth exploration of the issues raised.

Lana was 17 years old, married, and already a mother when she was told by her doctor that another pregnancy would be fatal. She was not given birth control information, though and became pregnant unintentionally. During much of the time that abortion was illegal, contraceptives were illegal too.

**Discuss the role of contraceptive information in “the abortion debate.”**

Should it be available to teenagers? If not, why not? If so, why?

Betty had been in a relationship which she thought might lead to marriage. Her pregnancy ended the relationship.

**How might a change in the circumstances of a women’s life affect her feelings about**
pregnancy?

Do her changed feelings and circumstances justify abortion?

Betty describes telling no one other than the man with whom she had become pregnant, and going to the telephone book to find an abortion. Many of the women in the program had their abortions without telling anyone—not even the man with whom they became pregnant.

Discuss the advantage or disadvantage of a woman telling the man involved.

Discuss “spousal consent,” which requires that a married man agree before his wife may have an abortion.

Attitudes toward women have changed since the era described in the program. More women work outside the home than ever before, and many women choose to delay child-bearing and marriage.

What are some of the ways access to abortion affects women’s lives?

When Rosalie was a single high school girl, she became pregnant and went through a life-threatening abortion. Her family situation was such that she felt she could ask for help from her mother, but not her father. Today, some states require young women to obtain the consent of their parents before having an abortion.

Discuss the pro’s and con’s of “parental consent” laws.

Some doctors, like Rosalie’s, told women how to induce a miscarriage, or gave them medication to start one—but then, to protect themselves from being arrested, left the women to complete the abortions alone.

Discuss the justification for actions like these by medical doctors.
Rosalie was raped several years after her illegal abortion. For this second unwanted pregnancy, she decided to bear the child, and give it up for adoption. Discuss the implications of an unmarried woman’s decision to continue a pregnancy.

What might she suffer? What might she gain?
How did society treat this woman in the past?
How have attitudes changed over the years?

Dr. Armstrong reports on hospital admissions of women with “botched abortions” in the 1950’s and ‘60’s.

Do you think he is exaggerating? On what do you base your impression?
How might you find out more about the actual conditions in those days?
Of what value is his story?

Mary describes housewives too poor to afford another child.

How does a woman’s socio-economic status relate to her ability to bear and raise children?
Discuss whether or not the government should play an active role in this situation.

Terry describes the attitudes of many physicians in the years when abortion was illegal.

If you were a doctor at that time, facing loss of your license and/or imprisonment, how might you have acted?

When abortion was illegal, some doctors, afraid of losing their licenses or reputations, refused to help women who were injured by unskilled abortionists. Many of those women died.

Who was responsible for their deaths? The
abortionists? The doctors? The legal system? The women themselves?

**Dr. Boyd** took great personal risks to provide illegal abortions.

- What do you think might have motivated the few doctors who did this?
- What were some of the costs to them personally? Their rewards?

**Dr. Hodgson discusses “shotgun marriages.”**

- How do you feel about marriage as an alternative to having an abortion?
- Discuss your thoughts about alternatives other than marriage: raising the child as a single mother (as a teenager, as a woman 20 - 40, as an older woman), having a relative raise the child, giving the child up for adoption, etc.

Some women report that, in retrospect, they felt they were pressured into having an abortion.

- Under what circumstances might a woman be urged to have an abortion?
- Is there any circumstance when a woman should be required to have an abortion?
- Do you feel that their memories may be affected by information received since the abortion?

**Russ and Evelyn** both risked arrest when they helped women find abortions. There was an extensive underground of people who were willing to break the law in this way.

- Why do you think this underground existed?
- Do you think it would begin again if abortion were made illegal today?

**Dr. Paulsen** helped to provide “therapeutic abortions.” In some states, the law included the legal right to an abortion
if the mother’s mental health was in danger. Some people applauded this “loophole.” Others said that providing many abortions was an abuse of the law. Some people believe that abortion should be permitted only in cases of rape or incest, or when the woman’s life is in danger.

Discuss the difficult choices which the option of a “therapeutic abortion” puts forth.

Do you think there are circumstances under which access to abortion should be limited? What might they be?

Lola Huth became pregnant while using an IUD for birth control. There was serious danger of malformation of the fetus.

Would you consider this situation clear grounds for choosing an abortion? If not, why not?

Lola died of a self-induced abortion. There were many such deaths. A high percentage of these deaths were reported on hospital records as “spontaneous hemorrhage” or “infection.”

Why do you think illegal abortions were reported incorrectly?

Discuss the challenge of getting information about the results of illegal abortion.

Betty reflects on her situation and admits having felt “like a criminal” for forty years.

Why do you think her sense of “societal guilt” did not pass with time?

Do current opinions about abortion give women similar feelings?

Lana postulates that the same woman who risked her life to get an abortion might, later in life, risk her life to have a baby.
Why might a woman who loved and wanted children choose to have an abortion, especially a dangerous illegal one? Discuss the concept of a "right time."

Lola Huth's sister, Freddie, says that "we have to start telling these stories."

Discuss the value, to a younger generation, of oral history about abortion.

When abortion was illegal, many women went to unskilled abortionists, performed self-abortions, or continued their pregnancies without talking to anyone about their feelings.

Discuss the way in which counseling might affect someone in each of these situations.

Consider possible reasons for the yearly increase in the recorded number of abortions during the decade after Roe v. Wade.

Now that abortion has been legal for two decades, what conditions or situations might further affect the number of abortions performed?

What does freedom of reproductive choice mean to you? Should it include RU486? Late abortions?

Before 1973, abortions were legally unavailable for most women. Now, for many women, they are becoming financially and/or geographically inaccessible.

Discuss the subject of accessibility. Accessible for whom? Under what circumstances?
Abortion: Facts at a Glance

In 1973, in Roe v. Wade, the U.S. Supreme Court legalized abortion throughout the United States.

How Many

- In 1973, 745,000 abortions were performed in the U.S. The number of abortions increased in the 1970s and has remained at 1.5-1.6 million per year since 1979.

- Each year, more than six million American women become pregnant; more than half of these pregnancies - 3.4 million - are unintended, of which almost half end in abortion. Approximately 29 percent of all pregnancies (excluding those ending in miscarriage) in the U.S. end in abortion.

When

- Approximately 91 percent of all abortions are performed during the first trimester, about 9 percent are in the second trimester, and only one-hundredth of one percent are performed after 24 weeks of pregnancy.

Who

- The majority of abortions performed in the U.S. are obtained by women who are young (81 percent under 30 years of age), white (69 percent), and unmarried (82 percent).

- Women aged 18-19 have the highest abortion rate of any age group (60 per 1,000).

- Women with an annual family income of $11,000 are nearly four times as likely to have an abortion as women with a family income of over $25,000.

- The desire to complete school or to continue working are common reasons women give for choosing to abort an unplanned pregnancy.
Seventy percent of women having abortions say they intend to have children in the future.

Half of all women having an abortion in 1987 had become pregnant even though they were using some form of contraception, either because of inconsistent or incorrect use or because of a method failure.

The highest abortion ratios (percentage of pregnancies that end in abortion) are found among unmarried women (who abort 63 percent of pregnancies), women 40 and older (51 percent), and teenagers (42 percent).

**Cost**

The average cost of a first trimester non-hospital abortion is $251.

While most states have excluded coverage of abortions under Medicaid, the joint federal-state program that provides medical services to low-income Americans, 13 states fund abortions for poor women when they are medically necessary.

**Safety**

The overall risk of dying from legal abortion has dropped from 3.4 deaths per 100,000 abortions in 1973 to 0.4 per 100,000 in 1985 - more than an eightfold decrease.

Abortion is 11 times safer than carrying a pregnancy to term.

Vacuum aspiration (suction curettage) and dilation and evacuation (D&E), the methods now used for 95 percent of all abortions, are much safer than methods used previously.

*Prepared from data collected by Planned Parenthood Federation of America.*
Resource List

for additional information on reproductive rights and health services

WHEN ABORTION WAS ILLEGAL documents the pre-Roe v. Wade years through the stories of women and men who lived through the era of illegal abortion. When abortion was finally decriminalized throughout the United States in 1973, a number of groups committed themselves to maintaining and expanding reproductive rights for women, and providing relevant information on contraception and women’s health. There are many such groups today, some of which were founded during the legislative and court struggles of the 1960’s, some recently organized in response to external threats and pressures, and some with a different focus, such as the League of Women Voters, the American Civil Liberties Union and the American Association of University Women, who have identified protecting reproductive rights as an issue to which they are committed.

The following list includes a wide range of organizations who are actively committed to protecting reproductive rights and providing information about related issues.

Alan Guttmacher Institute (AGI)
(212) 254-5656/ fax (212) 254-9891
111 5th Avenue, New York, NY 10003
AGI’s mission is to protect the reproductive rights of individuals and families in the United States and around the world – with a particular focus on those who are young, poor, or otherwise disadvantaged. Through research, policy analysis, and public education, AGI provides reliable, balanced, nonpartisan information on birth control, abortion, and childbirth.
American Association of University Women – Campaign for Choice  
(202) 785-7700/ fax (202) 872-1425  
1111 16th Street, NW, Washington, D.C. 20036  
AAUW represents 135,000 college graduates, in communities nationwide, dedicated to promoting education and equity for women and girls. The American Association of University Women’s Campaign for Choice is dedicated to three fundamental goals: electing candidates; winning passage of the federal Freedom of Choice Act to codify the standards of Roe v. Wade; turning back anti-choice legislative threats and enacting pro-choice proposals. (AAUW is non-partisan and does not endorse candidates in partisan races.)

American Civil Liberties Union (ACLU)  
(202) 944-9800/ fax (202) 869-9065  
132 West 43rd Street, New York, NY 10036  
The ACLU is a national organization with more than 275,000 members devoted to defending constitutional freedoms. As a special project of the ACLU, the Reproductive Freedom Project’s goal is to protect the constitutional right to privacy – particularly in the area of reproductive choice – through public education efforts, legislative advocacy, and litigation.

Catholics for a Free Choice (CFFC)  
(202) 986-6093/ fax (202) 332-7995  
1436 U Street, NW - Suite 301,  
Washington, D.C. 20009  
Established in 1973, CFFC is an educational organization that supports the right to legal reproductive health care, especially family planning and abortion. CFFC also works to reduce the incidence of abortion and increase women’s choices in child-bearing and
child-rearing through advocacy of social and economic programs for women, families, and children.

Center for Population Options (CPO)  
(202) 347-5700/fax (202) 347-2263  
1025 Vermont Avenue, NW – Suite 210  
Washington, D.C. 20005  
CPO’s mission is to increase the opportunity and ability of youth to make healthy decisions about sexuality by providing information, education, and advocacy to youth-serving organizations, policy makers, and the media. Recent publications include “Adolescent Abortion and Mandated Parental Involvement: The Impact of Back Alley Laws on Young Women” and “Adolescents and Abortion: Choice in Crisis.”

Fund for the Feminist Majority  
(703) 522-2214  
1600 Wilson Boulevard – Suite 1102,  
Arlington, VA 22209  
The Fund for the Feminist Majority leads action campaigns to empower women in all sectors of society. The Fund works on a legislative front to press for laws protecting women’s right to choose an abortion and participates in organizing direct actions to draw attention to the seriousness of the abortion issue.

The League of Women Voters of the United States  
(202) 429-1965/fax (202) 429-0854  
1730 M Street, NW 10th Floor, Washington, DC 20036  
The LWVUS is a nonpartisan, nonprofit, membership organization with members in all 50 states, the District of Columbia, Puerto Rico and the Virgin Islands. The LWVUS believes that public policy in a
pluralistic society must affirm the constitutional right of privacy of the individual to make reproductive choices. The LWVUS has adopted the protection of the right of privacy in reproductive choices as one of its issues for emphasis during its 1990-1994 national program.

National Abortion Federation (NAF)
(202) 667-5881/fax (202) 667-5890
1436 U Street, NW #103, Washington, D.C. 20009
NAF is the professional association of abortion providers. The membership consists of 300 clinics and physician offices throughout the United States. NAF's mission is to preserve and enhance the quality and accessibility of abortion services.

National Abortion Rights Action League (NARAL)
(202) 408-4600/ fax (202) 408-4698
1156 15th Street NW 7th floor, Washington, DC 20005
Founded in 1969, NARAL is the largest organization working in the legislatures, in the courts and at the clinics to protect the right of every American woman to make her own decision whether or not to have an abortion. NARAL has 39 state affiliates and over 750,000 members nationwide. NARAL educates the public about the abortion issue and supports the election of pro-choice officials at all levels of government. NARAL supports initiatives designed to reduce the need for abortion through sexuality education, contraceptive research, prenatal care and improved access to health care.

National Black Women's Health Project (NBWHP)
Public Policy/Education Office
(202) 835-0117
1615 M Street NW, Suite 230, Washington, D.C. 20036
NBWHP is a self-help and health advocacy organization that is committed to improving the overall health status of Black women. The core program is based on the concept and practice of self-help and the inclusion of all African-American women, with a special focus on Black women living on low incomes. Begun in 1981 as a pilot program of the National Women's Health Network, NBWHP is now incorporated as a non-profit organization. It has become an internationally recognized grassroots advocacy organization with over 2000 members participating in more than 150 self-help chapters in 31 states.

National Family Planning and Reproductive Health Association (NFPRHA)
(202) 628-3535
122 C Street, NW - Suite 380,
Washington, D.C. 20001

NFPRHA is a non-profit membership organization established to improve and expand the delivery of voluntary family planning and reproductive health care services throughout the U.S. As the only national organization representing the entire family planning community, NFPRHA's members comprise virtually all of the grantees funded under Title X of the National Public Health Service Act. These grantees serve over four million low income and poor women and adolescents yearly.

National Organization for Women (NOW)
(202) 331-0066/fax (202) 785-8576
1000 16th Street, NW - Suite 700
Washington, D.C. 20036

NOW is the largest women's rights organization in
the United States with more than 250,000 members belonging to more than 750 chapters. Since its inception in 1966, NOW has been at the forefront of the women’s rights movement including defending the right of women to control their own reproductive lives.

NOW Legal Defense and Education Fund
(212) 925-6635/fax (212) 226-1066 or 226-1314
99 Hudson Street, 12th Floor, New York, NY 10013
Established by the National Organization for Women (NOW) as a separate organization, the NOW Legal Defense and Education Fund pursues equality for women and girls in the workplace, the schools, the family and the courts. NOW LDEF has litigated on issues of reproductive rights, in particular, seeking to prevent Operation Rescue and other anti-choice groups from blockading women’s access to health care clinics.

National Women’s Law Center
(202) 328-5160/ fax (202) 328-5137
1616 P Street, NW - Suite 100, Washington, D.C. 20036
The National Women’s Law Center works to secure women’s reproductive rights and establish women’s economic security. The Center advocates for strong protections in the law, is a resource for pro-choice advocates, and educates the public. Information on federal and state legislation and Supreme Court decisions is available.

Planned Parenthood Federation of America (PPFA)
(212) 541-7800/ fax (212) 261-4352
810 7th Avenue, New York, N.Y. 10019
PPFA, the world’s oldest and largest voluntary reproductive health care organization, is dedicated to the principle that every individual has a fundamental
right to choose when or whether to have a child. The 169 non-profit affiliates with more than 922 clinics in 49 states and the District of Columbia provide medical and educational services for nearly five million Americans each year, regardless of race, age, gender, sexual orientation, disability, or economic circumstances.

Religious Coalition for Abortion Rights (RCAR)
(202) 543-7032/ fax (202) 543-7820
100 Maryland Avenue, NE, Suite 307,
Washington, D.C. 20002
RCAR – a coalition of thirty-six national mainline Christian, Jewish, and other organizations with official positions advocating a woman’s right to choose – educates the public about the diversity of religious belief regarding abortion, lobbies national and state legislatures to uphold the standards of Roe v. Wade, and mobilizes women of color and clergy to advocate for abortion rights as a social justice and religious freedom issue.

Voters for Choice (VfC)
(202) 588-5200/ fax (202) 588-0600
2604 Connecticut Avenue, NW,
Washington, D.C. 20008
VfC is unique among national pro-choice organizations: its sole purpose is to elect pro-choice candidates. It is a non-partisan political action committee (PAC) that supports candidates for Congress, governor, and for state legislators. It offers training for state legislative campaigns and distributes “Winning With Choice,” a handbook for candidates.
Annotated Bibliography


Bonavoglia, Angela  The Choices We Made  New York: Random House, 1991. 201 pages Reflections by women and men, many of them well-known, about their experiences with illegal and legal abortions.


Lader, Lawrence  Abortion  New York: The Bobbs-Merill Company, 1966. 211 Pages, with index and bibliography. A detailed chronicle of the days of illegal abortion, written before Roe v. Wade. Includes sections on therapeutic hospital abortions, religious attitudes, rubella and thalidomide, the "underground," and abortion in other countries.

Lee, Nancy Howell  The Search for an Abortionist  Chicago, IL: The University of Chicago Press, 1969. 207 pages, with index. A study of the ways in which the names of illegal abortionists were circulated among friends, relatives, and acquaintances.

twentieth centuries. Discusses the abortion debate, using interviews with activists on both sides of the issue.

**McKeegan, Michele** *Abortion Politics* New York: Macmillan, 1992. 227 pages. An account of how abortion became a political issue, and an analysis of political strategies used by anti-abortion groups.


**Mohr, James** *Abortion in America: Origins and Evolution of National Policy* New York: Oxford University Press, 1978. 331 pages, with index. A carefully compiled history of American abortion law, presented in a social context. Looks at abortion practice before the first anti-abortion laws were passed in the eighteenth century and traces the attitudes and events which eventually led to anti-abortion laws in every state.
