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SECRETS AND SILENCES:

RHETORICS OF UNWED PREGNANCY SINCE 1960

A Dissertation in

English

by

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ABSTRACT

Between 1945 and 1973, an estimated 1.5 million unwed pregnant women “went away” until after they delivered their babies. Given the limited historical recovery of these women’s stories, this project includes ethnographic interviews (with such women) and examines how the custom of “going away” during an era of hiding and surrender was maintained through practices of secrecy, shaming, and silence. The project also traces how the stigma of unwed pregnancy shaped public discussion as well as the spatial and bodily practices that determined where unwed, pregnant bodies were permitted to be and be seen during the 1960s and 1970s.

Through this investigation, I overturn a central myth: that by the 1970s, unwed mothers no longer needed to hide their bodies, given a cultural climate of new sexual permissiveness, the development of the birth-control pill, and the decriminalization of abortion (with the 1973 Roe v. Wade ruling). I contend that the “long 1970s” represents a decade that is critical to understanding how unwed pregnancy shifted from being a private, silenced, hidden problem to being a problem of public concern, garnering significant attention in popular discourse, public policy, and governmental legislation. Despite shifts in terminology (“unwed pregnancy” became “teen pregnancy” when the latter was deemed an “epidemic” in 1976), and despite the fact that unwed, pregnant bodies slowly became more visible, practices of shaming, silence and erasure continued through the 1970s. This project suggests that the history of unwed pregnancy since the 1960s is one that is ever constructed as a problem—whether a private, familial problem or one of greater public concern—but always a problem that lacks a sound solution.
The legacy of such rhetorical constructions lingers today, as unwed and teen pregnancy discourses circulate widely (via television programming and film) and as political debate related to women’s knowledge of and control over their own sexuality and reproductive health has been revived, suggesting the relevance of the historiographic work this project undertakes. In sum, I use rhetorical and feminist historiographic lenses to examine when and how pregnant, unwed women (girls, most often) have historically been spoken for and/or silenced, and I position this project as an attempt to revisit history and speak with such women about how that history can most fully and ethically be remembered and understood.
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CHAPTER ONE

Introduction

I.

It is 1954. “Louise,” 22 years old, pregnant, and unmarried, enters the Roselia Foundling and Maternity Asylum in Pittsburgh, Pennsylvania. Like thousands of other women in her situation, Louise is gripped with fear and shame because of her unwed pregnancy. Going to the maternity home, which is four hours away from her rural, Pennsylvanian home town, will allow Louise to hide, anonymously, during her pregnancy and surrender her child for adoption. About 25 other unwed mothers also hide in the home; together, the women play solitaire, keep up with daily chores, and pass the time until they give birth. Louise will return to her hometown after she delivers a child she never sees again. Despite her family’s effort to keep her pregnancy a secret, people know and talk. Louise meets the man who she will eventually marry, and his friends try to talk him out of dating “that kind of girl.” He refuses to listen. Louise and her husband hold the secret of her past even now, as a couple in their 80s. I talk to them on a day when their daughter is not likely to stop by the house.

II.

It is 1965. An estimated 25,000 women a year are hiding an unwed pregnancy in the United States. Because women hide in secret, there is no way to accurately track this trend. Experts suggest that the nation is undergoing a 100-500 percent rise in out-of-wedlock pregnancies between women of various ages. An estimated 70 percent of the pregnancies among white
women result in the mother surrendering her child for adoption and erasing all outward traces of her pregnancy.¹

III.

It is 1971. Salvation Army Brigadier General Vivian Johnson speaks with the *San Diego Union* to discuss the impending closure of several the organization’s homes for unwed mothers. Johnson explains that the organization “spent every ounce of our planning, energy and much of our money in providing centers where unwed mothers could come and have their babies. It took us from 1910 until 1970 to get enough beds.” But by 1971, the Southern Californian home faces closure. “Who would have predicted all this?” Johnson asked the reporter. “Who would have guessed in 1950 that abortion, the Pill and vast changes in attitude would cause this?”²

The history of unwed pregnancy in the United States is one cloaked in silences and secrets. Accounting for women’s experiences as shamed and erased unwed mothers in earlier decades, then, is difficult and slippery work. “Facts” and statistics are rarely reliable and those who have first-hand experience with unwed pregnancy—unwed mothers—have historically been silenced—dismissed as neurotic, immature, and a “problem” that the rest of the nation had to deal with, grudgingly. This project is an effort to delve into the history of unwed pregnancy in the United States since 1960 and add to the limited, but expanding historiography about this generally overlooked and misunderstood portion of women’s experience.

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¹ Moorman 45-6
² “Salvation Army to Close”
As the first two historiographic fragments above suggest, the experience of having a child outside of wedlock around the middle of the twentieth century usually meant incurring shame and being swept up in a choreographed effort to deny that pregnancy ever existed. By the 1960s, hundreds of thousands of women, some say millions of women, went into hiding in order keep their unwed pregnancy a secret. Some of these women were in college, some were only young girls, most were white, but some were not. Some of the women had had sex with a boyfriend, some were raped, some were incested. Women who could find sufficient resources might have gone to a Florence Crittenton, Salvation Army, or Catholic Charities home in order to hide the pregnancy. If they had no resources, women might have gone to a wage home, where they would work as a maid in a private residence for room and board. Others hid wherever they could: in an attic, in a roadside motel, wherever. The point was, in the 1960s, to be unwed and pregnant was to be stigmatized and to bring unspeakable shame to your family, especially if your family aspired to be part of the middle class. You went away to erase your pregnant body and, in most cases, you were forced to relinquish your child in order keep that pregnancy a secret. In almost every case, you were told that you would forget all of this happened.

The third historiographic fragment suggests that quite suddenly and unexpectedly, the shame and stigma of unwed pregnancy began to dissolve in the 1970s. Brigadier General Johnson articulates three specific reasons for this change: abortion, the Pill, and shifting attitudes. Specifically, Johnson is referring to the process of states decriminalizing abortion, which would be enacted nationally with the 1973 Roe v. Wade ruling; the development of the birth-control Pill, which was approved by the Federal Drug Administration in 1960; and changing attitudes about sexual behavior and gendered expectations referred to as a “new permissiveness” that accompanied counter-cultural youth values of the late 1960s. According to
many primary and secondary texts, the 1970s are considered to be a time of renaissance in relation to unwed pregnancy, and these exact reasons are frequently cited as the three-part explanation for why, supposedly, fewer women hid their unwed pregnancies and surrendered their children by this decade.

This project sheds greater light on practices related to unwed pregnancy in the 1960s, what I call the era of “hiding and surrender.” It also interrogates an unarticulated assumption: that once a greater number of women could avoid hiding and surrender, the shame and stigma of unwed pregnancy began to recede and fade. In reality, however, shame and stigma did not simply fall away from unwed, pregnant bodies in the 1970s. Some women still hid their unwed pregnancies, and those that did not increasingly became the subject of public scrutiny. As unwed pregnancy gained greater public attention, public discourse continued to rely on rhetorics of shame—and eventually blame—in order to make sense of this ongoing “problem.” All told, after years of silences and secrets, the stubborn menace of unwed pregnancy was not going away, despite observers’ insistence that it was. But with no adequate rhetorical apparatus to envision pregnancy out-of-wedlock as anything but a problem, the triumvirate of abortion, Pill, and permissiveness presented a heuristic to explain change and, allegedly, progress.

As a rhetorical historiography, this project examines the evolving discourses and silences related to unwed pregnancy, particularly during these two volatile decades. I use methods of feminist rhetorical historiography to trace these discourses and silences through two eras: (1) the apex of the “hiding and surrender” years (roughly, the 1960s), when the “problem” of unwed pregnancy was handled privately and secretly within the immediate family and (2) what I call the “long 1970s,” a decade of social and political change during which the “problem” of unwed motherhood gradually became a more public concern. Thus, I ask how the rhetorics of these two
eras configure (and reconfigure) the “problem” of unwed pregnancy, shape the material realities of unwed mothers at the time, and inform the public notions of unwed motherhood as an identity category.

This chapter explains how I understand this project as an extension of the current, relatively limited scholarship on the history of unwed pregnancy in the United States. I provide an overview of how I conceptualize this history as being highly rhetorical and then describe a set of values, the sexual double standard, that will run through all of the remaining chapters. With this orientation in place, I then detail the methodological and method-specific considerations that have shaped the project. I conclude with an overview of the subsequent chapters.

What Do We Know About the Recent History of Unwed Pregnancy?

Two pieces of secondary, historical scholarship have made great inroads in recovering the silenced history of unwed pregnancy in America. Most closely linked to my research is the scholarship of Rickie Solinger and Ann Fessler. Solinger, an historian of reproductive politics, offers an extended exploration of how unwed pregnancy was a primary marker of deviance configured by race and class (i.e., a marker of the “fallen” white woman) during the 1950s and 1960s in *Wake Up Little Susie: Single Pregnancy and Race before Roe v. Wade*. *Wake Up Little Susie* stands out as Solinger’s work most focused on unwed motherhood as an historical subject position. Her later work asks additional questions about pregnancy and the politics of adoption, abortion, and reproductive rights more generally understood and thus contributes secondarily to my specific line of inquiry.³

More recently, visual artist and professor of photography Ann Fessler published *The Girls Who Went Away: The Hidden History of Women Who Surrendered Children for Adoption in the Decades Before* Roe v. Wade. Fessler’s text offers an account of the nearly ubiquitous albeit silenced practice of unwed mothers “going away” to maternity homes that she bases on oral history interviews with over one hundred women, many of whom had not previously talked openly about their maternity home experience or the relinquishment of their child. This book, written for a broad audience and heavily reliant on women’s first-person testimonies about being unwed and pregnant, has gained wide circulation, especially among those personally touched by surrender and adoption.

Additional scholarship contributes to the much-overlooked history of maternity homes, their residents and staff, and the ways in which interventions meant to respond to the problem of unwed pregnancy touched those outside of these spaces of secrecy. Social work historian Regina G. Kunzel’s *Fallen Women, Problem Girls: Unmarried Mothers and the Professionalization of Social Work, 1890-1945*, provides an extensive overview of the earliest iterations of maternity home service. Specifically, Kunzel’s text traces maternity-home work as integral to the rise of social work as one of the first professional fields open to women. Historian Katherine G. Aiken’s *Harnessing the Power of Motherhood: The National Florence Crittenton Mission 1883-1925* provides insight into the early mission and practices of what would be come one of the largest maternity home chains in the United States. Finally, historian Marian J. Morton’s *And Sin No More: Social Policy and Unwed Mothers in Cleveland, 1855-1990* explores the changing ways in which unwed pregnancy figures into the history of one urban city across several generations.

In addition to secondary scholarship, a number of unwed mothers have, in recent years, written memoirs of their experiences of hiding and surrendering an “illegitimate” child for
adoption. One early example of this is Carol Schaefer’s *The Other Mother: A True Story*. More recent memoirs include Meredith Hall’s *Without a Map: A Memoir*, Margaret Moorman’s *Waiting to Forget: A Motherhood Lost and Found*, Janet Mason Ellerby’s *Following the Tambourine Man: A Birthmother’s Memoir*, and Patti Hawn’s *Good Girls Don’t*. These memoirs provide their authors the space to recount their stories of finding out about their pregnancy and going into hiding before they delivered and surrendered their children, reflecting on these early experiences and their ongoing effects on the authors’ lives.

These texts range from the scholarly to the personal and incorporate a variety of lived and disciplinary perspectives, although all circulate outside the field of rhetoric. Taken together, they represent the most sustained efforts to recover and explain a largely unaccounted part of women’s history in contemporary America. Although they represent laudable efforts to preserve the largely invisible traces of unwed motherhood, these texts generally focus on women’s experiences before the 1970s, reinforcing the perception that women’s experiences in the 1960s were distinct from those of women who became pregnant in later decades. Additionally, investigation into the era of hiding and surrender has become entwined with histories of adoption and the politics of reunion between biological mother and adopted child. Alternately, post-*Roe v. Wade* discussions of pregnancy outside of wedlock tend to center on teen pregnancy (generally with an education policy and/or sex education focus) and single motherhood (generally with a public policy and reproductive rights focus on issues of class and race). These seemingly disparate sites of inquiry are typically not put in conversation with one another.
How Are Histories of Unwed Pregnancy Rhetorical?

Reconstructing [reproductive] histories is crucial to the project of showing that
sex-and-pregnancy is more than a biological event.
It is also a social and political event.
—Rickie Solinger, *Pregnancy and Power*

In most basic terms, I understand the study of rhetoric to be the examination of the
processes of symbolic meaning-making and the ways that symbolic meaning-making implicates
power. My exploration of the recent history of unwed pregnancy, then, represents an attempt to
understand where, how, and by whom meaning was assigned in relation to this ongoing
“problem.” I also consider when and how rhetorical meaning-making served as the basis for
empowerment or disempowerment of the various stakeholders implicated in this history.

As I mentioned above, this project builds upon the existing writing that recovers a long-
silenced history. Many stories of unwed pregnancy, especially those during the years of hiding
and surrender, represent rhetorical silences. Most unwed mothers were unable to speak up for
themselves or speak out against their sexual partners, family members, social workers, religious
leaders, school administrators, and others who convinced them that they should have little, if any
say in their own pregnancy. Despite these silences, this is also a history of speaking, for shaming
discourses reinforced unwed mothers’ belief in their own voicelessness, and lies were spoken to
cover up the shameful truth of mothers’ situations. For many women, the rhetorical
disempowerment they experienced as a teenager has stayed with them throughout their adult life.

Additionally, this project identifies powerful visual and bodily rhetorics related to unwed
pregnancy. I explore the rhetorical power and political implications of unwed, pregnant bodies
that were once hidden from view and then, in later times, unwed pregnant bodies that were seen.
Thus, the project is also an exploration of rhetorics that surround a particular type of contested
body, and an investigation of who can speak for those bodies when they are denied voice, wholly or partially. Also significant are the changing rhetorical constructions of these bodies—how they are described so as to provoke or quell the concerns of the larger body politic. And finally, the project implicates women’s rhetorical agency, particularly as women struggle and strain to cultivate literacies about their own sexuality and sexual, reproducing bodies. In sum, I trace the changing rhetorical contours of unwed pregnancy as an absence and then as an increasingly public problem and site of ongoing debate.

**Unwed Pregnancy and The Sexual Double Standard**

Woven throughout this project is evidence of the sexual double standard, a value system whereby men who have sex outside of marriage are tolerated, if not encouraged to do so, but women who have sex outside of marriage are judged for “their” indiscretion. The irony of the sexual double standard lies in its ability to systematically and simultaneously hold men and women to different standards for their (heterosexual) sexual behavior despite the obvious need for both a male body and a female body for any two-person (heterosexual) sexual act. Further explanation of the sexual double standard will provide a useful conceptual apparatus that can be applied to all subsequent chapters of this project.

Historically, the double standard deemed male sexuality outside of the confines of marriage normal, if not ideal, but considered female extramarital sexual activity evidence of a fallen body, an impure soul, and even biological and/or racial insufficiency. The legacy of the double standard stems, in part, from prostitution as it existed before the turn-of-the-twentieth-century, for prostitution was thought to function as a necessary corollary to the sacred institution of marriage. Before prostitutes were identified as a social evil, they were “quietly tolerat[ed]” in
Victorian society (Rosen 5). Although prostitutes transgressed a strict moral code, the profession was still thought to provide the best outlet for hypersexual men who needed to purge themselves so as not to bring their urges into the Victorian home. Physicians supported prostitution insofar as they advanced the belief that sexual indulgence was a critical component of “masculine health” (Wilson 160). Additionally, if men were not able to channel their unsatisfied sexual energy by way of prostitutes, then the threat of sexual deviance enacted by white men on “good” white women escalated (Wood 135-6). Prostitution functioned as well as a “marital safety-valve” that spared wives from unwanted sex and pregnancy (D’Emilio and Freedman 140). Thus the brothel, as a “plac[e] of tolerance,” siphoned off excess sexuality and thus seemingly aided in maintaining social equilibrium (Foucault 4). It is important to note, however, that because the model for appropriate female sexuality conformed to the narrow tenets of true womanhood, any woman who was sexually active outside the confines of marriage was generally thought to be a prostitute (Stansell 175).

Although this discussion of the sexual double standard seems to reflect an antiquated, Victorian notion, variations of the same belief held immense sway throughout a large portion of the twentieth century. Indeed, cultural acceptance and perpetuation of the sexual double standard contributed greatly to the shame associated with unwed pregnancy and the accepted practice of hiding unwed mothers and encouraging them to surrender their “fatherless” children. Specifically, the sexual double standard dictated that unmarried, virginal women were “good” and that unmarried women who had had sex (or were rumored to have done so) were “bad.” Women were categorized as either one or the other; those who were “good” were to be married, but those who were “bad” had other “obvious functions” (Whitman). A 1961 Better Homes and

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4 True womanhood, as described by Barbara Welter, was an ideology that advanced the notion that womanhood was defined by purity, piety, submissiveness, and domesticity.
Gardens article attempts to explain the sexual double standard and features the opinions of several young men:

“I know it’s wrong and inconsistent,” admits one man. “I have had and will continue to have intercourse before marriage. But I just can’t face the idea of marrying a girl who isn’t a virgin.” Another explains, “I want my wife to be all mine—undamaged by premarital relations with anyone else. But I will take advantage of every opportunity I get with girls who are the type you go out with for sex” (121). Because unwed pregnancy visibly marked a woman as a “bad” girl, she and her family faced great shame if anyone found out that “she got herself in trouble.”

The sexual double standard advances the belief that women should hold themselves to a standard of purity, an extension of one tenet of true womanhood that assumed women were pure by nature. As I will describe in greater detail in chapter two, the impossible fiction of purity contributed to the practice of hiding women away and denying their motherhood during the era of hiding and surrender. But as this overall project suggests, notions of purity continued to shape ideas about what women should know about sex and their sexual bodies and how women should comport themselves sexually well into the 1970s and beyond. As becomes apparent when studying unwed pregnancy across decades, “women are ultimately [held] responsible for not only their own sexual purity but societal sexual morality as well” (Pillow 6).

**Feminist Historiography and Additional Methodological Considerations**

The overarching methodology of this project is feminist rhetorical historiography. As Patricia Bizzell asserts, there is a difference between feminist rhetorical history and feminist rhetorical historiography (7). While the former might primarily seek to more fully account for the rhetorical history of women, feminist historiography embraces the inability to recover and
understand one history or one historical truth. This incapability stems from the inescapable situatedness of researchers as well as the inability for the past to be available and complete for our contemporary analysis. Feminist rhetorical historiography sets out to uncover and explore various sites of rhetoric, then, but to do so with these limitations in mind, purposefully choosing to read the fragments of history “crookedly” and to interpret and retell them “slant” (Glenn, *Rhetoric Retold* 8).

Of course, “crooked” and “slant” does not equal sloppy or uninformed; on the contrary, feminist historiography holds itself to stringent standards in order to enable reflective, rigorous, and responsive scholarship. In addition to modeling my historiographic questions and approaches on the scholarship of Cheryl Glenn, Susan Wells, Jacqueline Jones Royster, Shirley Wilson Logan, and Jessica Enoch (among many others), I also embrace three of Royster and Gesa Kirsch’s “critical terms of engagement” for feminist rhetorical practice: critical imagination, strategic contemplation, and social circulation.

First, employing “critical imagination” means embracing inquiry with an eye for the “noticed and the unnoticed, rethinking what is there and not there, and speculating about what could be there instead” (19-20). Because it is based in large part on rhetorical silences, this project employs critical imagination in conjunction with the methods described below.

“Strategic contemplation” encourages meditation on our subjects of study as well as our relationship with them, and a willingness to resist “immediate closure” and “neat resolutions” as answers to our own critical questions (21-2). This project has challenged me to embrace strategic contemplation as I was encouraged by participants and colleagues to see past my own perceptual incapacities and resist the myth that much of the shame and stigma of unwed pregnancy
disappeared by the 1970s. I needed to use strategic contemplation to “purposefully rea[d] beyond” a myth that threatened to foreclose an important rhetorical story (Glenn and Enoch 14).

Finally, I see historiography as a way to explore “social circulations,” or the ways in which the rhetorical past connects to the present and the future and how its study can create understanding beyond disciplinary-specific concerns. This broader field of interest and possible application suggests how rhetoric is a “cultural phenomenon and very much a human enterprise” (Royster and Kirsch 23). My project adopts an intergenerational scope in order to more fully connect stories often tied to histories of adoption to later struggles for women’s reproductive rights and public discussions about teen pregnancy. By balancing close textual rhetorical analysis with a social circulation stance, I attempt to maintain a rhetorical focus but speak both to and potentially beyond those in the field of rhetoric and composition studies.

In sum, I follow Karlyn Kohrs Campbell’s understanding of feminist historiography as a methodology that enables scholars to “survey a vast body of primary and secondary material” so as to “develop alternative rhetorical traditions,” while keeping their this work “grounded in the constraints on women’s discourse, [which] is conversational, interpersonal, participatory, and egalitarian and that has the capacity to redefine the genres of public interaction” (“Consciousness-Raising” 60).

**Rhetorical Display**

In addition to feminist rhetorical historiography, four other sites of methodological inquiry allow me to consider the dispositions and epistemologies that aid in understanding the complex, changing, and rhetorically dense experiences related to unwed history across the 1960s and 1970s. These methodologies include rhetorics of the body, feminist disability rhetorics,
visual rhetorics, and spatial rhetorics. I work with these methodological frameworks under the assumption that they each represent valuable sites of inquiry, but that they are especially useful when considered in relation to one another. I classify this polymethodological approach “rhetorical display” after Glenn’s description of one of five prominent features of contemporary feminist rhetorical practice that is “moving steadily beyond a sole focus on women’s rhetorical contributions” (“Rhetoric and Feminism” 47).

First, this project examines how discourses of unwed pregnancy have been historically tethered to actual bodies—how rhetorical meaning in this instance intersects with one of the most physical human processes and can be displayed by corporeal bodies made of “flesh, blood, and bones” (Selzer 10). Jay Dolmage suggests that “when we look through rhetorical history for what is most tense and contested, we most often come to stories about the body” and thus we should “engage the rhetorical body in our historiography.” Thus, Dolmage argues that “intensely fraught negotiations” about the body illustrate “constellations of value and their variable gravities”—or, more simply, the ways that humans make and assign meaning (Agnew 113). By infusing this historiography with concerns about physical bodies, I uphold Elizabeth Grosz’s contention that body studies can advance feminist goals insofar as

[q]uestions of sexual specificity, questions about which kinds of bodies, what their differences are, and what their products and consequences might be, can be directly raised in ways that may more readily demonstrate, problematize, and transform women’s social subordination to men. (vii-viii)

Grosz’s call is well suited for rhetoricians, who are attuned to looking for ways that meaning is made by and on behalf of bodies. By examining how discursive and material practices “collude
and collide with one another,” scholars can destabilize common assumptions and open themselves to new ways of interpretation (Dickson 298).

Methodological considerations of the intersections of feminist scholarship and disability studies are of particular use to a project about bodies that elicit shame and are systematically removed from view. Although theories of disability are never far from discourses about disabled bodies, a disability framework calls attention to the ways in which disability is a symbolic network. As Tobin Siebers explains, disability studies examines “the social meanings, symbols, and stigmas attached to disability identity and asks how they relate to enforced systems of exclusion and oppression” (3). Thus, with its focus on the constructedness of disability, this conceptual lens also enable scholars to scrutinize the interdependent relationship between normal and abnormal. By critiquing normalcy and the notion that biology accounts for “social imbalance,” disability studies also “challenges both the attribution and the construction of deviance—not just reversing attributions of deviancy, but also deconstructing the mechanisms by which an individual or group might be stigmatized” (Dolmage and Lewiecki-Wilson 25). These mechanisms, I argue, are nuanced rhetorical processes that can be obscured by a propensity to focus on the apparent stigma.

Feminist disability studies, an area of inquiry emerging in its own right, emphasizes the ways in which a disability studies framework complicates any seemingly stable notion of identity, including sex and race, and suggests that the human body’s proclivity toward deterioration might make disability the only essential human characteristic (Garland-Thomson, “Integrating Disability” 34). Additionally, there exists a powerful relationship between the extraordinary body and the narratives used to explain what that body’s difference means. In the words of Rosemarie Garland-Thomson, “the quotidian world has embroidered certain minority
forms of embodiment into bestiaries and grotesqueries through with it marvels, scares, or ponders itself” (*Staring* 167). In other words, how we see the visibly abnormal body relates to the fictions we tell ourselves as reassurance of our own normalcy.

As this discussion might suggest, I understand discourses of and about the body and its relationship to normalcy and abnormality in concert with other rhetorical methodological frameworks, namely visual rhetorics and spatial rhetorics, both areas of extensive rhetorical scholarship in their own right. Visual rhetoric might be thought of most generally as the study of symbolic actions “enacted primarily through visual means” that are “made meaningful through culturally derived ways of looking and seeing” (Olson, Finnegan, and Hope 3). A great deal of work has been done to explore the rhetorical power of visual images, particularly when these images circulate publicly (e.g., Hariman and Lucaites). My interest in visual rhetoric aligns most closely with the rhetorical mechanisms of shaming and stigmatization, and how rhetorical vision allows shame, an emotion, to be brought before the mind’s eye as well as the seeing eye (Hawhee 151). Additionally, as my project suggests, the recent story of unwed pregnancy is, in part, a story of bodies that are purposefully removed from sight or allowed to be seen.

The visibility or invisibility of the stigmatized body also relates to those bodies moving in and out of specific spaces such as the home and the school. An ever-growing number of rhetorical scholars assume a spatial-theoretical lens; this body of literature is also too extensive to overview here in its entirety. In short, this project relies on the theoretical understanding that rhetorics, and the physical spaces in which these rhetorics find traction, exist in relationship with one another and shed light on broader cultural ideologies (Johnson). Additionally, the relationship between rhetoric and spatiality can be traced in literal places and architectures (Mountford) as well as in imagined relationships with space (Clark). Enoch imagines a new way
of feminist historiography that emphasizes the “rhetorical process of gendering” (emphasis added). Enoch explains that such historiography “interrogates the rhetorical work that goes into creating and disturbing the gendered distinctions, social categories, and asymmetrical power relationships that women and men encounter in their daily lives” (Agnew 115). And to do this sort of work, Enoch advocates rhetoricians employing a spatial methodology—one that “stud[ies] the language that designates a space, the materials that construct and adorn it, and the activities enacted inside it,” the ultimate goal being “to investigate how the composition of space creates, maintains, or renovates gendered differences and understandings” (Agnew 116). Thus, I use the term “spatiality” or “spatial rhetorics” to simultaneously invoke constructed spaces (in this case actual buildings designated as “maternity homes”) and discursive spaces (imagined places like “school” or “home” with all of their gendered, cultural trappings) as well as the rhetorically inflected relationships that bodies have with and within those spaces.

By bringing the rhetorical study of bodies, disability, visuality, and spatiality in conversation with one another and by infusing these sites of inquiry with a feminist historiography methodology, this project considers the power of rhetorical display, or “other realms and dimensions of delivery” (Glenn, “Rhetoric and Feminism” 47).

**Rhetorics of Silence**

A third and final theoretical lens allows me to triangulate this historiographic project. In *Unspoken: A Rhetoric of Silence*, Glenn argues that “Any theory of rhetoric must also have a concomitant theory of silence” (153), and her study of the rhetorics of silence maintains that “people use silence and silencing every day to fulfill their rhetorical purpose” (153). It is the strategic rhetorical practice of silencing and Glenn’s notion that silence has a function, that it
“reveals speech at the same time that it enacts its own sometimes complementary rhetoric” that guides my examination of what has been said and what has not been said about unwed, pregnant bodies during the twentieth century. As Glenn reminds, “neither speech nor silence is more successful, communicative, informative, revealing, or concealing than the other” (“Silence” 263).

Employing a methodology of silence means taking seriously the claim that the art of silence (as well as its sister art, listening) is “as important to rhetoric and composition studies as the traditionally emphasized arts of reading, writing, and speaking” (Glenn and Ratcliffe 2). This methodological framework encourages consideration of how silence was not enacted momentarily in the history of unwed pregnancy, but how it was used, systematically, to disempower already-stigmatized women. Thus, central to all parts of this study is Glenn’s reminder that “the meaning of silence depends on a power differential that exists in every rhetorical situation: who can speak, who must remain silent, who listens, and what those listeners can do” (Unspoken 9). This theoretical approach allows me to consider the discursive and non-discursive mechanisms by which “some people (women) are encouraged or forced to remain silent [, which] can be traced to cultural norms which use silence to deny them agency” (Ferguson 52).

Finally, attention to silence aligns with philosopher Nancy Tuana’s advocacy of the study of feminist epistemologies of ignorance, or the ways by which a lack of knowledge about a particular, gendered, phenomenon is cultivated. Examinations of ignorance are important, argues Tuana, because “practices of ignorance are often intertwined with practices of oppression and exclusion” (“Introduction” vii). In the case of unwed pregnancy, sites of silence strongly overlap with ignorance about the body and one’s own sexuality, ignorance about pregnancy, and the
charade of ignorance that perpetuated narratives of women “going away” from home for a number of reasons, none of which acknowledged pregnancy. Tuana contends that scholars must interrogate “the practices that account for not knowing” or “an account of the practices that resulted in a group unlearning what was once a realm of knowledge” (“The Speculum of Ignorance” 2).

Methods

I follow Hui Wu’s understanding of methods, which she describes as “techniques of evidence-gathering in the research process” (84). This project relies on a mixed methods approach that gathers data from primary and secondary sources (including qualitative interviews) in order to perform rhetorical layering.

One of my primary techniques for evidence-gathering has been identifying primary and secondary sources that I read in conversation with and against one another. Secondary sources allow me to construct a rich contextual backdrop against which to consider primary texts. This context is informed by any variety of political, social, cultural, legal, religious, economic, and recreational features of a particular time period. Primary materials provide what I call “interstitial evidence” that aids in reconstructing an historical moment. Most importantly, though, primary materials provide the original discourses of those writing and speaking about unwed and teen pregnancy. These primary materials include, for example, newspaper and magazine articles, legal rulings and dicta, Congressional testimony, conference reports and other inter- and intra-agency texts composed by social workers and maternity home personnel, maternity home pamphlets, and guidebooks for new maternity home residents. I also analyze visual images that accompany some of these alphabetic texts in order to better incorporate the methodological
considerations of rhetorical display. I have obtained these texts from various places—libraries, several archives, and online.

This project also relies heavily on the qualitative research methods of conducting face-to-face interviews with women who experienced hiding and surrender. Conducting interviews has permitted me to better account for women’s experiences that are still relatively invisible and under-studied. Because qualitative inquiry lends itself to “exploration, discovery, and inductive logic,” it is a particularly useful technique for a feminist historiographer interested in listening to silenced stories (Patton 55). Thus, during my interviews I was mindful to engage in rhetorical listening, or a “stance of openness” theorized by Krista Ratcliffe that fosters, but does not force, conscious identifications (1-2). Most importantly, qualitative interviews allow this project to practice an inversion of the long-held silencing of women who went away and carried the secrets of their past for so long. Interviews encourage these women to share their stories and thus assume the place of rhetorical agent, not just rhetorical subject in relation to this project. In so doing, I am not “giving” voice to these women but I am opening a platform for collaboration and encouraging a “dialogic relationship between past and present” (Royster and Kirsch 14). In the most basic of terms, though, I encourage women to share their stories with me because, in the words of Joy Ritchie and Kate Ronald, “any group that has been absent or silent must first demarcate and identify its own terrain to establish a presence where one has not existed” (xviii).

The history of unwed pregnancy is one that reflects fears that have no rational basis and impossible ideals that cannot be fully realized. In other words, it is a history that does not entirely “make sense.” Nevertheless, these fears and ideals as well as a host of other emotions, beliefs, and values infused rhetorics that had real, material implications for millions of women, their families, and their children. Thus, I agree with Richard Leo Enos, who suggests that
rhetorical historiography’s primary task is to “reconstruct how meaning is made and shared through discourse” (49). Thus, my final technique is Enos’s heuristic of “rhetorical layering.” Enos explains his “four, interactive strata of analysis” as follows:

- discovering the social, political, and cultural conditions;
- reconstructing the rhetorical situation or *kairos* that induces discourse;
- analyzing the actual discourse;
- and finally, displaying of this work in a manner that reconstructs the dynamic layers of these layers. (49)

I situate the breadth of primary sources that inform this study—representing a range of perspectives and registers from Supreme Court opinions to articles in teen magazines—within the larger context of two turbulent decades in American history. In so doing I hope to shed light on this portion of women’s history, understand the rhetorical practices and apparatuses that shaped it, and tell a compelling and interesting story that, even if “crooked,” offers insight and a valuable contribution to women’s rhetorical historiography.

**Overview of Chapters**

This project follows a rough chronology of the two decades under investigation. Thus, chapter two, “Unwed Pregnancy in the 1960s: An Architecture of Silence,” opens the dissertation with an overview of the hiding and surrender years. I delineate salient and commonly shared experiences related to unwed pregnancy such as women finding out about their pregnancy and telling (or not telling) their parents or sexual partner, various ways in which these women were hidden and made anonymous, their experiences of giving birth, and their eventual return to their families. Excerpts of women’s stories about their experiences provide the bulk of this retelling. Over this chronological story, I drape an explanation of the rhetorical
processes by which women were made to feel complicit in a practice that ultimately sought to erase their identities as mothers. I suggest that mothers were encased in an architecture of silence that led to their hiding and surrender because they did not fulfill the ideal of purity that was so important to their families and their greater communities. Plied with rhetorics of shame, forced to endure the stigma of a pregnant body, and scapegoated in an effort to preserve the family’s reputation, few white unwed mothers of this era had the ability to avoid the eventual surrender of their child, a site of trauma that they typically faced alone, in unspoken grief.

Chapter three, “Between Promise and Practice: New Permissiveness, Stigma, and Unwed Pregnancy in the Early 1970s,” shifts the project’s focus to the opening of a new decade and questions the first myth purporting to explain how the practice of hiding unwed mothers allegedly was ending. On one hand, the early 1970s were a time when the sexual revolution awakened in some a spirit of sexual permissiveness. On the other hand, evidence exists of the ongoing prevalence of the sexual double standard and continued fear of the stigmatized, unwed mother’s body. Disgust toward unwed mothers, which had previously circulated silently or in whispers, now began to take the form of official public discourse. This chapter examines two pieces of case law that decided whether or not unwed, pregnant mothers had the right to remain in school as well as the first national mandate for inclusion of unwed, pregnant students in American high schools. But these legal rhetorics were ultimately incompatible with the irrational feelings of shame that a guarantee of educational rights sought to rectify. Thus, as unwed pregnancy began to inch into the public arena, there remained a vast divide between the promise of equality and the continued practice of injustice.

In chapter four, “The Pill, Roe v. Wade, and the Myth of Agency,” I tackle the other two pervasive myths that contribute to the fallacy that unwed pregnancy ceased to be a problem in
the 1970s. Trying to understand how the development of the birth-control Pill and the 1973 U.S. Supreme Court ruling on Roe have contributed to such an unflagging and unmitigated narrative of women’s agency, I construct a brief history of the Pill’s use and the events leading up to the Roe ruling. A close textual examination of the Roe ruling and dicta demonstrates how the technical basis for the ruling constrains women’s rhetorical agency far more than popular narratives of the ruling suggest. I conclude the chapter by pointing toward other texts that provide a far more realistic sense of how women had to struggle in order learn and embrace a basic literacy of their own reproductive and sexual bodies. Although the Pill and Roe continue to eclipse these other rhetorical efforts at ground-up empowerment, I argue for recognizing the difference between conferred agency via patriarchal systems and rhetorical agency engendered by feminist gains within that system.

Chapter five, “Of Epidemics and Epideictics: Rehabilitating Pregnant Teens in the Late 1970s,” reflects upon the final four years of the long 1970s. In a post-Roe America, anxiety rose, primarily among conservatives, in response to the perilous state of the family unit. Pregnancy among the unwed contributed to this supposed decline in values, and those across the political spectrum were urged to recognize that teenage girls were becoming mothers at unprecedented, even epidemic proportions. The old problem of unwed pregnancy, then, was born anew, this time cast as “teen pregnancy.” In this chapter I scour magazines and newspapers in an attempt to capture the extensive teen-pregnancy discussion. I argue that rhetorics of shame had, in the late 1970s climate of distrust and economic worry, turned to rhetorics of blame. Even a Congressional effort to fund intervention tactics meant to curb teenage pregnancy depicted teen mothers as pathological and a threat to the nation’s public health and economic wellbeing.
Thinly veiled moralism, the seemingly objective and scientific perspectives on the teen pregnancy “problem” allowed little room to envision real change.

Chapter six, “Concluding Thoughts: Puncturing Silences, Disclosing Secrets, and Extending Conversations about Unwed Pregnancy” suggests that the history of unwed pregnancy since the 1960s is one that is ever constructed as a problem—whether a private, familial problem or one of greater public concern—but always a problem that lacks a sound solution. Additionally, I argue that the sexual double standard and its attendant reliance on a fiction of purity continue to explain why silences, secrets, and rhetorics of shame and blame have held so much sway over unwed, pregnant bodies. The conclusion also suggests a range of additional inferences and implications for areas of further study that stem from this project.

As an historiography and an extended rhetorical case study, “Secrets and Silences: Rhetorics of Unwed Pregnancy since 1960” argues that the history of unwed pregnancy is a closer one that most of us might think, and that it behooves all of us—as rhetorical scholars, feminists, or simply individuals who value women and respect their bodies—to listen to what this past is yet waiting to tell us.
CHAPTER TWO

Unwed Pregnancy in the 1960s: An Architecture of Silence

Whatever is unnamed, undepicted in images, whatever is omitted from biography, censored in collections of letters, whatever is misnamed as something else, made difficult-to-come-by, whatever is buried in the memory by the collapse of meaning under an inadequate or lying language—this will become, not merely unspoken, but unspeakable.

Every day, year round, more than six hundred babies, unintended and unwanted, are delivered to their one parent—an unmarried mother. Of these six hundred babies, five hundred and twenty-five are lost to the public eye. They merge, publicly un-noticed, into the general population. Nobody knows exactly what becomes of them. Many of them are absorbed into the already existing family of the unwed mother, to become the grandmother’s “child” and the mother’s baby sibling. Many are given in adoption through solid social agency channels, to become the treasured and owned children of established families. Some are disposed of—given or sold—via black or grey market transactions. Some, whose mothers have money support from families or sexual partners, are kept by the mother, or perhaps more often tucked away in boarding care until she can resolve her conflicts or her precarious status. The remaining seventy-five of the daily crop of six hundred ‘illegitimate’ babies are carried by their mothers to the door of the public relief agency—usually to the Aid to Dependent Children program—with the request for support.
—Helen Harris Perlman, “Unmarried Mothers, Immorality and the A.D.C,” paper presented at 1963 Florence Crittenton Association of America Conference (emphasis added)

Karen Wilson-Buterbaugh was a sixteen-year-old, high school senior in 1965, when she became pregnant. “I was taken out of school overnight and whisked away to one of two wage homes in which I was made to do chores and babysit the children of strangers,” Wilson-Buterbaugh explains. In her seventh month of pregnancy, Wilson-Buterbaugh became a non-working resident of a maternity home and then gave birth to a child that she would “surrender” for adoption. An unwed pregnancy was, in the 1960s, a mark of incredible shame to be hidden and secreted at all cost, and unwed mothers were given little, if any true, ability to resist a plan
set in motion by parents, social workers, religious officials, and other authority figures supposedly coordinating on the behalf of the unwed mother and her “illegitimate” child. Specifically, this plan resulted in women\(^5\) relinquishing their child to a family who represented many things that the unwed mother was thought not to be: educated, capable, and married. Thus, these reluctant mothers, often young, scared, and isolated, had little choice but to surrender that child. Wilson-Buterbaugh is one of many “invisible” women—estimates range from one and one-half million to six million in the United States—who temporarily hid an unwed pregnancy and then surrendered a child for adoption in order to keep that pregnancy a secret.\(^6\) In addition to losing a child, these women also surrendered their identity as mothers in order to obediently secret their shamed past (Buterbaugh).\(^7\)

Wilson-Buterbaugh contacted me after hearing about my research on unwed mothers. Wanting to share her story with me, she warned, “I would prefer not to work with anyone who will use the ‘birthmother’ term as we ARE the mothers of the children to whom we have given birth . . . not a label. We were labeled ‘unwed mothers’ during the Baby Scoop Era [a term that Wilson-Buterbaugh has coined in order to discuss this experience in relation to adoption practices during this time]. I refuse to participate in the further oppression of mothers like me” (Wilson-Buterbaugh). As a rhetorical scholar and feminist historiographer, I wanted to heed

\(^5\) I use the terms “woman,” “girl,” and “mother” interchangeably. For me, the distinction between “girl” and “woman” relates to age, but also implicates the politics of representation (e.g., many adult females want to be recognized as women instead of being infantilized by being called “girls”) and can suggest sexual knowledge and/or experience. Females who endured unwed pregnancy and related rhetorics of shame and silence had exceedingly adult experiences of being isolated and held solely accountable for their actions. At the same time, these females were often in their teens or early twenties and were punished for being a puerile member of a larger patriarchal system. Thus, both “girl” and “woman” seem simultaneously appropriate and unsatisfactory. “Mother” is, perhaps, the most appropriate term.

\(^6\) The practice of hiding unwed mothers from view and/or forcing them to surrender a child for adoption in earlier decades is not limited to the United States. Magdalen Laundries, notorious in Ireland, represent a similar but distinct experience in women’s history. (See: Smith, James M. Ireland’s Magdalen Laundries.) Hiding and surrender were also practiced in Canada, Australia, and Spain (Rather).

\(^7\) According to Ann Fessler, one and one-half million women went away and surrendered a child between 1945 and 1973; According to Wilson-Buterbaugh, the number is approximately six million women (Buterbaugh). Of course, no accurate figure will ever be known.
Karen’s wishes concerning terminology, but just as importantly, I wanted to hear more about how, for Wilson-Buterbaugh—and, as I learned, some other mothers, the marker “birth mother” functions to extend oppression and silence. I asked Karen for further clarification and she helped me to understand her position:

I used to use the “birth” prefix early on, not understanding yet the negative power of it. Then I, and many others, evolved into using other ways to differentiate [ourselves] such as mother of loss, first mother, original mother, etc. It is an evolution. Some stay stuck in the “birth” mode, sadly. Many, after learning what happened, the history of adoption practices and what their own personal experience was, even evolve into using “mother of baby TAKEN by adoption.” Or even “removed by adoption,” as they learned that they had no choice. No options presented. (Wilson-Buterbaugh)

“Birth mother,” as I have come to understand the term, is a label that directs attention to the unwed, pregnant body as a site of gestation, a vessel for birthing a child that will not be one’s own. It is a term that metaphorically continues to deny an identity (mother) that was once, many years ago, erased. Karen opposes the term because it diminishes her motherhood to acknowledge only her biological capacity. Similarly, mothers commonly refer to the so-called “decision” to relinquish a child as “surrender,” evoking the power wielded over them as new—but unwed, and thus disenfranchise—mothers and their feelings of having to submit to this unyielding authority. Such containment is intimately tied to the disgrace of being unmarried and pregnant in 1965.

Although unwed pregnancy was considered shameful in America well before the 1960s, this decade represents the apex of forced hiding and the near-mandate to surrender “illegitimate” children up for adoption. For many years, experiences of “going away” remained unspoken—
shameful family secrets that could not be openly addressed, even by parents who tried to protect a daughter from social stigmatization and shaming that they found unfair. But in recent years, this silence has begun to break apart. Two scholars—Ann Fessler and Rickie Solinger—have produced monographs dedicated to studying practices related to unwed pregnancy in the United States. In addition (and in part because of the work of these two scholars), many mothers have begun to work through imposed silences in order to talk to one another and, in some cases, reunite with the children they surrendered for adoption. A few of these mothers have penned memoirs about how their experience as unwed mothers during the 1960s shaped their entire, adult lives. This chapter builds from such foundational work and shared storytelling in order to further explore going away as a lived and highly rhetorical experience. I suggest that experiences of going away are more than atomistic stories of individual girls “in trouble.” Instead, when considered together, these stories make salient a blueprint of sorts, a guide that begins to make sense of how and why unwed, pregnant bodies moved from “normal” places (like the family home), to hidden places (like a maternity “home,” see Fig. 1) and then back again. This movement was enabled by material architectures, but was also facilitated by an architecture of silence—an elaborate design of rhetorical performances enacted to pretend that an unwed pregnancy simply never existed. After all, unwed mothers not only surrendered children while they hid, they also surrendered their very identities as mothers for the sake of their own and their families’ reputations. Movement through these architectures would uphold a fiction—the seemingly uninterrupted narrative of the family’s normal life.
I contend that practices of hiding an unwed pregnancy and surrendering a child for adoption represent a significant portion of women’s rhetorical history, but one that is still largely unknown and misunderstood. In order to begin to account for such practices, I base this recuperation primarily on interviews I conducted with fifteen mothers. The purpose of these interviews was to listen to each woman’s story of hiding and surrender and account for points of similarity across these narratives. Further, I try to understand these long-silenced histories as architectures of silence that implicate bodies, voices, and—ultimately—identities. I argue that this architecture of silence was constructed and imposed first and foremost through rhetorics of shame, discourses of humiliation that stripped women of feelings of self-worth because of their new identities as unwed mothers.\(^8\) Rhetorics of shame thus provided a solid framework for an

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\(^8\) As I will describe in greater detail below, rhetorics of shame were pervasive within the larger cultural climate of the 1950s and 1960s, although some women were not shamed by their families. In other words, all unwed mothers faced the shame of unwed motherhood, whether or not this shame was made explicit (through words or silences) within their families.
architecture of silence—a frame that supported the secrets, lies, and scapegoating that completed this construction. The plans for hiding women within this architecture of silence were already drawn up, the knowledge that girls “in trouble” could and did “go away” to homes for unwed mothers was itself no secret. A mother or father or girl aghast at the realization of an unwed pregnancy could, without too much effort, tap into this plan, relying on the trusted blueprint of secrets and scapegoating that was supposed to ensure that a daughter’s shame would be forever hidden. But, as many such mothers have come to realize in their adult lives, the plan had a fatal flaw, and that was the secrecy itself. For secrets, by definition, are potential disclosures. “A private life can be quite boring,” writes Edwin Black, “but a secret life never is” (145). The secret always threatens to escape. Thus, secrets can be functional, but foremost they are imperfect, for so often they rupture in some moment, at some place, to someone, and, always, for some reason. In this case, word of a “girl in trouble” often got around, and whispers gave voice to that which was never to be spoken. But for the unwed mothers involved, the architecture of silence was both real and imposing, for it upheld an unarticulated social code that demanded that young women see themselves as wholly culpable for a grave wrong (getting pregnant outside of marriage) and thus not fit to be mothers.

This chapter is an attempt to provide an account of the seemingly invisible or taken-for-granted rhetorical apparatuses by which women were silenced, hidden, and erased because they were held culpable for an unwed pregnancy. Based on this account, I suggest that this architecture of silence functions paradoxically: as an attempt to conceal pregnant, unwed mothers (by tucking them away and out of sight), hiding participates in an elaborate rhetorical performance that unwed mothers had to endure for the sake of those (parents, boyfriends, friends, etc.) who remained in public view, never openly acknowledging the reality at hand. In
other words, girls went away to avoid shame, yet such hiding reinforced the notion that theirs was a shameful identity. I further suggest that the implications of these rhetorics of silence are not only physical or temporary, but rather enduring; they inaugurate a state of perpetual shame even though they are constructed upon the belief that women can and will forget their identities and experiences as unwed mothers.

In what follows, I provide a synoptic view of practices of hiding, birth, and surrender as experienced by white, primarily middle-class women during the 1960s. This approach is admittedly incomplete, for hiding was not limited to only this segment of the population. Nevertheless, this demographic accounts for a largely representative sample of women who went away and thus provides a useful overview that scaffolds these largely unspoken histories. I open the chapter with a brief contextual overview of the 1960s, paying special attention to social expectations related to gender roles and sexual behavior at this time. I then provide an account of salient moments in the mothers’ stories of going away. First, I recount the women’s memories of learning about and disclosing their out-of-wedlock pregnancy to others—family members in particular, arguing that the architecture of the family serves as the initial site of shaming that precipitates hiding. Next, I recount the women’s experiences of going into hiding, which represent spatial practices of bodily erasure necessitated because of stigmatization (of unwed, pregnant bodies) and upheld by elaborate, coordinated secrets. Finally, I explore the traumatic end of this hiding, once the women gave birth and attempted to resume their pre-pregnancy lives. Experiences of birth and surrender represent the point at which the mothers most acutely sensed

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9 Because women hid their unwed pregnancies anonymously, I needed to rely on self-selection and snowball sampling, or the processes of obtaining participants through word-of-mouth recruitment. I was contacted by women who went into hiding sometime between the 1950s and the 1980s, although most of the women went away during the 1960s. Nearly all of the women who contacted me were white and were middle-class during the time of their pregnancy, and this demographic represents many of the women who went into hiding. My ongoing research includes identifying and speaking with more women of color and working-class women who hid a pregnancy so as to better account for various experiences related to unwed pregnancy during the twentieth century.
a loss of identity (as mothers), as they were physically and symbolically isolated from the child to which they gave birth. Finally, I argue that when moving back (to home, to school, to work, etc.), the women do not leave behind the architecture of silence, but instead experienced it anew—now bound by secrets, lies, and the ongoing shame of their past. I conclude the chapter by suggesting the implications of understanding this architecture of silence.

The 1960s: Sex Really Is Not for the Single Girl

The change—the pace of change. It was so rapid in the ‘60s that it threw a lot of families for a loop. Women’s rights, feminism, anti-war—the milieu was, it was just—it was anti-, anti-, anti-conservative parents. Talk about having your back up against it! —Jackie

The 1960s represent a time of instability and burgeoning social change marked, in particular, by the civil rights movement and the fledgling women’s rights movement. It can be tempting to reconstruct an era through its salient moments—instances of riot, of victory, and of death. But Jackie’s sentiment is instructive in helping think about the pressures of the 1960s from the standpoint of families, and especially parents who held on to a conservatism that would not easily be diminished. The idea of the family figured prominently in discussions of international and domestic affairs in the post-World War II years; this preoccupation demonstrated a desire among many to exert some level of personal control in times of significant cultural change (Adams 21-2). Amid the increasing chaos of the 1960s, from the abrupt and violent end of the fantasy of an American Camelot to the pulsating bodies at Woodstock, many Americans held tightly to the seemingly stable structure of the nuclear family and the fiction of its purity.

Mary Louise Adams’s study about postwar youth and heteronormativity reflects cultural patterns across North America. Although most of her case studies derive from English Canada, she notes that in the post-war years, Canada’s middle-class norms were strikingly similar to those of the United States, likely in part because of the influence of television programming, like that discussed in this section, that aired in both the U.S. and in Canada (6).
Many mid-century U.S. families defined themselves around a concept of familial stability that linked consumerism with the performance of familial “normalcy.” In the post-war years of affluence, middle-class, white families increasingly participated in a politics of respectability that established clear lines of in-group and out-group status. Performing this respectability meant, among other things, owning specific products (e.g., cars and television sets) and creating domestic spaces enhanced by product purchases (e.g., modern kitchens equipped with refrigerators) (Norton et al. 813-4). From a white picket fence to a perfectly set supper table, a “good” family could claim their status through visual and performative cues. Elaine Tyler May stresses that middle-class men and women “wholeheartedly and self-consciously attempted to enact cultural norms,” adding that such norms not only expressed one’s own ideal identity, but also “reflected the standard against which nonconforming individuals were judged” (Homeward 15, emphasis added). Along with this consumer-driven lifestyle, the notion of the ideal family also, in many cases, rested upon Christian values (Adams 21).

The performance of such white, middle-class conformity was exemplified by popular television shows such as *Father Knows Best* (1954-1960), *Leave It to Beaver* (1957-1963), *The Adventures of Ozzie and Harriet* (1952-1966), *The Donna Reed Show* (1958-1966), and *The Real McCoys* (1957-1963). Television programming delivered an idealistic reflection of the “normal” American family—a construction that purposefully avoided controversy in order to attract viewers and appease commercial sponsors (Halliwell 158). Considering that television consumption averaged five hours per day per person by 1960 (Spigel 1), and that 60 million households owned a television by the end of the decade (Rielly 193), television programming surely influenced the way that many Americans gauged the boundaries of middle-class status. For instance, *Ozzie and Harriet* introduced television viewers to a strain of situation comedies
located in the “typical” American home; thus, the program’s mundane, but “clean family normality” became the era’s “reigning aesthetic” (Spigel 177). Ozzie and Harriet Nelson, along with their two teenage sons, were simultaneously “ideal and ordinary” and demonstrated a “comfortable, placid lifestyle” that reassured viewers. The Nelsons were a real family of actors and their depiction on television collapsed the dissonance between reality and fiction, the everyday and the ideal. Thus, the Nelsons, like the Cleavers (from Leave it to Beaver), the Andersons (from Father Knows Best), and the Stones (from The Donna Reed Show), provided a model for domestic contentment, gender roles, and consumerism that American families could idealize and try to replicate (Linder 64). These families also articulated the proper flow of authority within the ideal nuclear family—from the wise father to the understanding, hyper-domesticated mother, down to the children. The Donna Reed Show featured the point of view of knowledgeable mother, Donna Stone, but her character’s playfulness and wit never realistically critiqued gender inequality, even if gendered assumptions fueled some of her jokes and playful jabs. Even the McCoys, who seemingly represented a non-nuclear family, touted paternalistic, family-oriented values (grandfather Amos McCoy and his grandchildren are central to the show, but the children’s parents were not prominently featured).  

11 Simply put, in the uncertainty of the 1960s, many Americans aspired to attain the fantasy of near-perfection modeled by the television families they encountered in their own living rooms.

This placid presentation of “typical” American life reflected some of the more stinging realities of sexism at this time but did not critique them; instead, these programs reinforced an ideology that such sexism was good, natural, normal, and—above all else—desirable. One

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11 For example, several episodes introduced the idea that female family members’ educational or entrepreneurial gains were undesirable because they threatened to emasculate male characters. Also, a recurring theme of the program was emphasizing the pride and honor of the (paternal) family name (and, thus, distinguishing oneself as a “real McCoy,” or the “real thing”) (Borelli).
important subtext of the mid-century obsession with marriage was the rigid belief that a woman’s value was primarily measured by her sexual morality—in particular, that a girl should cultivate herself to be a bride, dutifully and happily preserving her virginity for her future husband. The 1960s represent a time when this assumption started to come under scrutiny in various ways.

“Theoretically, a ‘nice’ single woman has no sex life. What nonsense!” exclaimed Helen Gurley Brown in her 1962 best seller, *Sex and the Single Girl*. Brown’s ode to premarital sex was, according to Historian David Allyn, “a wild confession, the kind of revelation that could destroy a woman’s reputation, cost her her closest friends, wreck her marriage” (10). Brown gave voice to a then-radical notion of women’s sexual freedom, which ostensibly was within their reach, given technological advances in the birth-control pill and the Intrauterine Device (IUD). But, as is explained in greater detail in chapter four, access to such birth control methods was impossible for many women—and unmarried women in particular. But what’s more, Brown’s enthusiasm for sexual freedom, however tempting for some, simply could not shake women free from the deep-rooted tradition that “good women” were to remain virginal until marriage.

By the later 1960s, a so-called sexual revolution was taking place in America, although this term was used flexibly to refer to a variety of counter-cultural expressions and actions.¹² Nevertheless, “free love” became a principle and a practice for those who believed that the point of sex was to experience pleasure, and that sexual encounters could take place outside the confines of committed relationships (much less marriage) (Rielly 28-9). In theory, free love equated sex with freedom by using sex as a weapon through which to challenge a variety of establishment beliefs—religious, social, political, etc. But in practice, free love simply did not “free” women, nor did it come without a price. In reality, expressions of free love extended

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¹² Allyn argues that in the early 1960s, the “sexual revolution” referred to how oral contraception changed the sexual behavior patterns of college-age, white women, but that it later referred to resistance against literary censorship and even the acceptance of nudity within film and theater culture (4).
exploitation and domination of women even as they purported freeing women from sexual norms (Bailey 322). Calling out the leftist men who took advantage of this paradox, feminist liberationist Robin Morgan proclaimed “Goodbye to All That” in her 1970 manifesto of the same name, articulating that the “theory of free sexuality” was actually no more than a “practice of sex on demand for males.” Despite various social movements’ attempts to identify, acknowledge, and rectify sites of injustice during the turbulent 1960s, the sexual double standard proved to be alive and well.

Who Were These “Bad Girls?”

Although segments of our population have become more understanding and tolerant of the unwed mother and her child, the majority of citizens still see it [illegitimacy] as an indication of immorality and a threat to the legitimate family system.

You were a good girl or a bad girl, which meant you either went all the way or you didn’t, no matter how long you were involved with someone.
—Carol Schaefer, The Other Mother

The constraining sexual norms that upheld a clear dichotomy between “good girls” and “bad girls” was felt acutely by those young women who, during the 1960s, became pregnant out of wedlock. In her memoir about becoming pregnant as a sophomore in college, Carol Schaefer reflects on the absurdity and the rigidity of the sexual poles of “bad” and “good.” Horrified because she was pregnant and unmarried, Schaefer “became like a child again” to her parents and agreed to hide in a home for unwed mothers (14). Although Schaefer did not feel like a “bad girl,” the idea of “bad” versus “good” continued to shape her thinking. In her memoir, she imagines the others she will meet at the home:

13 Beth Bailey’s scholarship on the paradox of liberation explores this idea more fully. Bailey examines misogynistic pictorial representations of women’s bodies in countercultural publications devoted to free love and liberation themes of the 1960s and later.
For sure they would be wearing tons of makeup, their eyes black and dramatically
drawn like those of Egyptian harlots . . . Or else they would be dumb little country
girls with used-up eyes and stringy dishwasher blonde hair. Their boyfriends drove
pickup trucks with rifles in the back widow and they probably weren’t sure who
the father of their baby was . . . Or maybe they would be motorcycle molls, with
silver-studded black-leather maternity tops. (23-4)

Of course, Schaefer actually encounters a house full of young women much like herself: “It
could have been our college cafeteria except for the big bellies” (24).

Women who hid an unwed pregnancy were alike in that they were pregnant at a time
when pregnancy—no matter what factors contributed to it—could only be publicly
acknowledged within the context of marriage. Through my interviews, I learned that not all
women who went away were teenagers, but that a significant number of them were. For example,
Mary, a resident in the Florence Crittenton Home of Toledo in 1969, specifically remembers two
other residents: a thirteen-year-old girl who was sexually abused by her piano teacher at a lesson
and a fourteen-year-old girl who had been raped by attackers when walking home from the
library. Among those I interviewed, the youngest pregnancy was at age 14 and the oldest was at
age 25. Overwhelmingly, the women who stayed at maternity homes said that the average age of
girls in the home was mid- to late-teens. In recovering stories of unwed motherhood—stories
saturated with memories of shame and humiliation (concepts that I discuss more below)—I
suggest that understanding these histories means acknowledging the range of young women who
found themselves unwed and pregnant as a result of varied experiences. It is too easy for the term
“unwed mother” to evoke the image of a young woman who has had consensual sex. But in fact
many women experienced the trauma of stigmatized unwed motherhood as young girls with little
or no sexual experience. Some of these young women had not consented to sex, and many were naïve about the mechanics of sex in general and therefore not even knowledgeable about what intercourse was or that they had experienced it. In the words of Gayle, “we were children. You know, [at that moment] we are kids. This is probably the first thing we’ve ever done wrong.”

In the 1960s, pregnancy signaled the impending birth of a child, and babies were another visual cue of normalcy. Babies functioned as a symbol of marital harmony and a couple’s sexual and emotional maturity, according to cultural historian Mary Louise Adams. Having a baby within marriage was a promise of sorts to the community: by having this child, my husband and I accept the norms of this community and our gendered places within it (Adams 32). By understanding the inflexible codes of sexual behavior and the rhetorically saturated gender expectations of this era, one can start to appreciate the constraints bearing down on unwed mothers-to-be.

_A Justifiable Erasure? Scapegoating and the Myth of Family Purity_

Understanding unwed pregnancy during the 1960s requires acknowledging that a woman’s sexual purity was not simply her own. Purity was an ideal that was ever so delicately tied to a woman’s reputation and, therefore, to what others said or did not say about her. Thus, a woman’s need to remain pure was intimately linked to her gendered role in relation to others in her life—her father, her mother, her siblings, etc. A woman who was “loose” or “easy” was impure. Such terminology functioned as a code, communicating that the woman was rumored to

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14 In many interviews, women explained that they had had consensual sex with a boyfriend, even if they became pregnant after only one, tentative sexual encounter. In several interviews, women disclosed that they had been date-raped. Memoirist Patti Hawn recounts the experience of going to the family doctor with her mother, who feared that Patti was pregnant. Hawn did not think that she could be pregnant because she did not think she had had sex, although she did admit that her “panties were off when [her boyfriend] pushed up against [her].” The doctor’s questions about “intercourse” and “ejaculation” were not fully understood by Hawn. The doctor’s words “sounded horrible. Like in health class when all the guys giggled about the human reproduction part and they showed that weird movie. I hated those words. That’s nothing like what Robert and I had done” (Good Girls 118).
have had sex or rumored to be willing to have sex. An “easy” woman’s perceived impurity not only marked her, it also threatened the reputation of others around her. Because a daughter’s sterling reputation was of such great importance, within the architecture of the family a good daughter was like a keystone, perfectly molded and positioned so as to secure the entire family’s appearance of normalcy. The keystone’s ornamental function pleases the eye while downplaying the function of the stone in ensuring structural integrity. Just as an imperfect center stone can compromise the strength and appearance of an arch, so too did a girl’s reputation—which could turn from “good” to “bad” with one nasty rumor—imperil the entire family’s image of decency (or, in other words, heteronormativity, middle-class stylings, etc.).

It is precisely because of a daughter’s precarious position in relationship to her family and loved ones that the elaborate plans of going away and coming back were set into motion. Specifically, these hidden young women were scapegoated, embroiled in a performance (both literal and symbolic) that was meant as an act of atonement. Kenneth Burke’s concept of the scapegoat mechanism offers a helpful heuristic by which to understand this process. Although the notion of scapegoating suggests disidentification—a way to cast off the other, the non-self—Burke suggests that identification and consubstantiality (sharing substance with) are both central to the process of scapegoating. Specifically, Burke argues that scapegoating can only come from “an original state of merger, in that all iniquities are shared by both the iniquitous and their chosen vessel” (Grammar 406). In other words, because persecutors see unfavorable characteristics of the scapegoat in themselves, the scapegoat is identified. Once that identification has been made (step one), there is a ritualistic alienation of the scapegoat, a division that separates the scapegoat (here, the daughter) from the persecutors (here, her family, in particular) and thus purifies them (step two). The scapegoating mechanism then rounds out by
producing a “new principle of merger” in which the newly purified persecutors are unified, distinct from the persecuted (step three) (*Grammar* 406).

The belief that a daughter becoming pregnant would bring humiliation onto her family is perhaps the most crucial aspect of the scapegoating process.¹⁵ If the post-war family was a social fiction beholden to notions of purity, the daughter’s body becomes a canvas on which allegiance or deviance is expressed. Such a pursuit of purity relies on instances of impurity for definition (thus trafficking in a logic of boundaries—body boundaries, property boundaries, etc.). Subsequently, *sexual impurity* functions as one form of what anthropologist Mary Douglas would call “boundary pollution” (155). The daughter *as daughter* is understood as a member of the family unit, and thus this familial context serves as the basis for Burke’s initial step of merger, or identification. A daughter’s unwed pregnancy would have been a grave embarrassment to her family, threatening to mark them as abnormal and impure—not able to maintain their middle-class status. In order to reestablish the family’s purity, then, the daughter must be alienated. I argue that this alienation occurred both discursively (through rhetorics of shame, described below) and physically (by hiding girls during their pregnancy). Through these acts of scapegoating, the family performed purification by disidentifying with their unwed, pregnant daughter, shunting her from them on the basis of her sexual impurity as an unmarried young woman, and enabling her eventual, symbolically revirginalized return.

¹⁵ Such misogyny aligns with Puritan and Victorian notions of women’s sexuality and morality being measured by their sexual purity (Welter; Bordo 117), but has much deeper roots. For example, Jewish sage Ben Sira who wrote in 180 B.C.E. asserts that daughters, who were unable to control their own sexuality, could cause more damage to a father’s honor than any other relation (Balla 54-5). The belief that an unchaste daughter brings shame upon the family has since come to represent transhemispheric *doxa* (Lerner 140; Leverenz 60).
Finding Out: Rhetorics of Shame and the Framework of Silence

Once the denouement [of telling her parents that she is pregnant] is over, the pregnant girl normally experiences a tremendous sense of relief. Just sharing her burden makes it somehow less heavy and the parental response, if not heartwarming, is rarely as dreadful as anticipated.

“You’re pregnant, aren’t you?” The words are hard, fierce. I cannot find my mother; she is gone, a million miles away, back in a place where there were no terrible surprises, where good girls don’t draw shame on good mothers.
—Meredith Hall, *Without a Map*

Before unwed mothers began to pack their bags, before they tried to figure out where to go to hide, they often had to let someone know about their pregnancy. A disclosure inaugurates the secrets yet to come; the flawed plan of denial is already compromised. The moments of awareness and disclosure—women finding out that they are pregnant and then sharing this information with others—is a salient portion of many stories of unwed pregnancy during this time.¹⁶ For example, memoirist Margaret Moorman recalls her experiences of learning about her pregnancy:

When my breasts began to swell and ache, I told Dan [Moorman’s boyfriend] I was afraid I had cancer. ‘You are pregnant!’ he shouted. ‘That is one of the signs!’ Together we went to the telephone book, picked out the name of a gynecologist whose office was at some distance from our neighborhood, and made an appointment. (31-2)

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¹⁶ Most of the women I interviewed discussed memories of awareness and disclosure. These features of unwed motherhood stories are also present in interviews featured in Fessler’s *The Girls Who Went Away*, as well as in memoirs by Hall, Hawn, and Moorman.
Once Moorman “realized that [her] time was up,” and knew she could no longer deny her pregnancy, she informed her widowed mother that she and Dan were going to get married and have a baby.

My mother’s reaction was instantaneous and explosive. ‘How could you DO this to me?’ she shrieked.

I didn’t know how to answer. I had known she would take it hard, and I truly hated causing her pain, but when I considered her question literally, I knew that I had never intended to do anything at all to her, certainly not something like this. I had not thought of her once, in fact, while achieving this remarkable feat of negligence and irresponsibility. (39)

Moorman’s recollection of her mother’s reaction, read alongside Hall’s epigraph, illustrates how disclosing the news of an unwed pregnancy meant incurring great shame. It is important here to understand that the shame of unwed pregnancy was not mere embarrassment, but the devastating humiliation of falling from grace in the eyes of those around you, of being instantly marked (even if not visibly) as a “bad” girl whose badness was immediate, decontextualized, and a legitimate threat to the wellbeing of the entire family. For example, Fessler shares the story of Madeline, who remembers knowing that, once she became pregnant, she had “done the worst thing possible.” Her mother emphasized this shameful state by telling Madeline, “‘you’re killing your father,’” attributing her and her husband’s marital problems as well as the father’s fear of losing his military job to Madeline’s pregnancy (239). Shame was not only directed to Moorman and Hall (or Madeline, for that matter), but rather was a complex emotion that reflected back upon the mothers (and fathers), as well. Although unwed pregnancy was managed through an elaborate architecture of silence, rhetorics of shame provide a framework around which secrets
and lies were constructed. Each expression and feeling of shame functions as a beam, a joist, a truss—individual components of a structure that will bear the shape and weight of the silences to come.

In what follows, I explore the presence of rhetorics of shame—rhetorical processes of shaming and being ashamed—in the mothers’ narratives. I also attend to how these discourses illuminate the threat of the shame of unwed pregnancy extending, like a dark shadow, over a mother’s family and friends. The reciprocity of these shame feelings is, I suggest, the primary way that the strain of a daughter’s impurity was experienced within the family and communicated to her. Thus, this reciprocity serves as a marker of her consubstantial relationship with others—a relationship that will eventually necessitate hiding and denial.

**What Are Rhetorics of Shame?**

To clarify how I understand shame functioning within unwed mothers’ narratives, I use theories of shame and women’s testimony about their experiences to explore two distinct, but interdependent features of shame: the act of *shaming* and the experience of *feeling ashamed*. A rich body of scholarship on shame allows me to articulate several distinct types of rhetorics of shame in order to better conceptualize shame’s reciprocal, contextual, and always rhetorical nature.17 “Shame,” when used as a noun, suggests a definable emotion that is personal, interior. But psychoanalysts Claire Pajaczkowska and Ivan Ward write that “shame, the most painfully isolating of emotions,” is especially social because it “announces the presence of another, the person who shames us and the person before whom we are ashamed” (1). Thus, shame operates

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17 At a moment when shame is emerging as a critical site of inquiry (Irvine, “Shame” 70), some scholars explore the value of shaming as a productive emotional negotiation of a person or a society’s relationship to shared values (e.g., Tranopolsky 2-5). For this investigation, however, I explore shame as a negative emotion that is wielded publicly and, thus, induces private—and extreme—responses among the shamed.
as both intrapersonal communication (messages one directs to themself, even if no-one else is present) and as interpersonal exchange (feeling ashamed in the presence of another).

“Shaming,” is a process of casting shame upon a person in order to call attention to a perceived inability or flaw. Shaming is highly rhetorical although it need not be verbal—it can be delivered through silence, a look or laugh, or, for example, a turning away or distancing of the body. Additionally, shaming might take place in private or it might be witnessed. In any situation, however, the power to shame relies on doxa, or shared beliefs and knowledges, for it communicates a failure to abide by or embody some communal value.

“Being ashamed” is feeling a sense of shame in relation to oneself, introspectively and often retrospectively (Cain 218). “[S]hame involves the realization that one is weak and inadequate in some way in which one expects oneself to be adequate,” writes Martha Nussbaum (183; emphasis added). But again, such feelings are not vacuous; rather, they stem from expectations and ideals that tap into some larger set of beliefs that are shared by others. Feeling ashamed involves a web of emotions and perceived subject positions: one might feel isolated, alienated, exposed, pained, and/or less trusted and trusting (Seidler 28-9). Even if one is not being shamed in the presence of another—even if she is alone—she can still feel shame: One’s own sense of adequacy usually extends to reflect who one wants to be in relation to the others in one’s life.

As noted above, the case studies explored in this chapter illuminate how rhetorics of shame are not one-directional but reciprocal. Thus, shame, shaming, and being ashamed function in concert with one another and also rhetorically. That is, expectations and disappointments of oneself and others are understood communicatively (through verbal and nonverbal cues) and are
experienced affectively (when shame becomes evident, nonverbally, upon and through the body as in the case of blushing, averting one’s eyes, or drooping one’s shoulders, etc.).

Shaming

Even though all of the mothers with whom I spoke felt stigmatized by their unwed pregnancy and thus went into hiding until the birth of their child, not every mother was explicitly shamed by family members. For example, Faye remembers interacting with her parents after she found out that she was pregnant: “My dad, I don’t know what he thought. I mean, they [Faye’s parents] never, ever chastised me. Ever. They just never spoke about it at all. It was like it didn’t exist.” Perhaps Faye’s parents embraced silence in order to cushion their daughter from a pervasive shame culture to which they were complicit and over which they had no control. Perhaps they struggled to find the right words in such a stifling culture of shame. Perhaps they felt fearful and loyal, and this dissonance rendered them mute. There are many possible explanations for their silence.

But for other women, the shame of an unwed pregnancy began at home, and a parent’s shaming functioned as the basis for understanding the heavy social consequences of having a baby out of wedlock. Cynthia remembers the surprise she felt when she approached her mother about being pregnant:

I got pregnant at 19 in 1962. Um, I had been dating this guy about six months and it was my first sexual experience. I was really naïve. Um, when I got pregnant I went to my parents and my mother was furious with me. I was looking for a hug and, “Oh, honey, it will be alright.” And she was furious with me.
This memory of her mother’s anger registers for Cynthia as the initial part of her pregnancy narrative—a moment when she first experienced the stigma of unwed motherhood. Soon, though, Cynthia recognized that her mother’s anger actually was a byproduct of shame.

She took me to a priest to talk and his advice was that I should go away to a home. Because it just—keeping your baby was just not done. I mean, it would have shamed the whole family. She didn’t even tell her siblings—nobody. She didn’t tell anybody. Nobody in the family knew. And I quit work. And when I was about six months pregnant, then we got the call from Catholic Charities, that there was room. And I stayed there for three months.

Cynthia’s mother experienced shame because her daughter broke a societal expectation of remaining virginal until marriage. In this way, Cynthia’s mother was like the mothers of many of the other women I interviewed. As poet Robin Becker writes, “belonging precedes shame” because shame is borne after social and moral codes are violated (213). As a response to such a violation of expectations, discourses of shame clearly communicate righteous indignation (Locke 146). Cynthia’s memory of feeling shamed by her mother points to the pain and immediacy of that initial moment of shaming, particularly when, according to psychiatrist Peter Loader, shame is “most wounding when it occurs at the hands of somebody we want to please, somebody we want to care for us” and thus can be most devastating within the parent-child relationship (47).

When Yvonne became pregnant in 1967, her parents arranged for her to have regular meetings with a social worker. This social worker consistently discouraged Yvonne from aspiring to keep her child. A large portion of Yvonne’s memories are associated with this woman, who she refers to as “Camel”—“because she looked like one.” I asked Yvonne what
Camel’s role was and why she was expected to meet with Camel so frequently. She explained to me that her role was to counsel me, I guess. I mean, really, I mean, I think that the role for the public was to counsel me about how horrible I was for becoming pregnant. I mean, back in those days, people would say “You went and got yourself pregnant!” Like that’s possible. And, I mean, it was a very, very common thing to say. Um, to make sure that I understood—that there probably was—I really truly felt that there was nothing I could have done worse, including killing someone coldheartedly . . . that could have possibly been any worse than getting pregnant and not being married. My parents never asked, [Camel] never asked, the nuns at the maternity home never asked—no-one ever asked me anything about the relationship that led up to me being pregnant. It was just assumed that I was a slut and got pregnant.

Yvonne remembers that during one of the sessions, Camel asked her an unexpected question:

She’s like, “So, did you enjoy it?” And I’m like, “what?”

“Did you enjoy it?”

And I’m like, “Enjoy what?” you know? Because I was still going out, when there was live music with my friend and we danced . . . Did I enjoy going out dancing? What?

[Yvonne whispers, mimicking her counselor.] “You know, how you got that way!” Holy shit, she’s asking me if I enjoyed sex! We’re Catholics here, aren’t we? We don’t talk about this stuff! It was just really, really, really, really creepy that she asked me that.

Shockingly creepy.

While Yvonne’s surprise and repulsion eclipsed memories of feeling shame in relation to this question, understanding it within the context of the role of the social worker demonstrates that
more than just being “creepy,” the question functioned as a shaming discourse. Instead of counseling and deliberating on Yvonne’s options as an unwed mother, the meetings with Camel provided a space to explore Yvonne’s transgression and force her to dwell in this discourse of shaming. Once she went to a maternity home, Yvonne continued to be shamed. She received a letter from her fourteen-year-old sister that explained, in her sister’s words, how “dreadful” Yvonne was. Yvonne’s sister also described how her shame was discussed “around the dinner table and the supper table and the breakfast table” because she was a “slut” and a “whore” who had “ruined the family name.” Yvonne was devastated by the letter but did not hold her sister accountable; she knew that the talk of her sexual impurity came from her parents and that her sister just absorbed, and regurgitated, this shaming language. As punishment, the shaming discourses directed toward Yvonne communicated others’ sense of disgust and suggested that “her” previous sexual behavior was wanton and intentional. Nussbaum suggests that at the source of such “moralized disgust” rests the belief that the disgusting person is a contaminant that threatens a larger community (105-6). By projecting shaming outward, normals express a sense of their own invulnerability, a “surrogate bliss” (Nussbaum 219). Within the context of the family, the disgusting, hypersexualized daughter can be distinguished as such so that her impurity is constructed to supersede her normalcy. She can be scapegoated.

Susan’s mother had similar questions for her daughter, who became pregnant in 1967. When Susan found out that she was pregnant at age 20, she was at a loss as to how to handle the situation. Unmarried and living at home with her parents, Susan remembers:

When I found out I was pregnant, I knew, number one, I could not tell my mother because I probably wouldn’t live to see the next day. So, I just—I was a mess, I don’t

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18 Nussbaum would call a lack of “constructive engagement” a “back-formation from current discontents,” a regressive and unproductive way to deal with an unsatisfactory situation (105).
know, for a couple of weeks. Just trying to figure out what to do. I was going to run away. I was—I was just trying to figure out what I was going to do. And I couldn’t share what was happening to me. There was no-one to go to for help.

Silenced, Susan decided to do “the only thing she could think to do,” which was to tell her father about her pregnancy. Finding her father supportive, Susan nevertheless had to share this information with her mother. She remembers the day of this disclosure:

   Her gynecologist was the one I was going to. His office called her and said, ‘Harriet, we’ve noticed that you haven’t been here for a while. Maybe you need to make an appointment.’ And so she did. So the doctor told mom and I was sitting out in the reception area and I heard her screaming all the way out to the reception area. And I was like, oh God do I just get up and leave? What do I do? Well, the nurse came and got me and I went back there.

   And her reaction was so horrible. She called me a slut. She said, “Where did this happen?” She referred to his thing as a “big, hard,” whatever her words were. I mean, it was devastating. It was beyond devastating. I felt like trash.

Susan’s recollection centers on her mother’s shaming discourse, which begins with an eruption of disappointment—a scream that pierced the professional space of the gynecologist’s office. The scream inaugurates the shaming, and Susan’s mother’s revulsion is then amplified in her barrage of humiliating questions (which, I assume, took place in the consultation room, in front of the doctor, perhaps the nurse). Rhetorically, this performance functioned not only as communication to Susan, but also as an expression of shaming witnessed by those within earshot: Susan was humiliated not only by her mother’s punishing questions, but by the fact this shaming was not private, but was surely overheard. Such witnessed shame enables and deepens
feelings of isolation and differentness on the part of the one shamed, and it also cultivates a sense of solidarity amongst shamers (Locke 148). Far from Faye’s parents exercising a protective silence, Yvonne’s social worker and Susan’s mother practiced verbal shaming and thus initiated rhetorical disidentification—an alienation to which I will return shortly.

**Feeling Ashamed**

Whether women experienced overt, verbal shaming, or whether they encountered shame in less explicit ways, feeling ashamed was a common trope among the mothers I interviewed. In fact, “shame” was a word that came up in nearly every interview. For Deborah, feeling ashamed was all-consuming and overpowering:

Um, there was so much shame in that you are not good enough—you’re not good enough to be a mother. And how would you—well, how dare you bring a baby into this? You know, there was no, there was no celebration of life—that this was a new life. It was, “This is, this is a huge shame.” And I just felt that, well, um, they all knew better than I did, you know?

The intensity with which Deborah experienced shame suggests that perhaps what she felt was more aligned with humiliation or degradation. Exploring distinctions between guilt, shame, and humiliation proves helpful in understanding how rhetorics of shame contribute to enduring secrets and silences.

Although shame can be thought of as one’s general perception of having lost social standing and social rank (Lehtinen 61), it is important to understand that shame also functions as an “intense, enduring experience that affects the whole self” (Hartling, Rosen, Walker, and Jordan 105). In her philosophical study of shame, Jennifer C. Manion argues that feeling
ashamed frequently stems from “having an unwanted identity attributed to oneself” (25). Thus, unlike guilt, which is an emotion that typically aligns with a consideration of how one’s actions might affect others, feeling ashamed “typically concerns disappointment or despair over what kind of person I am (or have failed to be)” (37 n. 1). Whereas guilt might stem from something one has done (perhaps resulting in verbal expressions of confession and apology, or acts of reparation), feeling ashamed tends to manifest in “concealment or escape”—painful, rhetorical silences. This distinction between guilt and feeling ashamed helps to further explain why shaming that is witnessed (or the knowledge that someone else knows of one’s shame) leads to intensified feelings (Sinnott-Armstrong 201). Guilt and feeling ashamed also operate differently in terms of kairos; whereas guilt can build and recede, shame lingers. In short, “shame is experienced less as about what the self has done but what the self is” (Biddle 229).

These definitions also suggest how rhetorics of shame connote ontological failure, rather than signaling a mistake or misstep. In this way, feeling ashamed aligns closely with humiliation. Even though shame can endure over time, the term is conceptually linked to the body and the ways in which various bodies symbolically and temporally communicate this sense of self.19 Conversely, humiliation is less connected to the body and temporality. Etymologically, “humiliation” derives from the Latin “cause to be soil,” and thus metaphorically implies degradation, the stripping away of one’s humanity. As shame’s sister, humiliation might be thought to indicate not only feeling a lack of personal worth, but also a sense of one’s being

19 The Indo-European root for shame is skam or skem, words that mean “skin” and “hide” (Loader 44). On one hand, this terminology reminds how the epidermis protects the body as a hide, but on the other hand, it also suggests how the skin is a sensory apparatus for feeling one’s own blush and can betray one’s desire to hide feelings of shame by flushing. Eve Sedgwick and Adam Frank argue that non-verbal communication is integral to shame, which explains why shame affectively displays itself most prominently on human faces: “The face is the most common locus of blushing because the face is the chief organ of general communication of speech and of affect alike” (137; emphasis added).
altogether “unworthy of connection” with other humans (Hartling, Rosen, Walker, and Jordan 106).

Feeling ashamed because one was pregnant and unmarried oftentimes meant experiencing a humiliated self, and this suggests that before women were physically erased by having to hide, they experienced an erasure of identity. As noted above, when an unwed pregnancy was confirmed, a girl was likely to be reconfigured as a “bad girl,” an identity that eclipsed who she was thought to be before the pregnancy and revealed her true nature. Resulting feelings of humiliation were coupled with the frequent experience of how shame would boomerang back to the family. Cynthia explains how this sense of contagion compounded feelings of isolation and alienation:

I was shaming the whole family; that was the outlook. I was shaming them. I told my boyfriend. He came to the house once. He told my mother that he would stick by me and help me financially—because we knew we weren’t going to get married—help me financially and emotionally and a month later I called him and he had moved to North Carolina or something to be with his parents. So he was gone. I told my one girlfriend and she never called me again. So, that’s my feeling. You tell people about this and they run away from you. So I never told my husband.20

For Cynthia, feeling ashamed set off a series of alienations and led to feelings of humiliation and the need to maintain a protective silence. Such secret-keeping is rhetorically complicated. To be sure, it is one manifestation of humiliation’s ability to silence. But as Glenn suggests, silence as self-protection is not the same as being rendered mute: it is a rhetorical art that allows one in a non-dominant position to exert some level of power over an asymmetrical rhetorical situation.

20 Cynthia went on to explain that she didn’t tell her husband about her unwed pregnancy for four decades of marriage. Her eventual decision to tell her husband about the pregnancy was linked to her later reunion with her son.
Unspoken 52-5). Nevertheless, keeping secrets about an unwed pregnancy (a theme I’ll return to later) primarily reinforces women’s feelings of ongoing shame as well as their compromised identities as mothers.

Understanding the rhetorical nuances of shame in relation to mothers’ stories is a crucial part of this historiographic effort because it assists in revising various constructions of unwed mothers’ experiences that emerged in this era of women’s sexual shame. For example, several of the women with whom I spoke said that priests counseled them, urging them to recognize their “illegitimate” child as God’s “gift” to a childless couple and understand themselves as women “chosen” to give such a gift. For Mary, these words were soothing, especially considering that Father Arthur shared them with her throughout her pregnancy, even coming to visit her once she went to a maternity home. But in retrospect, the idea of the child as “gift” and, by extension, the notion of “giving a child up for adoption” functions as a troubling rhetorical construction. Mothers suggest that it is more accurate to say that their babies were “taken” from them and that they did not “give” these children away but rather surrendered them. In so many cases, rhetorics of shame that cast judgment on unwed mothers stood in for discussions of choice, consent, and legal rights. Thus, the language of “gifting” and “giving” softens the transaction at the same time that it silences how unwed mothers were encased in a house of shame.

Professional discourses also warrant historiographic revision. Psychologists and sociologists often would refer to shame as an unfortunate, though unavoidable, byproduct of unwed pregnancy. For example, one psychologist explains that the “theory of out-of-wedlock pregnancy currently accepted among social workers and members of other helping disciplines is that it is symptomatic and purposeful.” Nevertheless, the author points to the hypocrisy (and
sexism) of this professional position on unwed pregnancy given the number of unmarried men and women having sex. She laments:

The professed code of behavior has not kept pace with the changing practices, and the ideal of chastity and marriage continues to be cherished along with other cultural fictions. As long as the violation of the professed value is conducted with a decent regard for secrecy or is not otherwise detected, society is content to accept the implied and overt contradictions resulting from the gap between our professed and operational codes. (Bernstein 107-8)

Even after articulating this dissonance, the author goes on to describe “illegitimately pregnant girl[s]” as wracked with “[g]uilt, panic, suspicion, and denial” (109). Regardless, the overall point of her essay suggests that professionals see the pathology that they look for and therefore contribute “to the very disturbance that [they] are trying to diagnose” (113).

For many professionals, though, shame seemed to function as a useful tool in understanding the alleged pathology that produced unwed pregnancy. For example, there was a perception among some professionals (and others, to be sure) that unwed pregnancy could be blamed on young women who were insufficiently ashamed of their own sexuality (and thus were willing to have sex). One psychologist insists:

Far more than most, this specific problem [unwed pregnancy] represents a direct expression of [females’] early fantasies and emotional conflicts. [. . .] Clearly, she is a human being who like all other human beings responds dynamically to her particular life situation, but, also clearly, she chooses one common and specific response [to her fantasies and emotional conflicts], having an out-of-wedlock child. (Young 81; emphasis added)
Choosing to have sex, much less choosing to become pregnant, would have been a sure sign of a woman’s unwillingness to embrace the ideology of the day, which rendered women’s sexual longing as a sign of impurity.

This sort of “etiology” of unwed motherhood was a popular topic among psychiatrists who argued, more generally, that girls became pregnant because they were psychologically flawed and thus acted out in ways that purposefully implicated those around them.21 One psychiatrist, writing for the Florence Crittenton Association of America in 1966, argued that in most cases, an unwed mother would either chase after the father of her child in order to try to exert power over him or “blame the unmarried father for the whole thing” to displace her own feelings of guilt (Littner 8-9). Such depictions caricature and pathologize unwed mothers, suggesting that narcissism or tendencies to project, rather than cope with, their emotions rendered them unable to “appropriately” comprehend their shame. Mothers’ narratives correct such perspectives while they illuminate how feeling ashamed didn’t just happen; instead, feeling ashamed resulted from purposeful rhetorical maneuvers. More, explicating these rhetorics of shame demonstrates how family members, religious leaders, physicians, social workers, and others in authority infused many unwed mothers with feelings of humiliation, eroding their ability to see themselves as capable mothers deserving of respect and help. At the same time, such rhetorics of shame form a frame, solid and unwavering, that would brace the house of secrets and lies that was constructed to erase these shameful pregnancies—a frame that began to enclose unwed mothers in an architecture of silence.

21 The Florence Crittenton Association archives, part of the University of Minnesota’s Social Welfare History Archive, have been particularly useful in understanding the evolving psychological profiling of unwed mothers across much of the twentieth century. Addresses given at regional and national organizational meetings, as well as reports printed in the organization’s newsletter, the Field Reporter, document a professional conversation surrounding the pathology of unwed motherhood.
Going into Hiding: Secrets, Lies, and the Spatial Contours of Silence

If the couple and their families decide that marriage is not the best solution, then planning must go on for the handling of the pregnancy... there should be an early decision about whether or not to enter a maternity home. These homes exist in every major city in the country. They provide privacy, housing medical care, adoption service and counseling for the unwed mother in the last months before delivery. There is generally some kind of school service and a variety of activities for girls who are out of high school. It is not required that the girls be planning adoption to enter the home but this is usually the choice of the large majority of the girls.

Burdened by her guilt and fear, the entering girl pictures the home with bars on the windows and a convent-like atmosphere. She is hit by a contradictory rush of impressions. Everyone is pregnant and obviously so—but somehow it seems much like a girls’ dormitory. The new girl finds with relief that other girls have similar problems and that her pregnancy can no longer be completely denied in this new atmosphere. The subject of pregnancy is no longer taboo but is even joked about.


The treatment [at the home] was not good. There were maybe 60 girls there. And we just bought it, with military precision. You know, no-one said anything because you were trying to survive this and have a place to live. Everyday they’d say, you know: “What do you have to give a baby? Do you have a job? Do you have a place to live?”

—Lucy (entered a maternity home in 1968, at age 14)

If moments of disclosing an unwed pregnancy were marked by painful words and humiliating questions that ruptured the house of secrets, the stretch of time between learning of such a pregnancy and giving birth was overwhelmingly silent. This was a time of secret telling, secret keeping, and above all else, disappearing. “Going away” represents a semi-public performance of secreting that relied on anonymity, erasure, and physical spaces of hiding. By examining mothers’ recollections of hiding, I explore how these secrets contributed to an architecture of silence and suggest that going away represented a ritual of scapegoating that families used to manage the shame of a daughter’s unwed pregnancy.


Hiding the Stigmatized Body

What kind of deprivations does the silenced body experience?
—Cheryl Glenn, Unspoken: A Rhetoric of Silence

When Jackie became pregnant in 1965, she immediately felt the “shame, shame, shame” of unwed pregnancy. A college student living away from home, Jackie nevertheless was still a daughter—still a reflection of her family. Jackie was raised in a religious household: her father served as an elder and her mother a deaconess in their church. If word got out that Jackie was pregnant, her parents believed, their family ethos would be irreparably damaged. So they sent Jackie to live with her sister and her sister’s husband in California until Jackie “began to show.” Sending Jackie away distanced her from the family and bought them some time. Most importantly, it helped keep Jackie’s pregnancy a secret until she could go into a maternity home where she would truly disappear. “That was the big thing—keeping it a secret,” Jackie explained to me. “I don’t think anyone knew except my aunt and uncle and my sister.”

Keeping an unwed pregnancy a secret was so important, sometimes women kept the secret from those closest to them. Terri became pregnant in 1966, after having sex with her boyfriend of several months. Although Terri was monogamous (this was, in fact, her first sexual partner), her boyfriend reacted to the news by doubting whether to believe that he was the father. The boyfriend returned to college, leaving Terri behind. “Anytime I tried to call him after that,” Terri explains, “—those were the days when you had to use money in the phone and I was in a highway phone booth. And he would just take his time and not come to the phone and I would use up all my change. And I never heard from him again.” Because Terri was “alone and pregnant” and because her family was “very strict,” she decided to keep her pregnancy a secret from them, instead making up a lie that she was joining the Peace Corps. “And I was scheduled to go in and like two days before I was scheduled to leave, Catholic Charities called my home
thinking [my parents] already knew. And that’s how my mother and father found out. No-one else in the family ever knew.”

The point of hiding unwed mothers was to erase them—to make them vanish from view, and thus seemingly not exist. Unwed bodies needed to be rendered invisible because they represented a stigma—corporeal evidence of a difference that was understood as being abnormal because of a rhetorical code of normalcy (Goffman 3). Various networks of maternity homes—especially those run through agencies like the Florence Crittenton Association, the Salvation Army, and Catholic Charities—offered a “private” space dedicated to this business of hiding. But not all women did—or could—hide in facilities that came with a price tag. For example, when Barbara became pregnant in 1966, her family decided that she should stay at home:

I wasn’t sent away, although my mother told me about those places. But I was hidden away at home. I had a bedroom up in the attic. We had a bedroom up there; it wasn’t like they made one and just put me up there like a squirrel. But, you know, whenever the doorbell rang I had to run upstairs. I couldn’t be seen. I had just disappeared.

Barbara’s experience reminds that the imperative for girls to “go away” was based on a desire (typically on the part of parents) to keep an unwed pregnancy secret as much as—or more than—a desire to provide a social safety net to pregnant women who lacked the support of a husband.

Sandy and her high school sweetheart were planning to get married before she became pregnant in 1967. Sandy’s boyfriend was away at school and began to distance himself from her when she told him of her pregnancy. Traveling from New Jersey to North Carolina to be with him, Sandy was planning on applying for admission to a Salvation Army home, but realized that staying in a motel was cheaper and thus a wiser choice, since she was using her personal savings to stay hidden through the pregnancy. “While I was in the motel, it was just me. And I did
consider suicide and had my note all written,” Sandy remembers. Her boyfriend had, by this time, begun dating someone new, although he did not admit as much to Sandy or his parents, who already considered Sandy part of the family. Pushing aside her feelings of desolation, Sandy remained at the hotel until the very end of her pregnancy when she went to the maternity home. She kept the secret of her pregnancy from everyone until she was forced to share the information with the man and woman who were to have been her in-laws:

They were very nice. I say they were very nice because in that day and age, my parents didn’t know—nobody knew—just he and I. But I knew that I had to do what I had to do because of how society was. So, um, so I promised them, “Don’t worry, nobody will know. I won’t tell anybody.” And I knew that they couldn’t let their neighbors know because if—God forbid—the neighbors knew! And his three sisters didn’t know.

The insistence that unwed mothers go into hiding functioned as erasure and prevention. It preempted the shame families feared they would experience by proxy if a daughter’s situation became public knowledge. But secrets in the service of silence are still spoken, even in hushed voices. As Schaefer remembers of the 1960s, “Out-of-wedlock pregnancies were an intriguing topic of conversation, but never discussed except in whispers and innuendoes” (17). The secrets and lies related to hiding were a flimsy construction at best, jerry-built around a framework of shame in an effort to pull unwed mothers from public view as soon as an unwed pregnancy was confirmed, and permeated with the gossip of the curious and the self-righteous.

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22 Sociologist Thomas Scheff argues that shame is the most social of emotions because whether or not people actually feel shame, they constantly anticipate feeling it (256).
With the exception of Barbara, who remained hidden at home with her family, all of the women with whom I spoke spent at least some time at a maternity home before delivering their child. Thus, for this project, revealing what happened in homes for unwed mothers is an essential part of shedding light on the experience of hiding and secret-keeping. Additionally, reflecting on women’s recollections of the homes aids in understanding these structures as themselves functioning rhetorically, as spaces that reminded the greater community that unwed pregnancy would remain intolerable and invisible.

Listening to stories about residing in a home for unwed mothers means hearing a variety of experiences that cannot be compressed into a single narrative. For some women, the home was a “prison,” a place where they were incarcerated and an institutional space purposefully configured to convince them of their incapacity to mother. For other women, the home functioned as a safe haven, a place where, as Faye remembers, she could finally take off the girdle she had been wearing to hide her belly and just be pregnant. Yvonne remembers that in comparison to meeting with Camel, who always asked, “What makes you think you have anything to offer [a baby]?” the home was a relief because “there, no-one was saying those things to me.” And one interviewee explained to me that had she not seen an advertisement for the Salvation Army home, she does not know how she would have handled her pregnancy. Thus, she was eager to become a resident and greatly appreciated the services—including assistance in putting her child up for adoption. For some women, like Jackie, staying at a home was itself neither good nor bad: it was merely “putting in time,” a means to what would be a very difficult end in many cases.
Similarly, understanding how maternity homes imagined their own services is impossible given the vast number of facilities and variations among them, although some general conclusions prove instructive. Preserved in various Florence Crittenton Home archives are a variety of rule books—handmade documents meant to introduce new residents to the home and acquaint them with expectations. A book from the Toledo, Ohio Florence Crittenton Home dated 1960 welcomes new residents by assuring that “This is your home now and we want you to feel welcome right away. We’re proud of it—we hope you will be too.” The note continues by suggesting, indirectly, that residence in the home offers more than just a place to hide:

Consideration, learning, understanding, health, opportunity—are these some of the things we want all our lives, wherever we are? You’ll find them here, along with many other advantages, but it helps to have something to go on, like this guidebook we have designed for you.

Let living here be an experience that helps you prepare for the future, when you will have your own home or some other interesting career, and be better able to master the daily problems of living and getting along with others. You will be with us until three weeks after delivery; you can make each day count.

Think, as you read the following pages, for upon your acceptance of our ideas depends the usefulness of this booklet. (Guide Book)

A variety of similar books, distributed at other Crittenton homes, communicated the same message: the home was a route to rehabilitation and reinvention—a place where an unwed mother could create a better version of herself.
Overwhelmingly, the women with whom I spoke did not remember the maternity homes as draconian, although they were systematized. Katherine explained that days were routine: everyone took meals together and did regular chores and laundry. Most women remember being weighed daily, seeing a physician regularly, and doing group exercises in the home to stay fit. Nearly all of the women remembered there being a great deal of “free” time, during which they watched television, read, crocheted, and talked. Many of the homes offered religious services: in some, attendance was required and in others it was optional. At some homes, women were allowed to leave the facility if they signed in and out and followed curfew; other homes were far more restrictive about women remaining inside the home or at least within a fenced yard. Most generally, however, the rules of the home kept it running smoothly more than they disciplined the residents. As Deborah explained to me, “I don’t remember anything being written down . . . there wasn’t a lot of rebellion. It was like, you had to follow the rules. Because what was going to happen if you thrown out of here? Where were you going to go then?”

One of the few restrictions that was exercised with some regularity was a code of anonymity. Many residents were instructed to change their name entirely or refrain from using their last name. Gayle explained, “You weren’t supposed to talk specifically about where you came from, but we all did. They tried hard to make it confidential.” From within the homes, some residents befriended one another and shared their stories, violating the code of secrecy. But the visual rhetoric produced by and relating to maternity homes emphasized the need for strict anonymity. Brochures and news articles consistently portrayed the indistinguishable unwed mother on the front steps or inside the maternity home—but always facing away from the

\[23\] In comparison to stories of going away to a pay-to-enter maternity home, few if any, stories have been recorded about poor women’s experiences at wage homes (where women worked in order to hide in a home). More research is needed to collect such stories and compare the experiences of wage-home residents with those of maternity-home residents.
camera. As a visual argument, such images persuaded viewers to believe that the anonymity could be and was upheld, even when in so cases, it was not honored.

Fig. 2. Image from Annual Report, Florence Crittenton Home of Topeka, Kansas, circa 1960. Florence Crittenton Collection, Social Welfare History Archive, Elmer Anderson Library, University of Minnesota.

The insistence on anonymity within the homes both functioned to protect unwed mothers from shame and reify the notion that being an unwed mother was shameful. This paradox is part of a larger symbolic dualism of maternity homes. In 1969, an executive director of the Florence Crittenton Home in Topeka, Kansas explored the double bind of hiding:
[T]he social work profession puts an unmarried mother in a […] bind by its use of a maternity home. We verbalize that we accept her as a person, that she can be open about her problems, that we can understand, and that she should not be guilt-ridden and full of shame. Yet, what do we do? We hide her in a maternity home. What is she to think? If we do not think that she should really be ashamed, why do we hide her? (Headsten 1)

Even though the operation of maternity homes upheld this paradox of relieving and perpetuating shame, women’s various experiences of remaining invisible or being seen while residing at a home suggest that hiding was both a lived reality and a rhetorical performance. Yvonne remembers, “I was not even allowed to visit [my parents] on a Sunday. Because that means I’d
have to go to church with them. And what if somebody saw me? What if somebody saw me and knew that I was pregnant? Well, I didn’t look pregnant, but that didn’t matter.” In contrast, Mary remembers going shopping with her boyfriend, who regularly visited her at the Florence Crittenton Home in Toledo. And Deborah remembers residents walking, en masse, across midtown Manhattan to go for regular obstetric check-ups. “So now it’s pretty funny—this big group, pretty big group—six or seven or whatever pregnant girls all walking together. I don’t know who we thought we were fooling.”

Maternity Homes and Rhetorical Space

I wondered if parents drove by and said a silent prayer to spare their daughters and themselves that pain and humiliation. Or said a prayer out loud in thanksgiving that their kids had made it through and were well on their way to fulfilling their parents’ dreams. I could not believe that I would be living within the walls of such a place.

—Carol Shaefer, *The Other Mother*

Residing in a maternity home enabled elaborate practices of secret-keeping, and the homes themselves functioned as complex rhetorical spaces—sites of visibility and invisibility. To wit, women who stayed at homes were sequestered, but the homes themselves performed rhetorically as semi-visible structures that reminded onlookers that a particular type of hiding was taking place beyond their fences and walls. It seems only fitting, then, when considering the complicated architectures of silencing around unwed motherhood during the apex of the hiding and surrender years to consider the actual architectural spaces devoted to systematic hiding and the rhetorical meaning such places enact.

In practical terms, homes for unwed mothers were private spaces dedicated to hiding socially unsanctioned, pregnant bodies. But the homes themselves functioned as symbolic spaces both for the women who resided inside them and to the communities in which they were located.
Being privately run facilities, maternity homes of the 1960s did not exude an institutional or sterile feel. Many homes (especially those in the Florence Crittenton network) were retrofitted mansions and others were large brick buildings that nevertheless were made to feel home-like. According to the mothers I interviewed, homes were typically in a well-travelled part of town, although those in suburban areas generally had a privacy fence surrounding the property. No matter the “look” of the facility, the language of “home” is pervasive across the various agencies providing services to unwed mothers. By creating physical places that (to varying degrees) looked like private residences and by deeming these various buildings each a “home,” the social service and religious agencies running the homes constructed a particular spatiality. I use the term “spatiality” to suggest that space is not neutral, empty, or fixed, but rather a “relational social product” that can be altered, used, and experienced in various ways. Specifically, the idea of spatiality relies on a belief that “the conception, understanding, habitation, and use of the materiality of space and place mediate the encounter through power and ideology” (Nunley 40).

24 Nunley’s understanding of spatiality is especially informed by spatial theorists Henri Lefebvre, Doreen Massey, and Dolores Hayden. Nunley further develops the notion of “practiced spatiality,” which “unhinges . . . place from bodies and connects it to practices in which bodies engage” (43; 181 n. 19). I argue that maternity homes, by design, are meant to constrain unwed, pregnant bodies, rendering them mute. Thus, while spatiality remains a helpful conceptual term, practiced spatiality reflects a level of agency that women who went away were not able to exercise.
Even though it is impossible to account for how the spatiality of a variety of maternity homes was experienced by residents, it is plausible to suggest that the home-like environment fostered a sense of comfort for the residents (insofar as “home” suggests familiarity). But “home” has also functioned as an enduring symbol of women’s “proper” place—an environment in which they could cultivate “true womanhood” ideals such as submissiveness and purity (Welter 152). Thus, the spatiality of maternity homes may well have functioned to remind residents of mid-century domestic (and gendered) values and to allow residents to practice domesticity (through chores, for example). Thus, more than being just a place for “biding time” until delivery, the spatiality of the homes likely reinforced the supposed link between
womanhood and domesticity and could have encouraged residents to more fully value the home in these gender-specific ways. Although such spatial meaning would have been subtle, feminist geographer Linda McDowell argues that spatiality is, in fact, highly persuasive. “Spaces exercise heuristic power over their inhabitants and spectators by forcing them to change [ . . . ] their behavior,” according to McDowell, “and sometimes, their view of themselves” (25).

Further, the home also paradoxically functions as a site of female identification inscribed by patriarchal power. Feminist geographer Nancy Duncan argues that historically, the personal freedoms of the head of the household—usually a male—have tended to delimit and sometimes deny the “rights, autonomy and safety of women and children who also occupy those spaces.” Thus, the home is a spatial expression of the confluence of privacy, masculinity, male autonomy, and property ownership. In short, argues Duncan, “[a]s a relatively unregulated sphere the private is a place where men have traditionally dominated their families and the privacy to do so has been jealously protected” (131). Thus, symbolically, the home was the haven of femininity, but in practice, the power wielded inside the home pivoted on the fulcrum of male power and dominance.26

Maternity homes were spaces of secrecy in plain view, thus they would have also performed spatially for the greater community. Solinger describes “the world of maternity homes in postwar America” as “a gothic attic obscured from the community by the closed curtains of

25 The homes also were social spaces where a number of women lived together at the same time. Interviewees often referred to the home functioning like a sorority house and some indicated that no men (not even fathers) were permitted to inside. This group segregation aligns with another observation by McDowell—that “[s]ocial relations and spatial processes are mutually reinforcing [ . . . ] in the construction of gender regimes with particular patterns of the segregation of the sexes and gendered hierarchies of power” (56).
26 The notion of the home being a haven of femininity must be understood as aligned with race. I am not suggesting that all homes are spaces of male control, although in the United States, many white homes historically have been.
gentility and high spiked fences” (103). This sentiment is echoed by Audrey, who I interviewed about her stay at the Akron, Ohio Florence Crittenton home in 1970.  

Emphasizing that the home for her represented literal imprisonment, Audrey described the structure as a big, brick mansion built in the early 1900s—nolting its dark façade and the 8-foot high, wrought iron spiked fence that encircled the property. Although Audrey’s memories of the house itself evoked the containment she experienced while there, she acknowledges that it was nevertheless a “gorgeous home” that was likely a private residence for a rubber company baron of earlier years. Jackie, who lived at the Florence Crittenton home in Cleveland in 1965 more openly acknowledged the opulence of that house. Describing this home as a “gorgeous, huge old white elephant” on millionaire’s row, Jackie suggests the saturation of meaning that these homes had accrued by the middle of the twentieth century. The houses—these lovely white elephants—congratulated the community for its benevolence on behalf of “bad girls,” shrouded these women while reminding the outside world that something bad was being hidden, and loomed, hulking and silent, to women who entered their doors and in so many ways surrendered voice, autonomy, and—in too many cases—the acknowledgement of their own motherhood.

Materials from both the Salvation Army and the Florence Crittenton Home Association archives demonstrate that although residents of the home were to remain invisible or at least anonymous, the homes themselves could serve as showpieces that could tell the story of unwed women being taken care of, domesticated. In fact, early publications from the Florence Crittenton Association suggest that the façade of maternity home houses stood in as the marker

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27 For more on Audrey’s story, see chapter 3.
28 In Wake Up Little Susie, Solinger provides an overview of the ways in which community members came into contact with maternity homes. For instance, even though homes charged a fee for entry, many relied on community chest support and the help of volunteers and boards of directors who could fundraise on their behalf. Solinger argues that, overall, communities found the presence of maternity homes “repugnant” (126). I counter that communities found unwed mothers repugnant, but maintained a grotesque fascination with the ideas of the homes themselves, which prompted elaborate, though ineffectual, efforts at keeping unwed pregnancy a secret (such as the construction of high fences, the circulation of the above images, etc.).
of unwed pregnancy within the community. By the middle of the century, homes for unwed mothers performed a polysemous spatiality that, I suggest, played a significant role in the cultural narrative that “going away” and “forgetting” was the best response—the only response, really—to girls who “got themselves” in trouble. Perhaps it is not surprising that a social worker, having worked in two Crittenton homes, described these “little castles” as equipped with old sofas and oriental rugs just like those that the “fancy ladies on the board” might have owned. Where the social worker saw a space where the well-heeled shared their plenty, young women like Audrey saw an artifice meant to manage her and her pregnancy. The point here is that both constructions were intimately tied to the walls and staircases, the structure and adornment of such homes. Fairy tale like or nightmare inducing, these homes were not merely repositories for girls who waited out their pregnancies. Instead, they were a mirror ball of sorts, reflecting and refracting the needs, desires, and fears of those who looked upon them.

A Sorrowful End, A Duplicitous Return: Spectral Silence

The secrets and erasure of hiding functioned as a precursor to the final and, arguably, the most painful construction of the architecture of silence. Unwed mothers passed weeks, even months, in hiding, but the adults coordinating this hiding generally neglected to inform the mothers of what would happen during labor, delivery, and after the birth. Thus, the silences surrounding the birthing process enabled degrading, often disciplining, medical approaches that symbolically and physically foreclosed these mothers from their own labor. In the days after delivery, when mothers should have legally been able to decide whether to consent to an

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29 Pictures of the houses—not residents—are prominent in many early Crittenton organizational materials, such as *Fourteen Years’ Work among Erring Girls*, published in 1897. This document features nineteen full-page pictures of Florence Crittenton homes across the country. Fifteen of the pictures show only the home or the home and a house mother; four pictures feature residents at enough of a distance to make them unrecognizable.
adoption, many women were physically barred from seeing or holding their children, enduring even more shame and isolation. Silenced (or coerced), these women were forced to hide their identity as mothers in the attic of this house of silence, despite the insufficiency of lies and secrets to protect them as they returned to life as “normal.”

*Nowhere Left to Hide: Punishing Labor and the Birth of Loss*

Anne Drapking Lyerly, a scholar of social medicine, argues that at the time of a delivery, a mother’s sense of being connected rather than feeling abandoned, of being empowered, and of having dignity are “crucial” elements to having a positive birthing experience (103-4). Further, Lyerly contends that childbirth represents a “particularly critical locus” of pervasive cultural messages about women’s polluted sexuality that comes to bear on her new identity as a mother, along with expectations of what proper womanhood and proper motherhood should be (111). These perspectives on how integral the birthing experience is to a mother’s sense of herself as a mother provide a framework for listening to the mothers’ stories about delivery and the days after childbirth, which represent another salient moment in their narratives.

For some of the mothers I interviewed, the process of giving birth represented the time when they felt that they were being most acutely punished for “their” pregnancy and their “decision” to surrender their child for adoption, despite the near-consensus among the mothers with whom I spoke that they were silenced, shamed, and coerced into “giving” away their child. Part of this punishment came in the form of yet another silence, for women generally did not

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30 Yvonne desperately wanted to keep her child, but “Camel” repeatedly discouraged her from doing so. After giving birth, Yvonne pleaded with her mother to support her—to allow her, essentially—to keep her child. Finally, Yvonne’s mother agreed. But when Yvonne explained her decision to “Camel,” the social worker presented her with a bill for all of the services rendered to her as an unwed mother. Yvonne had the right to her child only if she could pay these fees, and the staggering sum, she immediately realized, was far beyond her means. Yvonne’s story is one that borders on (or might be) extortion, not only silence.
know what to expect when their time to deliver came. Discussions of what would happen during labor—the process of a body getting ready to give birth and the subsequent medical procedures that might be expected—were few and far between for young women who resided at maternity homes. Deborah, for example, remembers feeling somewhat prepared because of a book that she read about the process of giving birth, although she cannot remember where she obtained it. Pam really had no idea what to expect. Gayle recalls that when childbirth was discussed, maternity home staff used vague and unspecific language that did little to actually prepare the women for labor. At some homes, women returned after delivering and thus had an opportunity to share their experience (or what part of it they remembered) with other residents. At other homes, going into labor meant leaving the home immediately and permanently. Within a framework of shame and an architecture of silence, childbirth was not the women’s goal, an event for which they were prepared; instead, it marked the end of hiding, a vacuous space at the end of a long, quiet hall of waiting.

Obstetrics at mid-century was highly systematized by physicians at the expense of women giving birth. The nonconsensual use of anesthetics to administer “twilight sleep” and deliver a baby with forceps was a common obstetric practice from the 1930s to the 1970s (Lyerly 107), and groggy, laboring women were commonly strapped down to delivery room tables (Wolf 11). But for many unwed mothers, physician’s attitudes and actions were particularly degrading. Barbara, who hid at home through her pregnancy, visited the same doctor as did her mother and sister, who were also pregnant at the same time. Barbara recalls her experience getting checkups:

31 According to medical historian Barbara Clow, by the 1950s, “many practitioners relied on sedatives and tranquilizers specifically because they regarded pregnancy as a time of emotional instability and morning sickness as a psychosomatic symptom” (54). Lyerly considers all instances of twilight sleep to represent a “disturbing alienation of women from the birthing process” (107).
I used to want to disappear in the back seat of that car. Because I was convinced that this doctor hated me. Because from the first day he told me, “I don’t give anesthesia to girls like you.” Um, you know, he just looked at me with such disdain. So he would examine [my sister], and talk to her, and let her listen to the heartbeat. And when it came to me, you know, “Let me feel you a little bit. Eh, everything is good.” Oh, it was horrible. But my mother had ten children and in her wisdom she did not agree with him on the anesthesia bit. So she sent a friend of hers, who was a registered nurse, and she was with me in delivery. And I remember her stroking my head right before I went out. And that was like the only kindness that I had during that process.

Barbara’s doctor was direct about his ability and desire to make her childbirth as unpleasant as possible in order to punish her, symbolically and physically, for “her” misdeed.

Other mothers’ treatment was similarly harsh, but not communicated so directly. For example, Carol describes herself as “a frightened young kid” when she prepared to give birth in 1961 at the age of 17. Carol’s experience at the hospital during and after her delivery largely define her experience as a shamed, unwed mother, particularly because of the difficulty she had during her delivery, which was breech. She remembers: “Of course they left me to labor alone. And I was screaming. And [finally] a nurse came in and was very rough: ‘What’s the matter with you?’ And she looks under the sheet and sees a little foot and she is screaming, “Oh my God! We need a doctor in here!” Carol explains that even after the birth, she was singled out and treated harshly by the nurses at the hospital.

I never could understand why they treated me so badly in the hospital. Um, when, when it came time to get—for the women to get their babies—because I was in a
room of four—they brought the babies to the other three women but [the nurse] didn’t bring my baby. And I had to ask for the baby. And she said, “You want your baby?” And it was a very down-the-nose treatment.

It has only been within the last few years that Carol learned that many hospitals used codes like BUFA (Baby Up For Adoption) to distinguish illegitimate or “unwanted” children and the women who were “giving” them away.

Even for women who did not have to endure the pain of labor, the days after delivery were marked by isolation, as many women were not permitted to have contact with their child. “We were always encouraged to not hold the baby,” remembers Gayle. “That was a big, big thing. I don’t know who came up with that, but it was a big thing.” Cynthia explains, “In the hospital, once I had him I didn’t see him. They knocked me out. And I didn’t get to see him. I knew it was a boy because I looked on my bracelet. I had been told before, at the home, that you are not going to see your baby. So I didn’t ask.” The maternity home staff convinced Cynthia, by telling her she could not see her child, that by getting pregnant outside of wedlock, she had surrendered her rights to be a mother.

The idea of surrendering one’s child, sight unseen or seen only from afar, has its own rhetorical force, severing the mother-child bond in yet another architectural silence. Barbara articulates the layers of separation, both physical and symbolic, between her and the child she had just delivered.

I wasn’t allowed to see him. I got out of bed and I tried to find the nursery because I could hear crying. And I was met by a nurse who said, “You are not allowed down there to see the baby.” It was always “the” baby—there was never a pronoun like “your” baby or “your” pregnancy.
Thus it was not merely a hallway separating Barbara and her child, but rather the imposed silence of an identity, a motherhood, seized. Cynthia and another unwed mother were able to “sneak down to the nursery” to see their infants. After identifying herself, Cynthia remembers that

the nurse just motioned to the back of the room. And that is where he was. So I remember seeing him. I burned that image into my mind—with his blonde hair and his cute little nose. And I stood there as long as I could stand it before it was too painful. Then I had to walk away and go back upstairs. That was the only time I saw him.

These stories of unwed mothers’ common experiences with delivery and forced postpartum separation reflect how these practices isolated mothers during and after labor, and (with the use of drugs) disconnected them from the physicality of the birth. Further, those unwed mothers who were unconscious during delivery would not wake to a reunion with their child, but rather to a loss that was cloaked in silence. The resulting substitution of one identity—mother, unmarried—for another—non-mother—was commonly reinforced through rhetorical practices, spatial and verbal, meant to sever any mother-child identification.

Encasing Secrets in Silence: Coming Back and the Revirginalized Identity

You pretend it [the birth] didn’t happen.
And, you know, you can’t do that.
—Deborah

“How does it feel to be silenced me? It feels like discipline, like torture, like punishment.”
—Cheryl Glenn, Unspoken: A Rhetoric of Silence
“It was November 28, 1966. It was the day of Truman Capote’s Black and White Ball, which was at the Plaza—a few blocks away.” Deborah, who struggles to recall details of the “numb” time she passed at a Manhattan maternity home, faces a different type of remembering and forgetting in relation to her delivery. Her memories remain clouded by the Phenobarbital she was given:

And um, so they got me into a cab. I think somebody came with me but I don’t really remember. Um, and, uh, they induced me and I went into labor. And I remember it being dark. I remember being alone most of the time. And I remember there was a window. And I could see it getting dark. And, um, the darker it got, the worse my labor got. And it was just, it was just awful. I don’t remember being comforted. I don’t remember, um, I just remember it being horrible, you know?

Deborah was “put out” just before she delivered and came to after her baby was born. The next day, a nurse brought her daughter. “So I was able to see her. Um, she was gorgeous. She was 5 pounds, 11 ounces, I think. Um, I got to hold her. I didn’t get to feed her. Um, and I remember it being very hazy.”

And just like that, it was all over.

I don’t know if my parents went and collected my stuff or whether they sent it—I don’t know how that happened. But I remember I didn’t go back to the girls. I just went from the hospital [to] home,” Deborah explains. “But it was a pretty sad Christmas . . . I remember just being very numb, just very numb. And I then I went back to school in January.
Part of process of secret-keeping related to unwed motherhood in the 1960s—part of what defined this era as a time when unwed mothers knew, unequivocally, the shame of their transgression—was the need to pretend that the entire system of hiding never existed, that the hiding never happened. For unwed-mothers-as-now-revirginalized-women, this meant coping with the loss of their children (along with post-partum depression) in silence. Again and again the mothers I interviewed explained to me that once they returned home after giving birth, the subject of the pregnancy was strictly taboo. For example, Mary’s father made plans for her to return home after her delivery because, in his words, “now” she was “feeling better.” In most cases, there was simply no discussion of what happened, and this imposed silence carried great meaning. Cynthia explains:

   I was totally lost when I came home because there was no counseling, there was no-one to talk to. If you lose a baby any other way—through a death or something—there are always people to surround you and support you. And I had nothing. My mother’s only statement was, “Hurry up and get a job. Get a job.” Because I had to pay for my stay at Catholic Charities . . . It was my crime and I was going to pay for it.

The silence that surrounded Cynthia amplified her feelings of shame, and suggested that even though she had followed her family and priest’s advice perfectly, she was always bridled with her shameful past in the eyes of those who knew that she went away, even though her experience was encased in a secret.

   Because the women were expected to assume a new identity and not question the child they had surrendered or the shame they experienced, many of them felt little option but to maintain the secret of their motherhood. Barbara explains that she told her husband about her
past when they got married, but otherwise, “I never told anyone. Because there was so much shame and so much guilt. That you just kind of bury it. And live your dysfunctional life. It is just a horror.” Glenn suggests the power of silence that is imposed and the invasive ways that it can wreak such horror on a life. When silence “is not our choice, but someone else’s for us,” Glenn explains, “it can be insidious, particularly when someone else’s choice for us comes in the shape of institutional structure.” Although “speaking out” about one’s experience might seem like an option, such a choice does not really exist because disclosing certain secrets can be detrimental to one’s very life and wellbeing” (“Silence” 264).32

Although many mothers experienced being systematically silenced, I suggest that this silence did not function as an architecture of protection for the women, but as a haunted space, an indirect, but ever-present reminder of their shame and a source of fear that maintained the need for ongoing secrets and lies. Jackie explains that her family needed to keep her pregnancy a secret in order to protect her family (as mentioned above, her parents were active in the church) and to protect her from gossip. But Jackie explained that the secret-keeping actually fueled gossip, especially among the women at her parents’ church. Jackie even received several anonymous phone calls upon returning home, the caller letting her know that they were aware that she went away—and that they knew why. And Barbara recalls the pain of returning from the hospital and having to celebrate her sister’s new baby because, according to the family fiction, “this was a happy time.”

Emory University psychiatrist Irene Phrydas explained at a Florence Crittenton Association Conference in 1964 that “[t]he majority of the girls [who have a child out of wedlock] magically believe that all of their problems will be ended as soon as the baby is born”

32 Glenn especially considers how coming out of silence can mean “professional suicide” for some, and explores the Anita Hill controversy as one instance of a woman moving from silence to speech and the vexed outcomes of that decision. See “Silence: A Rhetorical Art for Resisting Discipline(s)” and Unspoken: A Rhetoric of Silence.
(9a). With this assertion, Phrydas hinted at the inability of secrecy to truly erase a past, but she also attributes the magical thinking of the architectures of silence to naïve and imaginative girls. In contrast, the mothers’ testimonies reveal that if the mothers did participate in such wishful thinking, they did so because, not in spite of, the silences that encased them. These young women lacked the knowledge that would enable them to predict the resounding, reverberating, and ongoing silences that would come in the wake of having their baby. In retrospect, most of the mothers speak of hiding and being forced to surrender a child in silence as a traumatic experience. Mary simply repeated, throughout her interview, that the practice “destroys lives.”

The flawed logic and practice of secret-keeping too often ruptures, as I have demonstrated throughout this chapter. But just because secrets are betrayed does not mean that they can be owned and wielded by those who remain within the architectures of silence. For those who experience trauma of the body and the psyche, secrets can also represent the “unsayable,” that which can be too painful to remember and purposefully express. In her work with girls who have been sexually abused, psychotherapist Annie Rogers explores how trauma intervenes in language use, even when it is still known to the body. Rogers argues that the most unsettling aspect of trauma is not necessarily its connection to instances of abuse, but rather to “the way terror marks the body and then becomes invisible and inarticulate” (44). The internalized, destructive force of secret-keeping becomes evident in Deborah’s explanation of coming back:

33 Two interviewees explained that they felt adoption ultimately was the best option for them at the time of their pregnancy. These two women did not speak of the trauma of the relinquishment of their child as other interviewees did. However, the decision to surrender their children for adoption was the “best” choice for these women in large part because of the complications they expected to face as single, unwed mothers if they kept their babies. (And, indeed, if they were actually permitted to keep their babies, since any discussion of mothers’ choice and rights were infrequent and usually not upheld. See note 30.) Thus, although these women embraced the decision to relinquish more fully than other mothers I interviewed, I would not characterize the decision as choice free from the constraints explored in this chapter.
They told us that we would go home and forget this . . . So, I thought I would forget about it, because that is what everybody told me. But I didn’t. So then I thought there was something wrong with me, because everyone else seemed to forget about it. And, um, so, so there was an inner sadness that you have. But it gets worse—at least for my generation it got worse for a couple of different reasons. If we went on to have other children, we realize what we have given up. You didn’t realize—Um, I had another child and realized what I had given up. And realized, um, every time my other daughter reached a milestone I would wonder where [my first daughter] was and what she was doing. And then as society changed and it became more and more possible for women to keep children, you kind of wondered, “Well, why couldn’t—why was I so meek? Why didn’t I stand up? Why couldn’t I—I should have been stronger. I should have been smarter. I should have known better.” And so you get into this blaming game, you know? And, and part of the healing for me has been to realize that, um, I’m strong now because of this.

Fortunately, Deborah tells me that she has found healing, and that being able to share her story is evidence of this recuperation. But for many women who went away, the process of healing is only beginning.

**Conclusion: Why Must This Architecture Be Understood?**

“Lying is done with words, and also with silence.”

I conclude each of my interviews with the same question: Why is it important for others to know about your story?
It is very important that the truth get out. Because of all the—I can’t tell you how many times [I’ve heard] ‘Oh, she didn’t want that kid. She just wanted to go out and party!’ And that is so far from the truth.

I always love when someone is interested in our story and wants to tell it because not a lot of people are. Sometimes adoptees will get very flippant with “Why didn’t you fight? Why didn’t you do this? What didn’t you do that?” So it is so nice to see someone your age who [. . .] can see how absurd this was. And it was.

I think that there probably are women out there who are so afraid that they are just hurting themselves. They are just keeping in that kind of frozen state.

Women who went away did so because they were implicated in a web of shame and secrets—an architecture of silence. Some of these women have been in reunion with the child they surrendered for adoption many years ago. Reunions are, themselves, difficult and complicated, and many women have found comfort and solace in finding other women like themselves. By participating in some of the various networks of mothers that have formed in recent years, these women can finally begin to puncture the silences and secrets that, in many ways, transformed their lives for such a long time.

Sharing one’s story of unwed pregnancy during the 1960s is not easy, and some of the mothers with whom I spoke struggled to find words for their experiences or were unsure if they made the right decision to delve into such distant (but intimate) memories. Some spoke with me only with the promise of strict anonymity. One mother repeatedly asked me what I thought of her. Unsure of what she was driving at, I finally reversed the question and asked her to tell me
her concern. “I don’t know if you believe me,” she explained. Although she insisted that she no longer felt ashamed for an unwed pregnancy that happened over fifty years ago, this woman’s identity as a mother—a mother who is honest and worthy of respect—still resides within an architecture of silence. For some, unwinding layers of secrets still reveals tender vulnerabilities.

One benefit of understanding going away as part of an architecture of silence is helping to contextualize a social process that operated on the premise that women were solely responsible for becoming unwed mothers—a symptom of the sexual double standard as described in chapter one. Contextualizing the process of hiding and surrendering a child for adoption can be incredibly instructive to those who learn about it now and find such processes completely foreign. As one of the comments above suggests, adoptees represent one group who might likely encounter this history and struggle to understand how a biological mother could lack the agency, power, and voice to keep her child. Exploring how an architecture of silence was crafted with rhetorics of shame is one way to demystify this complicated history and understand unwed mothers’ constrained positions. “One of shame’s most poisonous consequences is the way in which it overwhelms the subject so that she is unable to think beyond herself,” writes Locke. “Rather than focus on changing the world in ways that might lessen her shame, the shamed subject focuses on changing herself so that she might accommodate the demands of her milieu” (151). For some mothers, sharing their stories functions to supplant accommodation with voice in an attempt to release feelings of shame they have held for so many years. Sharing can slowly open the door of silence.

But perhaps above all else, revisiting these stories helps to bring them forward for public recognition and remembering. Glenn reminds that this is a valuable effort in and of itself, for “women’s silence or the silence of any traditionally disenfranchised group often goes
unremarked upon if noticed at all” (*Unspoken* 11). Writing her memoir about unwed motherhood, Moorman admits to feeling “an overwhelming sense of loneliness” because she believed “that no one could possibly understand what I had gone through, and that even if they did they wouldn’t care” (63). Sharing stories and trying to understand unwed mothers’ experiences helps to shed light on the secrets and silences that ruptured individual lives, but it also helps to account for how vast numbers of women were implicated in lies and secret-keeping that branched outward into families and through generations.

Nan Johnson urges rhetorical scholars to recognize that “the task of feminist histories of rhetoric implies not only identifying which women have been silenced or overlooked throughout the history of the tradition, but also pursuing just as dedicatedly information about why women are silenced and how programs of rhetorical silencing were deployed” (12). This examination of the architecture of silence related to unwed pregnancy during the 1960s has identified and explored one such site—an architecture both solid and permeable, but one that is indisputably enduring.
“Not so long ago, it used to be that when an unmarried girl became pregnant, her parents packed her off for a long visit to some faraway ‘Aunt Martha.’ Months later, her figure back to normal and her baby up for adoption, the unwed mother would return home, sadder but wiser.”

In March 1972, this recollection opened a *Newsweek* article, “Aunt Martha’s Decline,” which described changes in the supposedly secret culture of maternity homes. As described in chapter two, these homes had long functioned as repositories for unwed mothers, offering a place for women to hide and thus providing a solution to the “problem” of unwed pregnancy. The article continues:

But times have changed. Today, the liberal attitudes that gave rise to the Pill and legal abortion have also made it possible for many unmarried women to bear children openly in their hometowns—and keep them. One casualty of this social revolution has been ‘Aunt Martha,’ the old-fashioned home for unwed mothers.

According to this report, Aunt Martha was prudish and antiquated; times were changing, and women along with them. General “attitudes” about sex and marriage were changing as well, or so it seemed to some. A report prepared for the Birmingham, Alabama Salvation Army Home and Hospital for unwed mothers circulated internally in April of the same year. A consultant had been hired to assess the home’s recent decline in admissions. According to the report, “the Army” continued to provide needed services, but there was an explanation for why only 70 percent of the Birmingham home’s beds were full in 1971, as compared to the above-capacity
enrollments the year before. Specifically, the “availability of contraceptive information and materials,” the “increased availability and acceptance of abortion,” and the “[c]hanging community attitudes toward the unmarried mother and single-parent families” were to blame. “It is probably the latter consideration [changing community attitudes] that most seriously affects the intake at maternity homes,” the report continues. Then the piece goes on to clarify that these attitudes did indeed apply to white, unwed mothers and not just black, unwed mothers, a potential misinterpretation, what with the latter group’s “statistical influence” on overall rates of unwed pregnancy (“Salvation Army”).

These supposed lax attitudes, sometimes referred to as the “new permissiveness” of the 1970s, offer a great deal of explanatory power as to why the era of hiding and surrender ostensibly changed. (The other two explanations—the availability of the Pill and the Roe v. Wade decision—will be discussed in the next chapter.) The new permissiveness was a spirit of sexual freedom and liberation, especially popular among younger people, which countered the long-held cultural emphasis on “stable, marriage-centered sexual relationships” (D’Emilio and Freedman 308). Within youth movements of the late 1960s such as anti-war and anti-draft agitation, ideas and practices of sexual freedom gained traction. An emerging “hippie” counterculture rejected the strictures of previous generations. As one writer suggested,

There are no hippies who believe in chastity, or look askance at marital infidelity, or see even marriage itself as a virtue. Physical love is a delight—to be chewed upon as often and as freely as a handful of sesame seeds. (qtd. in D’Emilio and Freedman 307)

According to that same writer, hippies were convinced that the sexual revolution was in full swing and that a sea change in relation to attitudes about sex had already taken place.
Certainly, change was afoot, but the tide of new permissiveness was not welcomed by many who abided by older moral tenets of sexual restraint, especially in relation to women. For example, in 1968, the *New York Times* ran a story about unmarried couples in college who chose to cohabitate, profiling three couples who exemplified a “growing tolerance” for such arrangements (Klemesrud). But one of the women featured in the piece, a student at Barnard who had used a false name to protect her identity, was tracked down by the school administration. The student, Linda LeClair, went before a student-faculty judicial council that punished her for this violation, prohibiting her from eating in the school cafeteria. Then-president of Barnard Martha Peterson overruled the council’s sentence in the hope of expelling LeClair, who instead decided to drop out of school. The so-called LeClair Affair made headlines and raised the ire of alumni who variously expressed support for or disgust toward LeClair’s living situation and the school response to it (“The LeClair Affair”). Not everyone, it seemed, was on board with the new permissiveness.

Descriptions of how practices of hiding and surrender slowly began to fall from favor are overwhelmingly vague, at least in terms of explaining how attitudes of permissiveness were responsible for such change. This imprecision is much like that used to explain the practice of hiding unwed mothers in the first place; that is “just how things were back then,” people often say. This chapter provides the initial story of the long 1970s and the complicated route by which unwed pregnancy left the house of silence and familial shame and became an issue of increasingly public concern. Specifically, this discussion of the early 1970s focuses on the most elusive of the three reasons commonly cited for the era of hiding and surrender coming to an end: a new permissiveness that dissolved the shame and stigma of unwed pregnancy. First and foremost, I argue that this claim is misleading, for women still went into hiding far into the long
1970s and even later, and they most certainly still felt the stinging shame of becoming pregnant outside of marriage.

The first, meaningful, public effort to deal with the “problem” of unwed pregnancy is largely a story of unwed, pregnant bodies in the very particular space of the American high school. In the most commonly repeated narratives of social change during this era, the trope of “permissiveness” and “relaxed attitudes” suggests that the early 1970s ushered in a climate of increasing tolerance toward unwed, pregnant women. Nevertheless, judicial and legal efforts to officially manage and regulate unwed, pregnant bodies within educational spaces demonstrate the pervasiveness of the stigma of unwed pregnancy. More important to me than interrogating why the architecture of silence surrounding unwed pregnancy began to splinter, publicly, in this way is investigating how the discourses surrounding these decisions constructed unwed pregnancy so as to encourage or discourage tolerance for unwed, student mothers-to-be. I suggest that early case law illustrates residual, well-articulated intolerance of the unwed, pregnant body, while later legislation written in the spirit of tolerance and inclusion relied on discursive constructions of unwed pregnancy-as-disability that fail to decouple the unwed, pregnant student (the source of rights claims) from her pregnant body (the source of ongoing stigma and shame). I suggest that as rhetorical artifacts, such texts provide much-needed nuance to understand how, slowly and unevenly, the architecture of silence related to unwed pregnancy began to break apart and become a public issue. These documents’ rhetorical reliance on notions of the stigmatized body reflect the discursive challenges of discussing unwed pregnancy in a productive, public way and explain the ultimate failure of attempts to legislate tolerance of unwed, pregnant students on the basis of their right to an education.
In what follows, I first provide a brief overview of various attitudes about unwed pregnancy during the early 1970s—attitudes that counter the assumption of a broad acceptance of a new sexual permissiveness. The bulk of this chapter is devoted to close analysis of three primary texts: *Clydie Marie Perry et al., v. Grenada Municipal Separate School District, et al.* (1969), *Ordway v. Hargraves* (1971), and Title IX (1972). The two pieces of case law offer decisions on whether unwed, pregnant students are permitted to remain in school during their pregnancy. Title IX mandates the protection of pregnant students’ educational rights. I argue that these texts uphold notions of unwed pregnancy as stigma that cannot override the powerful visual rhetoric of the unwed, pregnant body in the classroom. This claim overturns the myth that sexual permissiveness in the early 1970s erased stigma from the unwed, pregnant body and helps to explain why the promise of Title IX was frequently not put into practice or embraced by the public. I conclude by arguing that as unwed pregnancy increasingly became a public issue, rhetorics about the “problem” remained tethered to the stigmatized, discredited body and thus were incompatible with the ideal of increased education rights for unwed, pregnant students.

**Bodies Tolerated or Tamed?: Three Takes on Unwed Pregnancy**

What was it like to be unwed and pregnant in the early 1970s? Answering this question proves difficult given the evidence of radically different attitudes and practices influenced by a woman’s geographic location, race, and socio-economic status. Triangulating three stories related to unwed pregnancy demonstrates the uneven application of the new permissiveness and provides a context for understanding the varied stakes of unwed motherhood in a time of promise, lingering stigma, and new forms of bodily control.
On April 2, 1971, high school student Judy Fay was featured on the cover of *Life* magazine as she stood before her class, delivering a report. The cover image includes Fay’s classmates who are listening from their seats as well as a male teacher who stands in the background. But the focal point of the composition is Fay’s distended midsection, upon which she rests her notebook. The accompanying essay opens:

In a public high school classroom, a 16-year-old student, eight months pregnant and unmarried, presents a book report. Her classmates and teacher are unruffled, for the quiet scene is an everyday event at Citrus High in Azusa, Calif.—and elsewhere around the country where educators are taking a radical new approach to an old and painful problem. Until a few years ago, the nation’s public schools dealt with teen-age pregnancies by expelling the girls or by putting pressure on them to leave. Many humiliated families arranged secret and illegal abortions for their daughters. Others sent them away to “visit relatives” or, if they could afford it, hid them in private nursing homes. (Woodbury 35)

The article continues by exploring Citrus High’s program to address the “special educational, medical and psychological needs of teen-age mothers” (Woodbury 35). Citrus High thus sets itself apart from many public high schools in 1971, for it allows unwed pregnant girls to remain in school during their pregnancy and also considers these mothers-to-be worthy of an education attuned to their unique needs. This cover story, illustrated by the visibly pregnant Fay remaining an active, integrated member of her high school class, seems to both demonstrate and persuade, offering a scene of how life could and should be for young, unwed, pregnant women by 1971. Instead of averting one’s eyes from Judy Fay’s pregnant body, the nation was encouraged to see
her as Citrus High did: as a young woman with promise, with needs, and with the support of her school.

Fig. 5. Judy Fay on the April 2, 1971 cover of *Life*.

Fay’s experience, however, was unlike that of “Audrey,” who was concluding her senior year of high school in Akron, Ohio in the spring of that same year. Nineteen seventy-one saw its fair share of change; it was the year in which the voting age was lowered to 18, Charles Manson was sentenced to death, U.S.-backed South Vietnamese troops invaded Laos, *All in the Family* debuted, *The Ed Sullivan Show* aired its final episode, and Walt Disney World opened its gates. But for Audrey, 1971 was a year of biding her time until graduation, dealing with the “whispers and looks” of other girls who knew her ruptured secret: that Audrey had spent the summer before her senior year at the Akron Florence Crittenton Home for unwed mothers.
I interviewed Audrey to find out why she went to the Crittenton Home, and what “going away” was like for her, in the early 1970s, when a story about Judy Fay suggested that the shame of unwed pregnancy was being eroded by increasing tolerance. In a time of new permissiveness, I wondered, why was Audrey bound by an architecture of silence? Audrey became pregnant at 15, after having sex for the first time with her boyfriend. She explained to me that her father reacted most forcefully to the news of her pregnancy. He was convinced that Audrey’s unwed pregnancy would bring shame on the family, whose demonstration of respectability fell largely on her, the hard-working, obedient, middle child of seven. Thus, despite the fact that Audrey’s older sister got pregnant out-of-wedlock and was permitted to remain at home and keep her baby, Audrey’s father was incensed upon learning of Audrey’s pregnancy. In his rage, Audrey’s father beat her mother, who he fully blamed for “letting” Audrey bring such shame on the family. Later, her father insisted, “We’re going to send you away.” Because of the timing of her pregnancy, Audrey would be able to hide at the maternity home over summer recess, ostensibly aiding the family in keeping her pregnancy a secret.

Audrey explained:

And, um, so I went there in—right after school let out, which was in June. And I didn’t really look pregnant, I mean, I was pretty thin back then. I’m kind of a small-statured person anyway. But, I was, ah, I was six months pregnant and no-one could really tell. So, went to the home, and [long pause] it was just so [pause]

34 Audrey’s father forcing her to leave home is an example of scapegoating, as described in chapter two. Audrey explained that her father did not force her sister to hide her pregnancy because she was already known to be a “slut,” whereas Audrey had been considered, in her words, a “golden child.” According to the logic of the scapegoat mechanism, scapegoating begins with identification, then continues with alienation of the scapegoated person in order to allow the persecutors to purify themselves. I would argue that Audrey’s family (with its desire for respectability) had already disidentified with the older sister, to some level: the father was willing to use a harsh epithet to describe that daughter and her supposed sexual looseness. But Audrey, a daughter who had exemplified hard work, accomplishment, and purity (values with which the family wanted to identify), was symbolically sacrificed (i.e., sent to a home for unwed mothers and forced to relinquish her child) in order to symbolically purify the family.
it was unlike anything I ever imagined. I mean, we were treated [pause] well, I would say, we were fed very well and we went to our doctor’s appointments regularly. We had our vitamins that we took—however, it was like being in prison because we could not get out. You could not leave. Everything was locked. You could not walk out any door at any time on your own. And if you found a way—like during the day, if we happened to, um, kind of sneak out the side door that the delivery person would use to bring in groceries and things, we might be able to sit on the stoop for a little while, but that was like all the fresh air that we ever got. We were not allowed outside. Um, and there were—there was a big iron fence all around the whole home. That, I mean, it was an eight-feet tall iron gate. You could not get through it.

Unlike Judy Fay, who was welcomed into her Californian high school classroom as an unmarried, pregnant student, Audrey literally remained within one of “Aunt Martha’s” houses. In Akron, Ohio in 1970, an architecture of silence and shame still surrounded unwed pregnancy.
Fig. 6. The Florence Crittenton Home of Akron, Ohio, where Audrey stayed in 1970. Florence Crittenton services ended in 1973. The home was later purchased by a local fraternity.

Although Audrey’s sense of confinement stems mostly from her experience inside the home, a particular memory relates how her pregnant, unwed body (marked both by her state of pregnancy and her forced residence in the home for unwed mothers) was seen by others:

And so just across the street, on the other corner there was a Burger King because this is on Market Street and this is a pretty busy street that runs right through downtown. And we just, um, just east of downtown, really. Just east of Akron City Hospital. And so one day, it was really nice and sunny and we were begging our house mother to let us go over to Burger King and let us get some hamburgers for lunch instead of having lunch inside. And she said okay. So there were about six of us who went. We got our meals and we sat down at a table to eat. And the
manager came over and he said, “You, you aren’t allowed to eat here. You’re going to have to leave.” He said, “We don’t want your kind here.” He said, “You’re going to have to go back across the street.”

Audrey and the other residents were not just customers; they were, first and foremost, unwed mothers, displaying their bodies in public and making visible their shameful situation. For that manager, concerned with maintaining a space pleasing to customers, “across the street” marked a significant distance—a needed distance that separated stigmatized, unwed mothers from the normals that remained outside the Crittenton fence. Thus, the street distinguished “there” from “here” but also reinforced the notion that that “there” is an “inside” for “those types of girls,” whereas “here” remains an “outside” for “the rest of us.” As Roxanne Mountford suggests, such material divisions are rhetorically significant and interdependent, for “[o]utside and inside are forms of negation, writ in primitive spatial dimensions, long associated with social inclusion and exclusion” (23). Audrey’s experience challenges the idea that a culture of permissiveness was sweeping through the nation, erasing the shame of unwed pregnancy.

Indeed, Audrey remembers the humiliation that she and the other mothers endured as they left the restaurant:

So, we were walking through the parking lot and of course there is the drive-through and there are people who are actually eating in their cars and stuff and they just called us all kinds of names. Threw stuff at us. It was awful. It was really awful. And it’s like that fifty feet from the parking lot to the gate at the home—that seemed like it took forever, walking. It—it was awful. It was really awful. The so-called new permissiveness could not and did not bring an end to rhetorics of shame experienced by unwed mothers, as Audrey’s experience demonstrates so poignantly. There lies a
great distance between Audrey’s memories of being unwed and pregnant in Northeast Ohio and *Life*’s depiction of reality for pregnant girls at Citrus High in Southern California. This disparity suggests how difficult it is to pinpoint what unwed pregnancy meant in the early 1970s, a time when complex, changing, and conflicting discourses and practices all converged on the unwed, pregnant body.

It does not seem coincidental that the *Life* cover image depicting “high school pregnancy” featured a white, ostensibly middle-class, pregnant student. Although the legacy of hiding of white, unwed mothers continued into the 1970s—and, for some women, beyond that decade—unwed pregnancy represented something entirely different to young, African-American women during this time. By 1973, the story of involuntary sterilization forced on poor, non-white women began to draw public attention. Specifically, news broke of government-funded, nonconsensual sterilization programs once Americans became aware of the case of Minnie Lee Relf (age twelve) and Mary Alice Relf (age ten), African-American sisters from Alabama who were given tubal ligations without the knowledge or informed consent of their parents. The Relf story made headlines because both girls were young, because one of the girls had a (confirmed) developmental disability, and because consent for the procedure came from the girls’ illiterate mother. Additionally, the Relfs’s experience served as the basis of a class-action suit filed on behalf of more than 125,000 other “poor, minor, or disabled persons” who were involuntarily sterilized through federally funded programs (Charmallas 1126).

Much scholarship has been devoted to the long and sordid history of involuntary sterilization;35 my point in briefly noting the practice here is to emphasize that the notion of who

35 See, for example, Kluchin’s *Fit to Be Tied: Sterilization and Reproductive Rights in America, 1950-1980;* Nelson’s *Women of Color and the Reproductive Rights Movement;* Roberts’s *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty;* and Davis’s *Women, Race, and Class.* Also, see Enoch’s “Survival Stories: Feminist Historiographic Approaches to Chicana Rhetorics of Sterilization Abuse.”
could potentially embrace sexual permissiveness was not only contingent on gendered expectations, but was highly dependent on class and race, as well. The racial politics of unwed motherhood, which I discuss in greater detail in chapter five, resulted in many non-white women being rendered permanently infertile at the behest of the state during the early 1970s. For instance, the local, social agency that oversaw the Relf sterilization did the same for nine other girls in 1973 alone. Most importantly, the agency based these decisions on the assumption that these girls would likely bear children out of wedlock and, subsequently, rely on state support. According to historian Rebecca Kluchin, the agency’s records reveal that “in the early 1970s, forced sterilization had evolved beyond the targeting of those who had born children out of wedlock; some family planning clinics had begun to sterilize ‘unfit’ girls who, they predicted, would become unwed mothers” (101; emphasis added). Thus, one of the “most striking features of sterilization demographics” during the 1970s was the “extreme youth of those selected for surgery,” many of whom had not yet reached puberty (Ordover 168).

This brief overview suggests that in the early 1970s, the shame, stigma, and judgment related to unwed pregnancy did not merely dissolve and give way to an era of new permissiveness. Although the notion of expanding permissiveness provides an uncomplicated explanation for how unwed mothers were treated during a time of great social change, the real story is much more thorny. All in all, the stigmatized body still held much sway, even if the promise of increased acceptance, captured in Time’s cover image of Judy Fay in her bulging jumper, gained circulation. As the nation hesitatingly experimented with the idea of (some) unwed, pregnant bodies “going public,” it would also have to face the challenge of articulating defendable stances on the rights and freedoms afforded or denied these young, expectant women.
Articulating Stigma at School: Pathologizing Rhetorics and the Fight for Legal Rights

Judy Fay and Audrey demonstrate that in the early 1970s, the “problem” of unwed pregnancy was one that implicated American schools. Fay’s presence at Citrus High epitomized the promise of tolerance, greater inclusion, and support for unwed mothers. Audrey, conversely, remained sequestered in a maternity home over the summer, the recess from school aiding in her family’s plan to keep her pregnancy a secret from her teachers, peers, and neighbors. And even the LeClair Affair, though not about unwed pregnancy, showcases how a school’s reputation was thought to hinge on the image of sexual purity as displayed by its female students. Whether public or private, high school or college, many schools symbolically represented tradition, discipline, and sexual purity—an image their administrators were eager to uphold.

For many years, whether or not an unwed mother hid her pregnancy was a decision over which she rarely had much, if any, say. Even if an unwed mother found the support to not secret her pregnancy at a maternity home, she very well may have been barred from attending school by a principal or school board. Within the context of the American high school, the problem of student pregnancy had long been a visual one: unwed pregnant bodies that “showed” were not to be seen—and were certainly not to be seen at school. (Nor were the pregnant bodies of teachers, for whom a career and a sexual life were presumably mutually exclusive.) Because unwed, pregnant girls bore the mark of their mistake, they frequently lost the “privilege” of an education, another glaring example of the sexual double standard. For example, before Margaret went to a home for unwed mothers, her principal called her to his office because of a circulating rumor that she was pregnant. Instead of allowing Margaret to defend herself, the

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36 Margaret is one interviewee featured in Fessler’s The Girls Who Went Away.
principal automatically expelled her and demanded that she bring a note from her doctor proving that she was not pregnant in order to be permitted to reenroll (Fessler 72).

As the shame of unwed motherhood persisted beyond the 1960s, many young, unmarried, pregnant students had little ability to contest being dismissed from school. But at the same time, teenagers’ rights more generally began to expand. The age of majority, or the legal threshold for adulthood, was lowered from 21 to 18 in many states over a five-year period starting in 1969. These states reasoned that teenagers’ “increased maturity” warranted this change (Paul, Pilpel, and Wechsler 142). Although high-school age, pregnant girls were likely younger than 18 and thus not directly affected by such legislation, the shift in perception about when and by what measure teenagers came of age demonstrates that the question of how to interpret maturity was up for debate. To a lesser degree, school officials’ unmitigated power over unwed mothers could also begin to be questioned, if not by students, per se, then by others who advocated on their behalf.

Marion Howard, then-Senior Scientist for the Department of Health Care Administration at George Washington University, opens an essay in a 1971 issue of the Journal of School Health by warning that “[t]he problem of pregnant school-age girls is one of concern to every school system in the country.” Howard explains that although the actual number of school-age girls (defined as those under the age of 18) who become pregnant remained unknown, over 200,000 births to school-age mothers were recorded per year, with this number increasing by about 3,000 births annually (361). Expelling pregnant students is an injustice that runs counter to educational goals, Howard contends, because girls who attend school systems that allow them to continue their education are statistically more likely to graduate, improving their grades as they work toward completing their education (362). Despite these numbers,
[m]ost school systems exercise local policies and practices (not laws) in which any married or unmarried girl who becomes pregnant can be forced out of school. Few offer any education during pregnancy; of those that do, the most common is that of two hours a week home tutoring. Following pregnancy many school systems discourage the young mother from returning to school. Some impose unreasonable lengths between the time of delivery and the time when she can return, some even prohibit her from ever again attending regular school classes. (Howard 361)

Howard also claims that “welfare systems” frequently refuse to provide poor girls with financial support so that they can return to school but commonly provide aid to young mothers who drop out of high school (363). Lamenting this rejection of pregnant girls’ needs, Howard labels these unsupportive practices as acts of “social handicapping” (363).

In the early years of the 1970s, in the wake of the civil rights movement and as the women’s rights movement gained traction, the cultural practice of denying school-age mothers both an education and access to school space slowly started to be questioned by researchers like Howard, by members of Congress, and not least of all by pregnant girls themselves. Charting judicial and legislative decisions of the late 1960s and early 1970s demonstrates that the decision about whether unwed, pregnant, school-age girls should be permitted to attend high school during or after their pregnancies remained a contentious one. Scholars have largely ignored the two primary pieces of case law that contributed to establishing unwed, student-mothers’ legal rights to attend school. Additionally, the piece of legislation that protects those rights—Title IX—has been investigated almost exclusively for its relevance to women’s sports.
Examining these often neglected documents together illustrates that although unwed mothers were given the legal right to remain in school with Title IX in 1972, previous rulings made evident the acceptability of denying pregnant girls admission to high school. Further, the reluctance among courts of law to protect the educational rights of unwed, pregnant students foreshadows a resistance among many school administrators to uphold Title IX. These early pieces of case law rhetorically depict unwed pregnancy as a source of contamination, while the later legislation crafts a discourse of pregnancy-as-medical-disability. Such pathologizing language distinguishes unwed, pregnant bodies as not “normal” at the same time that these discourses outline girls’ legal protection to remain within the normative space of the American public high school. Thus, while pregnant girls were ultimately granted legal access to the high school classroom, the understanding of their participation in this space is framed by a discursive pattern of pathology.

First as contagion and then as disability, the framing of unwed pregnancy as primarily bodily difference perpetuates stigmatization and thus obliquely discredits the unwed, student mother’s humanity as the basis of her identity. I suggest that the *Perry* and *Orway* decisions articulate and thus illuminate the perceived threat of unwed pregnancy, a threat to which Title IX indirectly responds, but does not itself articulate. And Title IX, though an attempt at inclusiveness, proved to be insufficient in reversing the common practice of denying pregnant students access to school in large part because its rhetoric extended, rather than reversed, stigmatization of the unwed, pregnant body and was therefore incompatible with the document’s purpose of securing a universal human right.
Clydie Marie Perry: Unwed Mothers Are “Dismissed”

In January 1969, the United States District Court in Oxford, Mississippi heard the case of Clydie Marie Perry et al., v. Grenada Municipal Separate School District, et al., a ruling that, in part, reinforced the belief that unwed, pregnant girls posed a legitimate threat to high school environments. Perry, a 17-year-old high school junior described in one newspaper article as being “poor and black,” sought an injunction on behalf of all school-aged, unwed mothers in Grenada County (Rowan). Perry unsuccessfully petitioned her local school board, having asked to be admitted to her school as an unwed, pregnant student. Although Perry claimed that the practice of “exclusion of a mother of an illegitimate child” was enforced on a “racially discriminatory basis,” the Court’s first action was to overrule the motion for an injunction based on the fact that “excluding unwed mothers [from school] is enforced in a nondiscriminatory manner without regard to race, creed or color.” In Oxford, the schoolhouse gate remained shut for all unwed, pregnant students.

This decision, however, provided an opportunity for the Court to explain why non-admittance of pregnant students was justified. (The Court ultimately posited that a girl who had only one illegitimate child should eventually be considered for readmission to school so that she might “rehabilitate herself.”) District Judge Orma R. Smith explained that the school district should be permitted to dismiss a pregnant student, for “the Court can understand and appreciate the effect which the presence of an unwed pregnant girl may have on other students in a school,” further stating that “[t]he purpose for excluding such girls is practical and apparent.” Smith’s assuredness that all young people have the right to an education, conditional on their good behavior, parallels his confidence that unwed, pregnant girls are, nevertheless, a “bad influence.” The ruling required that school boards allow the unwed mother to present herself at a “fair
hearing” before “school authorities” who would reassess her moral character, since she still threatened to “taint the education of other students” (Perry). Thus, Smith endorses school administrators as the arbiters of moral worth for one-time offenders and reifies the notion that exile from school while pregnant is a reasonable practice.

Judge Smith’s ruling demonstrates what education policy scholar Wanda Pillow describes as an “ideology of contamination” that attempts to protect the greater student body from being tainted by the unwed, school-age mother (66). According to Pillow, the theme of contamination “circulates the idea that the presence of a sexually active female student (as a pregnant student or a mother) will contaminate the student body leading to an epidemic of immoral and promiscuous behavior” (63). This rhetorical depiction of “bad” pregnancy as disease renders the unwed, pregnant body a viral threat to the wellbeing of others. Thus, this body must be cordoned off from the school, which is a symbolic site of purity and normativity. This separation of contaminated bodies from non-contaminated bodies and spaces functions to mark both the “diseased” and the “pure.” As disability scholar Kristin Lindgren explains, representations of contamination and containment perpetuate a central fiction: that a stable body and identity can resist such invasion (153).

The fear that an unwed, pregnant girl might render other students impure by association is, unfortunately, not surprising given the lengths to which many families went to encase an unmarried, pregnant daughter within an architecture of silence, to hide her body and erase her identity as a mother. But the legal discourse surrounding the Perry ruling demonstrates how the fear and stigma of unwed pregnancy was articulated when such silence was broken in order to air a grievance publicly. The idea of unwed, pregnant girls within the space of the school and among other students is a key provocation for such expressions of fear. As Erving Goffman argues,
when the “normal” and the “stigmatized” come into contact, “there occurs one of the primal scenes of sociology; for, in many cases, these moments will be the ones when the causes and effects of stigma must be directly confronted by both sides” (13).

What is most revealing about the Perry ruling is its articulated rationale for an irrational practice. Discourses of contamination like those in the ruling function as metaphors for unspoken economies of stigma that project meaning onto both bodies and spaces. Here, “normal” (i.e., non-pregnant) high school students are “stigmaphobes,” or those who belong to a dominant culture of non-stigmatized people. Conformity among stigmaphobes “is ensured through fear of stigma” (Warner 43). As Michael Warner explains, the “stigmaphile space” is the space of abnormality; it allows one to find “commonality with those who suffer from stigma.” In contrast, the realm of the stigmaphobe is a space where normalcy reigns and the where all cues, visual and otherwise, uphold this paradigm of invisible, taken-for-granted normalness. Thus, by barring admission of unwed, pregnant girls to high school, school administrators punished girls who were “in trouble” by sending them “away” to some other, stigmaphilic space—thereby preserving the school as a stigmaphobic, or normal, place. As a public and disciplinary site, the school both establishes and adheres to the boundaries of normalcy. Thus, unwed mothers’ banishment from school upheld a code of propriety that pregnant girls, with their visibly sexual and therefore abnormal bodies, violated. Casting them out of school functioned as an act of shaming and a reinforcement of what counted as “normal.” Unmitigated dismissal of unwed mothers also reflects how administrators employed defense by avoidance, minimizing a potentially explosive rhetorical situation and evading the complexity of dealing with unwed,

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pregnant bodies in the classroom. Instead, they simply denied pregnant bodies access to an education and thereby “protected” the more important student body.

Although the Perry case did not result in a victory for unwed mothers’ rights, it does provide a rationale for why a mother’s right to an education was considered unjustified. This rationale hinged on the notion that a visibly pregnant, unwed body within the space of the school would comprise the social certainty of normalcy. Thus, the Perry case indexes the extent to which the unwed, pregnant body was feared and stigmatized within what was perceived to be a culture of expanding permissiveness.

Ordway v. Hargraves: Inroads toward Unwed Mothers’ Educational Rights

Another legal battle over the rights of unwed, pregnant students was unfolding two years later in Massachusetts, seemingly a world away from Mississippi and Clydie Marie Perry. In 1971, a white, unwed, and pregnant senior honor student, Fay Ordway, was granted permission by a District Court to continue to attend North Middlesex Regional High School in Townsend, Massachusetts. Ordway’s mother brought a civil action on behalf of her daughter after Fay was instructed to stop attending Middlesex High on February 12, 1971. Fay Ordway had informed Principal Robert Hargraves of her pregnancy in late January, indicating that she was due in June (Ordway). Claiming that he was bound to oblige school board policies, the principal sent a letter to Mrs. Ordway indicating that Fay could not attend the school and could only use school facilities such as the library after the daily dismissal of other students.38 Fay requested a school

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38 Ordway was permitted to participate in other school and senior-class functions. The opinion does not explain why Ordway would have been permitted to attend these after-school class functions while not being able to attend classes or visit the school before daily dismissal. One can assume that after-school functions were attended voluntarily, and thus administration could not or did not wish to ban Ordway from these events. Whatever the reason for this stipulation, its presence reinforces how the mandate of expelling pregnant students was one made and enforced by administrators as a result of social custom, not medical necessity.
committee hearing to challenge Principal Hargraves’s decision, but the committee members supported the dismissal decision (Ordway). In his testimony in District Court, Hargraves admitted that Ordway’s pregnancy had not, despite fears otherwise, disrupted the Middlesex educational environment.

*Ordway v. Hargraves* resulted in the District Court ordering that Ordway be permitted to return to school, a greater acknowledgement of the educational rights of unwed, pregnant students than had come from the *Perry* ruling. Nevertheless, the account of the proceedings makes apparent the extent to which, in Massachusetts in 1971, Ordway’s unwed, pregnant, female body was considered a violation of the fictive, normalized, asexual space of Middlesex High. For example, the ruling notes (without irony, one can presume):

> It is clear from the hearing that no attempt is being made to stigmatize or punish plaintiff by the school principal or, for that matter, by the school committees. It is equally clear that were plaintiff married, she would be allowed to remain in class during regular school hours despite her pregnancy. (*Ordway*)

Ostensibly, Ordway’s *pregnancy* was not the problem at hand; her *unwed pregnancy*, rather, was the incriminating factor. Because the ruling insists that Ordway is not being treated in any unusual way, it demonstrates the extent to which Fay Ordway, high school honor student, had disappeared in the eyes of the school committee and the Court. She was eclipsed by her status as an unwed, pregnant girl with a visibly pregnant body, and thus, she represented a potentially ungovernable *symbol* of sexual deviance.

The threat of an unwed, pregnant girl in the classroom lies in the many meanings that can be mapped on to her body, which functions as a powerful visual symbol. The unmanageable, rhetorical power of Fay Ordway’s unwed, pregnant body seems to have been more of a concern

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39 The Court document does not identify the “seven individual members” of the school committee (Ordway).
to school officials than any actual problems that arose while Ordway was still in school. According to the ruling, Ordway testified that “she has not been subjected to any embarrassment by her classmates, nor has she been involved in any disruptive incidents of any kind.” Additionally, Ordway testified that “she has not been aware of any resentment or any other change of attitude on the part of the other students in the school” (Ordway). Despite this claim, and the testimony of several witnesses who explained how the exile of a pregnant student could be detrimental to her and her baby’s health, the ruling explicates a central concern:

The policy of the school committee might well be keyed to a desire on the part of the school committee not to appear to condone conduct on the part of unmarried students of a nature to cause pregnancy. The thrust of [Principal Hargraves’s] testimony seems to be: [. . . ] he finds the twelve-to-fourteen age group to be still flexible in their attitudes; they might be led to believe that the school authorities are condoning premarital relations if they were to allow girl students in plaintiff’s situation to remain in school. (Ordway; emphases added)

As a visible presence, Ordway’s rhetorically potent body represents a site of visual, enthymematic threat: it might appear to render school authorities complicit in her immorality and subsequently hold undue sway over younger students.

Why was so much effort needed for the court to reach its decision that “the right to receive a public school education is a basic personal right or liberty”? Why did the rhetoric of rights not override the need to argue that Ordway was not being stigmatized (even though she was) and then to provide a rationale for why that stigmatization was justified (even though it was not)? In short, the visual rhetoric of the unwed, pregnant body within the school continued to hold such great power that it superseded Ordway’s initial appeal for equal treatment and figured
prominently in the decision as to whether her rights would be acknowledged in a court of law. As was the case in the Perry ruling, the rationalization for prohibiting unwed, pregnant students from appearing in the classroom suggests that Hargraves and the school committee believed that the sight of an unwed, pregnant girl was threatening to normative notions of appropriate behavior among students—so much so that her culpable, marked female body needed to be exiled from the school.40

The Ordway ruling suggests the visual rhetorical power of stigmatized bodies that are made (or are allowed to be made) public. Stigmatized bodies are always in a complicated relationship with sight because visual conspicuity enables stigmatization at the same time as it erases stigmatized people politically and socially (Garland-Thomson 56). Broadening Rosemarie Garland-Thomson’s explanation of disability to stigma suggests that, stigmatization “operates visually by juxtaposing the singular (therefore strange) mark of impairment in a surrounding context of the expected (therefore familiar),” thereby giving meaning to an “impairment” (“Politics of Staring” 59-60). Opening the schoolhouse gates to unwed, pregnant girls would not merely mean allowing them to attend class; instead, it would create a new visual narrative of unwed pregnancy in the classroom. In so doing, admission would challenge, even threaten to reconstitute, the meaning of “normal” within that space.

Despite these deterrents, the Ordway ruling established a precedent that, by allowing unwed mothers to remain in school, opened the door for the humanity of young, unwed mothers to be acknowledged in ways it had been discredited before. The reluctance to grant these rights,

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40 Dr. Mary Jane England was one of several witnesses who testified during the Ordway proceedings. A medical doctor and a psychologist, England explained that forced absence from school often caused depression in students, “and that the depression of the mother has an averse effect on the child, who frequently is born depressed and lethargic.” England’s opinion illuminates the priority given to the health of the fetus in this situation. Her position also supports the claim made by Solinger that the pregnant woman has increasingly become “a dehumanized container whose only purpose should be to serve the fetus correctly” (Pregnancy and Power 235).
however, emphasizes just how pervasive the stigmatization of unwed mothers was, and the resistance that would be met by those who advocated on behalf of such women. Such resistance is the reason that Howard, in concluding her *School Health* essay, urges schools to recognize that the issues [of teen pregnancy] are not simplistic moral ones—pregnancy is not contagious; pregnant girls do not cause other girls to become pregnant—but ones of risk and that the high risks of pregnancy in adolescence deserve the same conscientious objective support and effort toward solution that is made in other areas (364).

As *Perry* and *Ordway* demonstrate, much work would need to be done in order to make Howard’s vision a reality.

*Title IX: The Promise of Inclusion*

*Ordway v. Hargraves* might have provided a precedent for rulings on school dismissals for unwed, pregnant students, but Title IX is the expression of equality that should have brought the end to expulsion based on unwed pregnancy. As part of the Education Amendments of 1972, Congress passed Title IX in order to protect the rights of female students. The law is far-reaching, although it is most commonly—often exclusively—recognized for mandating that school-sponsored physical fitness and sports programs are accessible to female students. A law ensuring the rights of an underserved population would have hardly seemed novel in the early 1970s, in the wake of two turbulent decades of civil rights agitation, setbacks, and victories. The passage of Title IX represented a significant moment for female students, however, for it mandates the protection of women against discrimination in education, a site of coverage not
included in the Civil Rights Act of 1964.\textsuperscript{41} Although the legislation’s application to school athletic programs has been viewed as its central aim, the law also includes a stipulation for treatment of pregnant students. Title IX’s explication of the rights of pregnant students forbids schools to deny admission to students who are pregnant (regardless of marital status), makes unlawful forced separate schooling for pregnant students, and demands that voluntary segregated classrooms are equal to those for non-pregnant students. In establishing these protections, Title IX likens pregnancy to a temporary medical disability, thus allowing Congress to provide a familiar framework for requiring schools to open their doors to the young, pregnant, and (frequently) unmarried. However, as this medical disability framework provides a basis for schools to include students it recasts their condition as a disability, thus continuing to advance their non-normative status.

Title IX was the product of two sets of Congressional hearings, the first being heard by U.S. Representative Edith Green of Oregon in 1970. Testimony at the hearings was meant to explore various practices of sex-based discrimination in higher education. Some administrators openly described a common practice whereby a woman could only be admitted to a college if her grade point average was higher than that considered acceptable for male applicants. This candid response troubled some members of Congress, and the issue of how to end gender-based discrimination “[i]mediately” became a “contentious issue” around the hearings (\textit{Title IX at Thirty} 14). In subsequent years, five competing bills addressing gender equality in education were drafted. Ultimately, two competing bills sponsored by Senators Birch Bayh and George McGovern were combined to create the Title IX legislation that was approved in both houses of government.

\textsuperscript{41} Although Title VI of the Civil Rights Act of 1964 is meant to prevent recipients of federal monies from discriminating on the basis of race within educational settings, women were not recognized as a class at the time of its passage and thus were not systematically aided by this legislation (Hogshead-Makar and Zimbalist 49).
Congress before being signed into law by President Richard Nixon on June 23, 1972 (Title IX at Thirty 14).

Title IX was especially meant to serve as an antidote to these imbalances in secondary education admissions, however the law’s influence on girls’ and women’s sports has come to eclipse the multiple purposes of the legislation in many Americans’ minds. One portion of the legislation that draws scant public attention is its prohibition of discrimination based on pregnancy in institutional settings (Hogshead-Makar and Zimbalist 49-50). This portion of the law is significant, though, in its prohibition of unequal treatment of pregnant students. Specifically, three sections of Title IX’s subsection on “marital or parental status” are important to this group:

- A recipient [of federal funds for education] shall not discriminate against any student, or exclude any student from its education program or activity, including any class or extracurricular activity, on the basis of such student’s pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom, unless the student requests voluntarily to participate in a separate portion of the program or activity of the recipient. (106.40.b)

- A recipient shall treat pregnancy, childbirth, false pregnancy, termination of pregnancy and recovery therefrom in the same manner and under the same policies as any other temporary disability with respect to any medical or hospital benefit, service, plan or policy which such recipient administers, operates, offers, or participates in with respect to students admitted to the recipient's educational program or activity (106.40.4)
A recipient which operates a portion of its education program or activity separately for pregnant students, admittance to which is completely voluntary on the part of the student as provided in paragraph (b)(1) of this section, shall ensure that the separate portion is comparable to that offered to non-pregnant students (106.40.3).

This mandate allowed pregnant girls to remain in school, to interact with their classmates, and to voluntarily opt in to a special classroom (when available). As such, it marked a significant advance in the acknowledgement and advocacy of unwed, pregnant students.

Title IX declares that schools should treat pregnancy analogous to “any other temporary disability,” although this description lacks further explanation. The law blends an anti-discrimination mandate with a call for accommodations, but uses relatively vague language that permits courts of law to interpret its meaning as needed, on a case-by-case basis. Thus, the medical designation functions as the primary basis for interpretation. Because disability is the frame adopted by the authors of Title IX to shape application of the law, the text implies that pregnancy does not function as a distinct condition warranting unique accommodations (Brake 171-2). Rather than a malevolent attempt to label pregnant, school-age girls disabled, the designation is economical—it likely served as a shortcut on the part of lawmakers, who did not attempt to articulate the complex bodily exigence of pregnancy among school-age girls.

Title IX articulates the promise of equal treatment of school-age female and male students. But the just spirit of the law is compromised by the crude rhetorical mechanism it employs to extend this protection to pregnant girls. The designation of temporary disability undercuts a truly inclusive rhetorical construction of pregnant, school-age mothers. The label oversimplifies pregnancy, for likening it to a truly temporary disability, such as a broken ankle,
suggests that it is a “condition” primarily of the body and one from which to recover, at that. Pregnancy might represent a temporary gestational period, but the resulting delivery does not signal a simple return to pre-disability conditions. Instead, birthing a child represents the beginning of ongoing physical, emotional, and material transformations for the mother, who, in the early 1970s as I have shown above, is still stigmatized for “her” school-age pregnancy. Thus, the law’s rhetoric illuminates the hasty rationalization and visual premises upon which it is based: that once a student does not look pregnant, her pregnancy is of little relevance to her education or the rights and protections school administrators should guarantee her.

Further, the construction of pregnancy as abnormality reflects an idea generally accepted by disability scholars that such categorization enables “the invisible presence of a pure and unmarked center” (Dolmage and Lewiecki-Wilson 33). In this case, there are three centers: the pure mother (she is not an unmarried student), the pure female student (she is not pregnant), and the pure classroom (in which no visible markers of students’ sexuality exist). I contend that the visual power of the young, unwed, pregnant body in juxtaposition with the asexual space of the classroom can help to explain this tendency in the early 1970s to continue to construct unwed pregnancy as problem and, in the case of Title IX, as a disability. The language of Perry and Ordway suggests that part of the stigmatization of unwed pregnancy was, historically, the fear that the seen unwed, pregnant body within the classroom would imply identification with—even collusion with—that body. Thus, meaning-making that follows from “the logic of the visual” (Dolmage and Lewiecki-Wilson 32) likely informed later, more tolerant but still stigmatizing, constructions of unwed pregnancy.

And along with understanding school-age pregnant girls as bodies of temporary difference instead of recognizing them as mothers, this law indirectly subverts the recognition of
such students as full humans. Most importantly, a focus on pregnancy-as-temporary-disability addresses unwed pregnancy as a medical condition but continues to deny consideration of the pregnant student as mother. This denial is surely less intentional than that faced by mothers who anonymously surrendered a child for adoption, but it nevertheless perpetuates a practice of seeing young, unwed mothers as problematically pregnant, rather than mothers in their own right. Because the legislation and its judicial precursors draw attention to unwed pregnancy as a threatening or medically significant bodily state, they base their affordances (or denials) on the uniqueness of those unwed pregnant bodies. In other words, these bodies are understood as stigmatized, and these legal documents directly and indirectly uphold their stigmatization by defining unwed, pregnant students as inherently different than other students. Insofar as the person with a stigma is “by definition . . . not quite human” (Goffman 5), then discussions of the rights and privileges of unwed students must establish their full humanity in order to compensate from stigma’s discrediting power. Because Title IX does not reframe unwed, pregnant students in this way, the overall goal of the legislation is compromised.

Indeed, as a law addressing school-age, pregnant girls in the 1970s, Title IX failed (and continues to fail), given the dearth of its de facto implementation (Pillow 61). In other words, school authorities did (and still do) have the latitude to ultimately determine if and when unwed, pregnant students should be forced out of the classroom, which resulted in many girls not experiencing the benefit afforded by the law. Feminist scholar Deborah L. Brake contends that Title IX employs a “distinctive” legal approach that is “substantive and results oriented,” thus allowing the legislation to be especially effective in comparison with other discrimination laws (8). Nevertheless, much like Brown v. Board of Education of Topeka’s decree for schools to desegregate with “all deliberate speed”—language that undercut the potency of this Supreme
Court’s ruling (Ogletree xiii)—Title IX failed to ensure school compliance in terms of protecting pregnant students’ rights. 42 Such non-uniform application of the law leads Pillow to argue that “teen mothers remain the unmentionables and the unknowns” of the amendment (56), suggesting that marked, unwed, pregnant bodies experience residual cultural shame that more “fit” bodies do not. These students’ de jure protections, established as early as 1972, were not policed; thus, the de facto convention of denying pregnant students access to school space continued widely. Thus, the law functions as a shift from the punishment of deviance to the management of a disability, supplanting critical attention to sexual/gendered injustice with another register of marked difference. Although only an exercise in speculation, one wonders what practices could have emerged with a more robust rhetorical construction of pregnant students’ educational rights and needs as mothers, rather than disabled bodies that legally should be granted access to the classroom.

“Grotesque” Bodies: Backlash to Tolerance

Even though not a wide social practice, some administrators did permit pregnant students to attend school, even before Title IX went into effect. Such inclusion made the idea of unwed pregnancy within the classroom a reality, and prompted a public reckoning of this long-held juxtaposition. One such early attempt at integrating pregnant students into the school environment, that of Citrus High described above, provides a sense of how pregnant girls’ access to the mainstream classroom was sometimes met with rhetorics of disgust and revulsion.

42 The problem with enforcing Title IX’s provision for pregnant students is the lack of case law in relation to this part of the law’s application. Many unwed, pregnant students have limited financial resources and the process of seeking legal redress would likely exceed the duration of the pregnancy (and thus would become the responsibility of a young, single mother). For these reasons, Title IX’s pregnancy provision has not been challenged.
It was in early April 1971, about one month after the *Ordway v. Hargraves* ruling, when Judy Fay—a white honor student like Fay Ordway—made the cover of *Life*. Citrus High had a far more understanding relationship with their students than did Middlesex High, for the administration encouraged girls to stay in school until the last two weeks of their pregnancy and return to school with their babies six weeks after giving birth, taking a combination of home economics, child care, and “standard academic” courses (Woodbury 35). Principal James Georgeou developed the program based on his belief that teenage pregnancy should be treated “not as a social disease but as a fact of life” (Woodbury 38). Georgeou met resistance from the Citrus school board, but the article notes that the school’s “spirit of incentive” resulted in many of the maternity program girls graduating early. Fay serves as an example of the benefit of the program because her “heavy [post-pregnancy] course load . . . will enable her to graduate in June” and then go to college, “something she hadn’t even considered before she got pregnant” (Woodbury 40).

Citrus’s program seems to have functioned as a well-developed version of earlier experiments in specialized education for unwed, pregnant girls, such as that tested at Webster School in Washington, D.C. as early as 1963 (Vinovskis 49). *Life*’s decision to profile the program as a lead story suggests that the trend was beginning to take hold, while painting Citrus in near-utopian terms. The benefit of allowing pregnant girls to remain in school seems to reverse the contagion so feared by other administrators for as the article notes, “[n]ow that there are pregnant girls at Citrus, the boys have cleaned up their language, courteously hold open doors and even push strollers” (Woodbury 40). The article—and various pictures of Fay and other pregnant students comfortably interacting with other students, teachers, and administrators—provides narrative and visual proof that at Citrus, unwed, pregnant bodies do not
function as reminders of a problem that should be erased, but rather as correctives to the immaturity and self-absorption of adolescence.

The move to grant unmarried pregnant girls access to the classroom was one for which many Americans were not ready, if the responses to Life’s feature is any indication. Reader J. A. Siegel’s thoughts on the piece are included in a subsequent issue. Siegel laments that the “[c]over sets some sort of a new dimension of achievement in crass, lurid, inelegant journalistic bad taste. To proffer a picture of this pathetic schoolchild with her grotesque maternity figure over the bold-type title “High School Pregnancy” simply makes a bad, sad, scene” (20A). Save one response from Principal Georgeou, all of the letters to the editor disparaged Life’s decision to report on the story of the girls and school programs described by the piece. Simply stated, readers did not appreciate the magazine’s suggestion that “life” now included accepting pregnant girls into school space and supporting them as they balanced obtaining an education and preparing to have a baby.

Siegel’s comments critique the visibility of Fay’s body on the cover of the magazine, making apparent the letter writer’s own expectation: that such errant bodies remain hidden from public view and that and evidence of these bodies, such as publicized pictures and magazine articles, are grossly inappropriate. That the magazine would make the story of this unwed, pregnant student its feature and go so far as to put her “grotesque” body on the cover offends Siegel’s stigmaphobic sensibilities. The visual, rhetorical power of Judy Fay’s body overrode the ability for Siegel, like so many others, to reframe unwed pregnancy as Principal Georgeou did, as a natural “fact of life” rather than a “social disease.” Siegel’s comments graphically express his (or her) displeasure but, in a less overt way, also suggest that Fay’s presence—on the magazine’s cover and in the normalized space of the high school classroom—intrudes upon what should be
stigmaphobic space, threatening to render it stigmaphilic. Such a statement of disgust reflects that the promise of tolerance remained bound to the discourses that outlined it, and that these discourses remained tethered to stigmatized, shamed bodies.

**Conclusion: Visually Compromised Rhetorics of Justice**

Identity matters when private personhood is made public. In a public sphere, where gender or race reign through the force of social construct, historical pattern, and even constitutional authority, social narratives are shaped within the nation’s body politic. . . . [T]here are some bodies that will and can ordinarily disappear into the normative, that are not vulnerable to the socialized identity scripts that ensnare public narratives. White male heterosexuals are the unspecified norm against which alternative bodies find themselves publicly visible.

—Karla FC Holloway, *Private Bodies, Public Texts: Race, Gender, and a Cultural Bioethics*

In earlier decades, unwed mothers—especially white, unwed mothers—were hidden from view in order to protect their families’ reputations. As public discussion slowly started to address the need to replace this moralistic response with more strategic and just measures for dealing with these girls, those needing protection from the stigmatized, unwed, pregnant body changed—from girls’ families to their peers. The irony here resides in the fact that the very discussions about unwed pregnancy that perpetuated this shift were discussions about the students’ own protections as individuals with rights and liberties just like others their age.

Pregnant students’ bodies functioned as a visual threat to the patriarchal normalcy of the high school classroom. Thus, these girls’ individual rights were overwritten by the rhetoricity of their pregnant bodies and legal discourses unable to rupture the association between unwed pregnancy and unwed, pregnant bodies. The danger of a female student’s pregnancy was, in the early 1970s, perpetuated by a “narrative script” that rendered her body a public symbol. As law and literature scholar Karla FC Holloway contends, such public narratives “very nearly dismiss
the private” (15). The visual symbolism of unwed pregnancy reduced young, unwed, mothers-to-be to distended bellies that could provoke the fears of contagion and collusion, as well as the need to intervene on behalf of the disabled, in/valid body. Thus, unwed, pregnant girls functioned as a highly visible, social identity based on difference. According to Holloway, women and African-Americans are typically always already visibly marked by their bodies, and so they are primarily seen as social categories, not as individuals above and apart from those categories. Thus, according to Holloway, when “objective” analysis is applied to the rights of such persons, “their very subjectivity disrupts their claims to an individual, liberal personhood” (Holloway 9).

In retrospect, it might seem as though allowing unwed mothers the right to remain in school is a basic protection and a common-sense extension of rights in a post-segregation educational climate. But when the practice of excluding such girls from school is placed within the context of the rhetorical history of unwed pregnancy, a sharper picture emerges. In the late 1960s and the early 1970s, when the Perry and Ordway cases were being decided, many young, unmarried, and pregnant women still felt the shame associated with the sexual double standard and pregnancy out-of-wedlock. As was discussed in the previous chapter, a public conversation about the “problem” of unwed pregnancy simply did not exist, in large part because unwed pregnancy was considered to be a sign of a woman’s individual, psychological defect instead of a symptom of a larger social issue. Families secreted unwed, pregnant daughters in an effort to make the problem go away—privately, anonymously, and forever. And, as I argued in the previous chapter, rhetorics of shame provided a framework for ensuring that the burden of unwed pregnancy remained non-public. In other words, the shaming cast upon unwed mothers, the feelings of shame the mothers experienced, and the fear of shame-by-association that
threatened families was the basis for “dealing” with unwed pregnancy in secret and in private; as such, unwed mothers internalized the burden of “their” transgression. By rendering this grave problem a private concern, unwed, pregnant bodies continued to be stigmatized, and unwed, pregnant women were distinguished as being less human than the “normals” against which they were identified and judged.\textsuperscript{43}

Such stigma was not washed away by a new, culturally sanctioned, sexual permissiveness. Instead, unwed, pregnant bodies in public elicited clearer expressions of lingering shame that was mapped onto women’s visibly different bodies. And even expressions of tolerance were influenced by this visual power.

Martha Nussbaum explains that attempts to codify otherwise moralistic, extralegal methods of group shaming are often inelegant and unjust, if not also ineffectual. Difficulties with such codification stem from the fact that “mechanisms of group self-protection” such as shaming and stigmatization are inherently incompatible with the expectations of law—namely, that it remains balanced and impartial (234). Although emotions frequently inform legal decisions even when they are not supposed to, the irrationality of shame presents a unique problem. Or, as Nussbaum explains succinctly, the “desire to stigmatize [cannot be] a rational basis for law” (271).

As part of a public dialogue, unwed pregnancy functioned less as a symbol of private, familial shame, and more as a complex problem that was rhetorically incompatible with the goals of education, while socially and morally incongruous with the notion of the American high school as a place of supposed normativity and obedience. Despite claims of a pervasive, new, sexual permissiveness, the custom of denying pregnant girls’ access to this school space

\textsuperscript{43} Such sociological othering and stigmatization emerges from a “deeply irrational fear of defect that is part of a more general shrinking from something troubling about human life, a search for an impossible type of hardness, safety, and self-sufficiency” (Nussbaum 234).
continued, unlawfully, demonstrating a continued social adherence to shaming and punishing girls (primarily, if not exclusively) for “their” sexual impropriety.

This punishment did not escape Audrey, even though she missed but little school as a result of her pregnancy.

I was actually a National Honor Society member because of my GPA. And you know they give you the gold cord that you are supposed to wear when you walk across the stage? Not only would they not let me wear the gold cord, they would not let me walk across the stage.

*Who told you about that? And what did they say?*

The principal of the school. And I had one teacher who was actually—[she] escaped from a concentration camp when she was a child. She went to bat for me like nobody’s business. They still refused. They still refused. I was really upset. Because I was a really good student. And I loved school. I loved school.
CHAPTER FOUR

The Pill, Roe v. Wade, and the Myth of Agency

In 2010, Patti Hawn (sister of actress Goldie Hawn) published *Good Girls Don’t*, a memoir recounting her experience as a teenager who became pregnant in the 1950s. Hawn recently commented on the reception of the book, particularly among other women who hid an unwed pregnancy in past decades:

> I have been seriously blown away by the sisterhood of young women who got pregnant before marriage, in the era prior to *Roe vs. Wade* – aka girls in trouble. I’ve seen first-hand how the shame of this early trauma has impacted women for lifetimes and how so many have lived in silence for years. (“Patti Hawn”)

Hawn shared this perspective on sisterhood as a guest blogger for Nancy Shields’s woman-centered social media website, makegirlfriends.com. Whether familiar with the stories of “girls in trouble” or not, Hawn’s readers likely would not question her assertion that the era of going away had come to a close by 1973, when the U.S. Supreme Court decriminalized abortion. After all, the two most prominent scholars who have written about histories of unwed pregnancy in the United States—Ann Fessler and Rickie Solinger—both also rely on the 1973 *Roe v Wade (Roe)* ruling to help explain the cultural shift away from the hiding, secrets, and shame of unwed pregnancy that was so common in the 1950s and 1960s. In fact, Fessler’s *The Girls Who Went Away: The Hidden History of Women Who Surrendered Children for Adoption in the Decades Before Roe v. Wade* and Solinger’s *Wake Up Little Susie: Single Pregnancy and Race before Roe v. Wade* feature the abortion ruling as the most prominent marker of when and why unwed pregnancy practices changed in the United States.44

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44 Solinger’s later book, *Beggars and Choosers: How the Politics of Choice Shapes Adoption, Abortion, and Welfare in the United States*, extends the scope of *Wake Up Little Susie* by examining how the idea of “choice” was linked to
The centrality of *Roe* to the narrative of “why things changed” is prevalent across depictions of these histories—whether the depictions are book-length research projects, personal memoirs, or brief overviews that sum up “going away” in a few, pithy phrases. As described in chapter one, most frequently, there are actually three reasons provided for the demise of maternity homes and, more generally, the cultural mandate that women hide an unwed pregnancy: (1) the development of the birth-control Pill, (2) women’s increased access to abortion after the *Roe* ruling, and (3) a new permissiveness, borne of the second-wave feminist movement and so-called sexual liberation of the late 1960s and early 1970s, which supposedly replaced the shame and stigma of unwed pregnancy with sexual license and acceptance.

The previous chapter argued that rhetorical shaming and stigmatization of the unwed, pregnant body continued past the 1960s, even when legislation was passed in an effort to make public institutions—like high schools—open and accessible to unwed, student mothers. This chapter examines the other two pervasive myths about the “end” of the “going away” era—that the development of the Pill and the *Roe* decision are viable explanations for why women supposedly no longer had to hide their unwed pregnancies.

This three-part explanation (the Pill, *Roe v. Wade*, and new sexual permissiveness) for why practices related to unwed pregnancy changed provides a useful narrative for changing attitudes about sex and pregnancy during the turbulent 1960s and 1970s. Specifically, this narrative renders the dark years of hiding unwed pregnancy comprehensible as an historical

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45 For example, one woman interviewed for this project sent me a link to a website that featured an overview of historical sites in her region. The house that had once been the Florence Crittenton Home that she lived in was featured on the site, along with information about how the house was originally owned by a wealthy family in the area, then went to the Florence Crittenton Association, and later became a fraternity house. In explaining the house’s history, the site purported that by the 1970s, the home was no longer needed to hide unwed mothers because of the *Roe v. Wade* ruling, the availability of oral contraception, and the diminished shame of unwed pregnancy in general.
practice that had a beginning, a middle, and an end. Boiling down significant socio-cultural changes to several distinct causal factors will always leave room for nuanced retellings of an historical story, and certainly, the development of oral contraceptive technologies and the *Roe* decision represent changes that reshaped women’s reproductive lives. But narration does not equate with truth telling; it involves, in the words of Kenneth Burke, a selection of reality, a reflection of reality, and therefore a deflection of reality (*Grammar* 59). Thus, what does the focus on the Pill and *Roe* reflect about recovery narratives of unwed pregnancy and what do these explanations continue to deflect?

Reliance on the development of the Pill as well as the *Roe* ruling in marking the “end” of an era of hiding and shaming unwed mothers suggests that with these two salient developments, women were granted an unparalleled level of agency over their bodies and reproductive decisions. And while this suggestion is partially true, such an agency-heavy explanation (1) reduces the complicated processes by which these developments occurred and (2) obscures women’s various experiences within a 1970s landscape that was, in many ways, still patriarchal and misogynistic.

Rhetorical depictions of the benefit of oral contraceptives suggest that the Pill afforded women a significant level of sexual agency quickly and easily by providing them a new level of autonomy over sexual encounters. This Pill-grants-autonomy narrative eclipses the struggles that women experienced in accessing oral contraceptives (particularly if they were not married) as well as their difficulty in learning about the Pill’s potential health threats. The availability of the Pill also was thought to greatly contribute to the rise of venereal disease during the era of free love. Thus, lauding the Pill’s potential to liberate women under-acknowledges women’s exposure to sexually transmitted diseases that were on the rise, as well as their exposure to new
discourses of shaming—fresh iterations of the time-honored trope of viewing women as carriers of venereal disease. And, significantly, the notion that the Pill was women’s ticket to increased sexual freedom omits how contraceptive technologies did little to help women critique and overcome rhetorics of shame that rendered them unfamiliar with their own bodies and guilty at the prospect of enjoying sex.

Similarly, applauding Roe as a watershed moment in relation to practices of shaming and hiding unwed mothers is both accurate and problematically uncomplicated. Because Roe has become largely synonymous with the idea of women’s “choice” over their reproductive lives, the rhetoric surrounding the ruling—particularly in relation to histories of unwed pregnancy—suggests that Roe greatly increased women’s reproductive self-determination and agency. For example, on January 22, 2011, Congressman Alcee L. Hastings, a democratic representative from Florida’s 23rd District, issued a statement recognizing the 38th anniversary of Roe. Noting that the decision “gave women an immutable voice on matters of their own health,” Hastings proclaimed that “[s]ince 1972, women in America have been able to determine their own reproductive lives” (“Hastings Recognizes”; emphasis added). Hastings’ statement illuminates a pervasive myth about Roe, namely that the decision’s legal protections grant women an agency that supersedes other factors that might constrain their reproductive self-determination.

Although Hastings’ statement is meant to praise Roe, it points to misperceptions about the ruling. Specifically, Hastings uphold the notion that in 1973, pregnancy and reproduction became a woman’s private matter, no longer significantly influenced by or beholden to public influence. By so emphatically equating the decriminalization of abortion with women’s agency,

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46 Roe v. Wade was decided in 1973.
47 It is important to note that Representative Hastings has notable legal experience, having been appointed by President Jimmy Carter as a Federal Judge in Florida and serving in that capacity for ten years. Hastings was the first African American Federal Judge in the state (“Biography”).
Roe rhetorically functions as a turning point—a point at which, in this case, unwed mothers shift from being controlled to exerting control over their situation—rather than a landmark moment within a complex, continuing network of reproductive concerns. Such a focus obscures the fact that abortion was historically considered to be acceptable, and thus not so much a matter of individual choice. Additionally, this narrative about Roe’s power rests on the decision of the Supreme Court, and thus renders the subsequent agency a gift, handed down by a group of male justices.

This chapter argues that changes related to unwed pregnancy during the volatile years of the early-to-mid 1970s are best understood by examining the interstices among technological developments, non-expert discourses relating to women’s sexual health and behavior, court rulings (codified, rationalized decisions made on behalf of the American people), and the unarticulated subtexts of these decisions. Assuming this holistic, contextual view of the time period demonstrates how narratives related to the Pill’s development and the Roe ruling overemphasize women’s autonomy and agency, depicting both as uncomplicated gifts given to women through scientific and legislative channels. The reality of this time of change for unwed mothers is not as simple as the emerging historiographies suggest. Complicating the narrative of agency granted through the Pill and Roe adds rhetorical nuance to current histories of unwed pregnancy, more fully accounts for the systems of patriarchy enacted through and alongside these developments, and makes women’s own rhetorical efforts at claiming agency (through the women’s health movement, for example) more central to these stories.

In what follows, I provide a brief overview of the Pill’s development and counter claims that the oral contraceptive heralded women’s sexual autonomy. Contextualizing the development and reception of the Pill is worthwhile in its own right, but also provides a helpful basis from
which to discuss abortion law, for in the recent history of reproductive rights, issues of oral contraception and issues of abortion function hand-in-hand. Thus, with an understanding of the Pill in place, I next examine three U.S. Supreme Court decisions in relation to one another: *Griswold v. Connecticut* (1965), *Eisenstadt v. Baird* (1972), and *Roe v. Wade* (1973). The U.S. Supreme Court’s decision on *Roe v. Wade* as a matter of privacy rights was based on these two earlier cases, both rulings about access to contraception. The interplay among these rulings, as well as the language of *Roe*, tells a significant rhetorical story about how women’s sexual agency outside of marriage remained a site of regulation and disfavor despite public understandings of these rulings that seem to suggest the opposite. Finally, to further enhance an historiographic understanding of women’s sexual agency as it developed in the 1970s, I examine alternate (i.e., non-legal and non-“scientific”) discourses—pieces of imaginative literature and writing from the women’s health movement—to demonstrate how helping women rethink sexual shame and educate themselves about their bodies was a slow, if valuable, process.

In sum, this critique of the myth of agency granted by the Pill and *Roe* suggests that without such historiographic interventions, the narratives explaining how mid-century architectures of silence began to capitulate to the power of patriarchal institutions. In so doing, the narratives continue to silence the nonhierarchical avenues by which women gained sexual agency. This chapter seeks to more fully position efforts to cultivate sexual and reproductive literacies—efforts largely taken up by women—within histories of unwed pregnancy.

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48 I will not examine *Doe v. Bolton*, the companion case to *Roe v. Wade*, also decided in 1973, because it relates to abortion rights in relation to a married couple.
The Pill: Freedom, Constraint, and the “Amazing Innovation”

Early support for the development of a birth-control pill came from activist and nurse Margaret Sanger as well as Katharine Dexter McCormick, a monied and well-educated woman who, like Sanger, was dedicated to pursuing effective and accessible methods for women to control their own fertility. The two women had met in the early part of the century, but it was not until 1950 that McCormick sought Sanger’s help in locating a researcher who she could sponsor to develop birth-control technology. McCormick’s willingness to fund such investigation cannot be overemphasized, for oral contraceptive research was considered inappropriate by the pharmaceutical industry and government-backed researchers (May, America 22). Gregory Pincus was just the type of researcher Sanger and McCormick were pursing, and after connecting with the benefactors, he collaborated with John Rock to develop a hormonal pill that would prevent the release of a fertilizable egg and subsequently prevent conception (Gibbs 43). Pincus and Rock conducted extensive clinical trials of the drug in Puerto Rico in 1956, thereby dodging U.S. laws prohibiting contraception use in order to test the Pill’s effectiveness (May, America 29). After this research proved successful, pharmaceutical company G.D. Searle began supplying Enovid in 1957. Enovid was the nation’s first contraception pill and was marketed as a treatment for menstrual disorders and infertility. Two years later Searle applied to the FDA for approval of the Pill as a form of contraception, which was granted in 1960. The FDA insisted that approval was based only on the safety of the Pill, not on the political or moral implications of its use (Gibbs 43; May America 32-3).

During the 1960s, the Pill became the hope for controlling population growth and lowering abortion rates (Gibbs 44). Use of the Pill was, however, varied among women and simply did not meet supporters’ high expectations for quick and sweeping change. The ideal of
women’s sexual purity (discussed in chapter two) discouraged many women from wanting to take an oral contraceptive because this would signal that they were preparing to—and thus, problematically, wanting to—have sex, an especially risky proposition outside of marriage. Catholics, particularly married couples, were eager to use the Pill as a form of birth control, because of the rationale that, as a hormonal method for extending the “safe” window for having sex according to the rhythm method, it fell outside the Catholic Church’s ban on contraception. But in 1968, Pope Paul issued an encyclical, *Humanae Vitae*, banning the use of any artificial birth control and leaving many Catholics using the Pill discouraged, if not disaffected (May, *America* 124-5). Further, married couples were not legally permitted to obtain contraception until 1965, and only after a Supreme Court ruling; it would be years later that legal protection would extend to unmarried women (more on these decisions in the next section). Additionally, the Pill (and the IUD, also available in 1960), posed so many health concerns that both were considered unsafe until 1970s. And if all of these complications were not enough, women had to get a prescription for the Pill from a doctor (like they would an IUD or a diaphragm), so asking for the medication was unthinkably shameful to many women who were not married (Fessler 43).

The Pill, despite the complications of access and safety described above, was used more widely in the 1970s than in the 1960s. But as women increasingly gained the ability to have better control of their own fertility, use of this technology also aligned with fears of rampant levels of venereal disease. Earlier, in the 1950s, venereal infections were thought to have lessened enough to be a minor public health threat, if one at all (Brandt 171). Sexually transmitted diseases were of ongoing concern for many years, often considered a scourge carried by American and foreign women, infecting military personnel on duty at alarming rates. But
research advances in penicillin provided a sense of false reassurance by mid-century that venereal diseases, especially syphilis and gonorrhea, were easily curable (Lord 71-92).

The end of sexually transmitted diseases, however, was not in sight, and rates of venereal disease were on the rise. Public health officials attributed a spike in venereal diseases to what they dubbed the “three p’s”: permissiveness, promiscuity, and the Pill (Parascandola 138). Even though this explanation suggested that rates of venereal disease rose because of the late-1960s sexual revolution, cases of disease actually tripled as early as 1957, an entire decade before San Francisco’s summer of love (Lord 116). By 1972, a National Commission on Venereal Disease claimed that rates of venereal disease had reached epidemic proportions (Parascandola 141). And by 1975, gonorrhea and syphilis were the first and third most prevalent communicable diseases in the U.S. (Brandt 175). These high rates of venereal disease demonstrated to the public that there was no magic solution after all, and the discovery of the incurable Herpes Simplex II in 1979 was touted as a “sexual leprosy” to be feared (Allyn 292). Historians speculate that the increasing spread of venereal disease is directly linked to waning government funds allocated for disease research, as well as to public health education efforts that were paralyzed by a conservative social climate that devalued sexual literacy. Nevertheless, there was a perception that women’s sexual freedom was the largest contributing factor of this rise (Lord 124-7).

Specifically, venereal diseases functioned (and continue to function) as proof of “revelatrice infidelity” or sexual looseness (Brandt 180). So, as the Pill became more available and allowed women and men to have sex increasingly “free” of the “hassle” of other birth control technologies (such as condoms), women became more exposed to these diseases and simultaneously became “responsible” for carrying the diseases in yet another iteration of a misogynistic trope.
Despite the Pill’s complicated history, it continues to elicit magic-bullet narratives of instant and sweeping change. For example, as part of a 2003 Public Broadcasting Service (PBS) production of the history of the Pill, a variety of men and women provided testimony of what this technological development meant to them in the 1960s and 1970s. According to interviewee Richard Hauskenecht, the Pill changed the relationship between men and women. It gave women a means of protecting themselves where they were not reliant upon a male, a condom, or a diaphragm that usually didn’t work very well. Here was a tool that permitted them sexual expression that simply hadn’t occurred ever before, except in very small communities of “bohemians”—that was the word that was used. Hauskenecht’s recollection emphasizes women’s agency, here “means,” granted by the Pill, suggesting that the technology afforded all women new levels of both protection and expression. Emphasizing the importance of women being able to take greater control of their own sexuality, like Hauskenecht does here, falls within a more general perception that sexual responsibility should be shouldered more by women than men. Thus, the Pill is lauded, in part, because women no longer have to rely on unreliable technologies (especially the diaphragm) or technologies (specifically, the condom) that require the compliance of a potentially unreliable (male) partner. What remains unspoken within but relevant to such depictions is that by supposedly providing women with greater sexual agency, the Pill (materially and ideationally) also indirectly enabled a patriarchal pattern—a tendency for society to further place the ultimate burden of sexual interactions on women, the sex with the capacity for childbearing.

PBS interviewee Anita Fream advances another common trope—that the Pill decoupled sexual behavior from the moral and physical baggage previously tied to it:
It meant you could make your own decisions and not have to constantly be thinking about is this going to change my life? It separated sex from all those dangerous aspects. This is something bad if you do it with anyone other than that future husband. It’ll ruin your life. It separated sex from all those things so that for the first time in my life I could think about sex just as what it was, just as sex and not as a potentially life-destroying event, that you could do something impulsively that would have consequences for years. The pill separated it from all that. It really was an amazing innovation.

The idea of Pill as an “amazing innovation” traffics in the belief of scientific accuracy and progress as well as technological expediency. Perceived as a lab-produced panacea (for unplanned pregnancy, for sexual inhibition, for women’s general lack of control over their reproductive lives), the Pill becomes the active ingredient needed for sexual equality. Such a rhetorical emphasis decontextualizes the many real complications of Pill access and use described above. Fream suggests that she and others developed greater perspective on the constraints of women’s sexuality after gaining access to the Pill:

I think a lot of us began to question the girls we’d written off, and whether maybe they didn’t know something that we didn’t know. And maybe they were having fun. The idea that sexuality might be something inside me, and not something that a man would choose to bless me with at some point, and that I might choose to act on that for myself. Not to please someone else, but for myself, to please myself. That was pretty new and it was great, I liked it.

Fream’s testimony here suggests that the Pill’s capacity for change was not merely medical, was not instantaneous. Instead, the idea of the Pill helped women begin to recognize their own,
nuanced sexuality and question the dichotomous and inflexible sexual identities (either “good” or “bad,” “virgin” or “whore”) to which they had been assigned.

To be sure, the development of the Pill as a form of contraception represents a formidable portion of women’s reproductive history. But the idea of women being able to assume more control over their own sexuality and sexual behavior was an equally powerful side effect, as illustrated in the views of Hauskenecht and Fream. Their perspectives epitomize a larger cultural narrative that equates the Pill with women’s instantaneous sexual agency. The larger historical account that I have provided above suggests that the Pill produced its own set of complications for sexually active women and was not really the cure—all it is remembered as. Popular understandings of the Pill, then, construct a potential that the technology could not and did not live up to, no matter how significant its creation was to women’s material realities and self-perceptions. The same narrative overextension can be observed, I suggest, in relation to the decriminalization of abortion.

**Roe and the Rise of the Trope of Agency**

Although the letter of the law made abortion illegal in the United States for over one hundred years, there was great tolerance for the not-so-secret practice of abortion for much of the twentieth century. Historically, the legality and illegality, the public acknowledgement of or surreptitious practice of abortion has had little to do with women’s agency or choice. Instead, abortion was quietly tolerated—unregulated though illegal—during periods of social rest but was less tolerated during times when groups of women explicitly sought political power or sexual freedom (e.g., during the first and second “waves” of feminist agitation).
For many years—from colonial times through the early nineteenth century—reproductive control was simply not a legal, much less public, concern. In fact, most Americans found abortion before quickening, or the first sign of fetal movement, acceptable and amoral. During the nineteenth century however, abortion became a medical issue, an area of purported expertise over which physicians—a group that was gaining professional status—could claim technical knowledge (Luker, *Abortion* 27-35). Medical oversight exerted pressure on unskilled practitioners, many of whom were women, to stop performing abortions and also functioned as a nativist response to the low birthrate among U.S.-born, white women (Allyn 260). Thus, as abortions increasingly became the province of medicine, doctors adopted the role of custodians who could determine when abortions were justifiable. Women, conversely, were increasingly considered insufficiently able to decide when an abortion was necessary and appropriate because they lacked medical knowledge and were thought to be able to make such a decision only on subjective (and, thus, incompetent) grounds (Luker, *Abortion* 44).

By the end of the nineteenth century, as women agitated for suffrage and America welcomed an unprecedented number of immigrants to its shores, nearly every U.S. state had declared abortion illegal except when needed to save a mother’s life, in which case the procedure had to be performed by a physician (Allyn 261; Caron 3). Although the medical profession continued to regulate abortion within its own ranks through much of the early twentieth century, by the 1940s and 1950s, doctors were being pressured to more closely follow the state laws defining legal abortions (Caron 8). At the same time, hospital abortion boards were established to regulate who could receive these “therapeutic abortions” (those performed, legally, by a physician), drastically reducing the number of women who were able to obtain an abortion through these means (Luker, *Abortion* 45-8; Solinger, *Abortion Wars* xi). During the first half of
the twentieth century, there was not significant, mobilized resistance to this stringent approach to granting abortions (Luker, Abortion 48). There were, however, an estimated 1.3 million illegal, often dangerous, abortions that took place at this time (Solinger, Abortion Wars xi). This repression of abortion left all women with little-to-no straightforward information about the procedure, many women with insufficient money or funds to access a “safe” abortion (i.e., legal and/or not life-threatening), and few women (those who could afford to travel abroad or find a willing abortionist closer to home) with only a hope that they were in qualified hands. Although there are examples of women being arrested for obtaining an illegal abortion, unauthorized providers were more likely to be apprehended. Stories of botched illegal abortions largely remained unspoken. In short, during these decades abortion became yet another instantiation of a circulating, shared silence.

This brief overview reminds that the criminalization of abortion was part of larger political, social, professional, and religious agendas—that women’s “choice” historically has been tethered to larger patterns of patriarchy and control. By examining two pieces of case law preceding the Roe decision and analyzing the Roe opinion and dicta, I counter the popular perception that the decriminalization of abortion in 1973 granted women instantaneous agency. Thus the idea of agency in relation to Roe—especially in the historical narratives related to unwed pregnancy during the twentieth century—rests on a rhetorical construction of this agency as essentialized and static—a potentiality that is “a possession or property of an agent” (Miller 147), a gift bestowed to women by U.S. Supreme Court justices. When so constructed, such

49 Kristin Luker explains that it is impossible to know the exact motives for women seeking illegal abortions. Perhaps they did so because they did not anticipate receiving help from a physician, because they requested an abortion and were rejected, or were simply fearful or ashamed of raising (or unwilling to raise) the topic in the first place (Abortion 52).

50 I have been unable to find information regarding women being arrested for obtaining or trying to obtain an abortion. Historian David Allyn, however, includes a picture a woman being arrested after having an abortion in Make Love Not War: The Sexual Revolution: An Unfettered History, but Allyn provides no detail on this or similar arrests.
agency suggests uncompromised control and choice on the part of the possessor (here, women) and obscures the fraught negotiations leading to and the contingent nature of such choice, or agency, in practical application. In other words, agency-as possession diminishes attention to agency as a negotiation within a larger rhetorical ecology. The following contextualization critiques this oversimplified agency narrative.

Griswold v. Connecticut: A Precedent for Preserving the Sanctity of Marriage

The first Supreme Court decision that linked access to birth control (that is, the ability to talk to a physician about birth control, much less get a prescription for it) with the right to privacy was Griswold v. Connecticut (Griswold), decided in 1965. Being questioned in this case was the constitutionality of Connecticut’s birth control law, which had remained on the books and unchanged since 1879. The law articulated a clear and unwavering stance against contraception, broadly defined, stating that “‘any person who uses any drug, medical article or instrument for the purpose of preventing conception’” would be subject to fine, imprisonment, or both. Presumably to ensure that the law was followed to the letter, Connecticut’s ban on the use of contraceptive devices also had a stipulation for accessories to the crime of trying to prevent a birth. Doctors and clinics providing birth control information to clients were also held culpable, for the law held that anyone aiding in matters of birth control could be prosecuted and punished in the same manner as a principal offender (qtd. in Vile 381).

This criminalization was an application of the so-called Comstock laws of 1873, Connecticut being the only state in the union to still enforce these codes (Hull and Hoffer 76). The law upheld the notion, cultivated by nineteenth-century anti-vice crusader Anthony Comstock, that sexuality must be rigidly managed because sexual desire fomented criminal
According to the logic implied by the law, prohibiting access to contraception was an effective way to manage others’ sexual behavior or, more specifically, to prevent women and men from having sex without the threat of pregnancy. Although there were ongoing attempts to repeal the ban in Connecticut—starting as early as the 1920s—each effort was met with insufficient support in the state senate. Opposition to repeal the law was especially strong within the Catholic community (representing a significant portion of the state’s population), which reasoned that more lax birth control laws would create a slippery slope of liberal demands that would eventually lead to the decriminalization of abortion (Hull and Hoffer 76-7).

The story of how a decision revising the Connecticut law worked its way to the U.S. Supreme Court in 1965 starts four years earlier. In November 1961, the Planned Parenthood League of Connecticut (PPLC) opened in New Haven for the purpose of providing “information, instruction and medical advice to married persons concerning various means of preventing conception.” The center also distributed birth control devices to clients, who were charged on a sliding-scale basis (Griswold 22). Estelle Griswold, executive director of PPLC, served as the center’s acting director, and C. Lee Buxton, a leading doctor in obstetrics and gynecology and a professor at Yale, was medical director (Griswold 29). The Planned Parenthood center closed just ten short days after it opened, a citizen having filed a complaint with the police that the

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51 Fundamentalist and crusader Anthony Comstock spearheaded efforts to get Congress to pass an act that would ban the transportation of matter related to contraception and abortion through interstate commerce (i.e., the postal service). The Comstock Act became law in 1873; Comstock also played a major role in the passage of state-level “Comstockery” laws across the nation.

52 Pressure from Catholic interests to keep the anti-contraception laws in place was significant. For example, an advertisement appeared in the Hartford newspaper that was signed by supporters who were calling for a repeal of the contraception ban. Doctors practicing in Catholic hospitals who had signed the ad were terminated by these hospitals under direct order of the diocese (Hull and Hoffer77).

53 Ostensibly, these would have been condoms and diaphragms, although this detail is not included in scholarship on the Griswold case.
center was breaking the law (Posner 206). Griswold and Buxton, both found guilty of violating the state statute, appealed to the Supreme Court of Errors of Connecticut. Connecticut upheld their conviction, sending the case on to the U.S. Supreme Court, which decided in 1965 that the “law forbidding the use of contraceptive devices deprives married women in Connecticut of their liberty and their privacy, as protected by the Fourth, Fourteenth, and Ninth Amendments to the Constitution of the United States” (Griswold 13).

The Griswold decision serves as a critical precursor to the cascade of later rulings that functionally legislate the realm of women’s reproductive rights. But the Court’s insistence that an exception to the contraception ban could only be made for married couples illustrates the extent to which the ruling’s justification relied on marriage as the only sanctioned context for sex. In his opinion, Justice Douglas rationalizes the Court’s decision by invoking the sacredness of marriage and thus lifting the decision above the kairos of a mid-1960s sexual revolution and tapping in to the logos of what he depicts as a timeless and fundamentally human institution:

We deal with a right of privacy older than the Bill of Rights—older than our political parties, older than our school system. Marriage is a coming together for better or for worse, hopefully enduring, and intimate to the degree of being sacred. It is an association that promotes a way of life, not causes; a harmony in living, not political faiths; a bilateral loyalty, not commercial or social projects.

54 Posner argues that technically, the Connecticut statute could not prohibit the use of condoms or diaphragms because these devices could be used to prevent disease transmission. (I comment further on this loophole with Eisenstadt v. Baird later in this chapter.) But operating a birth control clinic, as Griswold and Buxton did for ten days in 1961, was considered a violation of the law because the purpose of such a clinic, by definition, was distributing information and materials for birth control (Sex and Reason 205).

55 A host of rulings followed the Roe v. Wade decision but fall outside of the realm of this project. With the exception of the Hyde Amendment (discussed in chapter 5), much of the government’s response to issues of reproduction takes the form of case law. Although the resulting decisions do not represent pieces of legislation, I use the term “functionally legislate” to describe the power of the judicial branch of government to significantly shape women’s rights to access contraception and abortion.
Yet it is an association for as noble a purpose as any involved in our prior decisions. (Griswold)

By advancing the notion of marriage as intimacy, Douglas desexualizes the issue at hand as well as the Court’s response. More importantly, though, a ruling on the right of privacy afforded by marriage emphasizes how, in Burkean terms, the decision acknowledges marriage as scene—and a highly valued scene, at that—rather than individuals as agents. The appeal to the U.S. Supreme Court amplifies this attention to scene, claiming that a ruling that forbids a married couple to use contraception represents the state having “entered the innermost sanctum of the home.” Further, the married couple’s right to privacy should be protected because this “home derives its pre-eminence as the seat of family life” and “the integrity of that life is something so fundamental” that it has already served as the basis for protecting a variety of other constitutional rights (Griswold 14). In short, instead of recognizing that contraception is a concern related to human sexuality and women’s bodies and lives, the opinion obfuscates the material realities of sex as a human action with specific, lived consequences. Instead, the ruling venerates marriage in its abstractions—a covenant of loyalty, harmony, and endurance.

The ruling also reinforces the perceived immorality of sex outside of marriage. In his concurrence, Justice Goldberg applauds the decision’s moderation, asserting that it is a “more discriminately tailored statute” than the earlier ban. The overturned law compromised married couples’ privacy because it had reached “far beyond the evil sought to be dealt with”—namely, sex outside of marriage (Griswold). As the Justices make abundantly clear, extramarital sex (the true target of Comstockery) was still a viable public enemy. Thus, Griswold, while making birth control legal for some Connecticut residents, functions to endorse marriage rather than sexual
knowledge. Here “marriage,” as an organizing frame that authorizes the privacy ruling, functions as an enthymeme that invokes a shared valuation of this sacrosanct institution.

Eisenstadt v. Baird: A “Mere” Extension of Griswold

It would be seven more years—with 1972’s Eisenstadt ruling—before a U.S. Supreme Court ruling deemed individuals, rather than the non-human unit of marriage, able to inform themselves about contraception and lawfully practice birth control. The event that would initiate this change was a public talk about birth control options given to college-age students—a rhetorical performance that would be classified as a crime against chastity, morality, decency, and good order. Just two years after the Griswold ruling, Long Island medical student and activist Bill Baird was invited, at the request of students, to Boston University to give a talk on birth control (Kovach). Baird’s one-hour talk outlined types of contraception and provided an overview of the merits of contraception, including world-wide overpopulation crises, unsound abortionists, and “the large number of abortions performed on unwed mothers” (Eisenstadt). Baird was arrested and convicted on two counts: (1) he exhibited contraceptives (in their original packaging) at the lecture and (2) after inviting the audience to help themselves to these non-prescription, over-the-counter materials, he handed a tube of Emko vaginal foam to one woman (Eisenstadt; Lucas 29). The distribution of the samples was in direct violation of an 1879 Massachusetts birth control ban, which deemed that contraception was exclusively available to married couples and could only be obtained with a physician’s consent.56 Baird’s case found its way to the U.S. Supreme Court five years later (Hull and Hoffer 105-6; McBride 138).

56 According to legal scholar Roy Lucas, the original law made no exception for marriage or health concerns and barred contraception to all potential recipients (10). A later state statute filed under “crimes against chastity, morality, decency and good order” provides the married persons stipulation (Eisenstadt).
Even though Baird’s appeal asserted that the Massachusetts statute violated the Equal Protection Clause of the Fourteenth Amendment by treating married and unmarried persons dissimilarly, the Court’s ruling relied on privacy, following the precedent of *Griswold* (Eisenstadt). Justice Brennan, who authored the opinion, notes that a married couple is not an entity “with a mind and heart of its own,” but rather an association of two autonomous individuals. He further explicates that “[i]f the right of privacy means anything, it is the right of the individual, married or single, to be free from unwarranted governmental intrusion into matters so fundamentally affecting a person as the decision whether to bear or beget a child.” (Eisenstadt) The privacy statement was not critiqued by any other sitting Justices and has since been applied to hundreds of federal and state court decisions (Lucas 43). Although archival records indicate that Justice Brennan agreed to write a short *per curiam* (decision of the Court) instead of a full opinion, not only did Brennan produce a lengthy opinion, he also circulated it on the morning of the *Roe v. Wade* oral arguments, possibly hoping to influence the outcome of that case (Lucas 13-4). Although mentioned primarily as an extension of *Griswold*’s declaration of privacy, *Eisenstadt v. Baird* (Eisenstadt) is significant in its own right, particularly in relation to shifting practices and ideologies about unwed pregnancy in the United States.

*Eisenstadt* is commonly referenced by legal scholars for its significance in relation to privacy doctrine, specifically for extending the *Griswold* privacy ruling to individuals and thus providing a precedent for *Roe v. Wade*. This focus, however, overlooks how *Eisenstadt* rests on the U.S. Supreme Court’s inability to uphold Massachusetts’ contraception legislation precisely because the legislation was *presumably*, but not explicitly, based on notions of “appropriate” contraceptive use. Specifically, the decision represents a critical rhetorical moment in the history

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57 According to Lucas, the plan to write a *per curiam* was part of a loose agreement made amongst the Justices. Justice Burger, who did not favor Baird, was not eager to assign important opinions to “Warren Court ‘liberals’” like Justice Brennan (13).
of unwed pregnancy in the United States, for it stemmed from Baird’s rhetorical display—a staged, rhetorical performance that eventually forced the Supreme Court to pinpoint the purpose of a law steeped in an unspecified moralism. Far from just tailoring the extant privacy ruling by a degree, Eisenstadt forced the court to parse a law that seemed to covertly regulate sex outside of marriage by denying access to birth control to unmarried individuals. According to one legal scholar, without Eisenstadt, “marriage rather than reproductive self-determination would animate the contemporary view of fundamental rights of privacy and personhood” (Chen 502-3).

Brennan’s opinion does not address, much less belabor, how the ruling undermines conservative notions of sexual purity through marriage; nevertheless Eisenstadt represents a departure from tradition, especially because it overpowered a 1970 state ruling that explicitly linked the statute’s regulation of birth control access to marital status by labeling the law a crime against chastity. The label “crime against chastity” reaffirmed and revived the spirit of the law, even though the letter of the law proved difficult for the high court to understand. One challenge of ruling on the case was the justices’ inability to determine the statute’s clear and “rational” legislative purpose. Technically, the statute could not be thought to regulate sex outside of marriage because it stipulated that contraceptive devices could be distributed to anyone in order to prevent a disease (Eisenstadt). Neither could the statute be understood as primarily a method to regulate physicians’ distribution practices, for it applied specifically to contraception but not to other controlled substances. Ultimately, Justice Brennan decided to base his opinion on the understanding that the prohibition was on contraception per se, itself a rather murky explanation (Eisenstadt).

This confusion demonstrates how the original intent of the law—most likely an attempt to regulate sex outside of marriage—remained covert. However, in its 1970 decision, the
Massachusetts Supreme Judicial Court articulated that the most compelling reason to uphold the statute was to regulate the private sexual lives of unmarried individuals, thus protecting the moral standard of sexual purity within marriage by discouraging extramarital sex (Eisenstadt). Thus, although the U.S. Supreme Court ruling was based on privacy, it essentially acknowledged, in codified manner, that unwed sexuality and the potential of unwed pregnancy was a reality. Such a fundamental level of acceptance, just several years after the apex of a socially mandated invisibility for most white unwed mothers, is notable in its own right.

One U.S. Supreme Court ruling, of course, does not signify broad, sweeping, and instant change, and other considerations related to the case help to give flesh to this relatively understudied historical moment, signaling that even in Boston in 1972, antipathy toward unsanctioned sexual knowledge could and did result in an exercise of great power. Baird’s presentation was an event coordinated to result in his arrest and call attention to the constraining Massachusetts statute. Details of the event illustrate police officials’ vehemence in responding to Baird, despite the eventual confusion over how to properly classify the crime that was committed. According to Bill Baird’s memory of the Boston University lecture more than twenty years later, approximately 2,000 people attended the event and he was met with “police cars lined up in a row” upon arriving at the lecture hall (Bower). Further, the (scant) discussion of the actions of the so-called unwed woman who received the tube of contraceptive foam implies that officials were poised to make an arrest at the first available moment. It seems that Baird was arrested as soon as the woman touched the tube of foam, for there exists no indication that she took any further action or gave any proof of intending to keep much less use it (Eisenstadt).

59 As I noted above, Eisenstadt v. Baird remains understudied outside of legal scholarship. Even within legal studies, reference to Eisenstadt is typically fleeting and added in service to discussions about Roe. The singular exception to this tendency that I have been able to locate is Roy Lucas’s 2003 article-length examination of Eisenstadt.
None of the seven police officers and detectives present bothered to identify the marital/non-marital status of this woman (Lucas 29). Nevertheless, this oversight ultimately did not stymie Baird’s conviction because he was, as a non-physician, an unlawful distributor of contraceptives in the state of Massachusetts (Eisenstadt). Baird had purchased the foam before the lecture from “a little 18 year old sales clerk, not a pharmacist” at a Boston department store (Bower).

Although Baird made a purchase that the “unmarried” woman ostensibly could have made herself, he faced a sentence of up to five years in jail for having violating the state’s “crime against chastity” code. Instead, Baird served 36 days in the Suffolk County Jail (Bower).

By the time Baird’s case reached the U.S. Supreme Court, the Justices needed to determine what Baird’s crime actually was. Baird’s First Amendment rights would have allowed him to give the lecture, so it seems that the tube of vaginal foam did indeed contribute to his arrest. But the Justices still wrangled over the imprecision of the crime—particularly considering that the woman’s marital status was not known and that there was no way to prove that she was actually going to keep the foam—much less use it. Thus, Baird’s arrest functions as a display of the arbitrary, conflicting, and imprecise legacy of sexual morality legislation in Massachusetts. It also demonstrates how so-called crimes against chastity were considered legitimate enough in the early 1970s to be reaffirmed as such and their violators actively policed and apprehended. Nevertheless, these illogical laws could not withstand the scrutiny of the U.S. Supreme Court, and subsequently the high court’s ruling provided a precedent upon which the *Roe v. Wade* decision would soon be based.
Roe v. Wade: Agency Circumscribed and Conferred

The January 1973 U.S. Supreme Court ruling on Roe has become so central to discourses related to reproductive rights and feminist ideologies that it takes some effort to recall the historical context from which the decision emerged. And perhaps even more challenging is remembering that Roe did not respond to an extremely polarized debate over abortion in America but rather precipitated many of the most extreme positions related to the controversial issue. As the Eisenstadt decision would suggest, the decriminalization of abortion was likely by early 1973, for a precedent had been established for women’s right to privacy over issues related to the potential termination of pregnancy. But in 1970, neophyte attorneys Sarah Weddington and Linda Coffee could not sense what the outcome would be for the class-action suit filed by “Jane Roe” on behalf of all U.S. women. Roe was the pseudonym given to Norma McCorvey, an unwed, pregnant woman who sought an abortion in Texas, a state that prohibited the procedure in all cases except those that might save a pregnant woman’s life. McCorvey did not have the means to travel in order to secure a safe abortion and could not locate an illegal abortionist. Weddington and Coffee, young attorneys eager to challenge Texas’s abortion law, identified McCorvey as their ideal plaintiff. The suit was filed under the complaint that the individual rights of Roe, like most women in Texas, were violated because she could not lawfully obtain a safe abortion at the hands of a recognized medical professional (Hull and Hoffer 115). The Texas court ruled in Roe’s favor, but an appeal in December 1971 sent the case to the U.S. Supreme Court. McCorvey, in the meantime, gave birth and surrendered her child for adoption.

The Roe ruling, stated in Justice Blackmun’s opinion, confirmed that a woman’s right to privacy encompasses her decision to terminate a pregnancy, thus striking down numerous state abortion prohibitions, and establishing a trimester framework by which states could have
increasing power over abortion regulations at later stages of a pregnancy. Although there was a growing national majority that was favoring the decriminalization of abortion, such positions had not yet taken the form of specific state laws (Balkin 11). Thus, although access to abortions would continue to be a vital issue for many women for years to come, the *Roe* ruling represented a victory for many who favored a legal route to safe abortions.

Revisiting the 1973 decision is important in understanding how such a reproductive victory for many perpetuated agential loss and continued silencing for the very women whose rights it was meant to guard—women who, according to popular discourse about *Roe*, were granted significant agency by the ruling. The dialogue (or vitriol) that has stemmed from *Roe*-as-exigence perpetuates several flawed assumptions that an examination of the original Court ruling and dicta calls into question. First, although a trope of “choice” permeates varied discussions related to the *Roe* decision, the notion of a pregnant woman’s autonomous, decision-making power is not supported by the rhetoric of the Court-issued documents. It is true that in his opinion, Justice Blackmun notes that the right of privacy is “broad enough to encompass a woman’s decision whether or not to terminate her pregnancy,” adding that the “detriment that the State would impose upon the pregnant woman by denying this choice altogether is apparent” (*Roe*). But as rhetorical scholar Katie L. Gibson notes, the overall tone of the opinion cedes ultimate power to decide on whether to abort to the medical establishment rather than to pregnant women themselves (316). Blackmun writes that

The decision vindicates the right of the physician to administer medical treatment according to *his* professional judgment up to the points where important state interest provide compelling justifications for intervention. Up to those points, the
abortion decision in all its aspects is inherently, and primarily, a medical decision, and basic responsibility for it must rest with the physician. (Roe; emphasis added)

It is not necessarily surprising that the opinion would address physicians (here, invoked as male), because, as noted above, in many states the medical profession had recently been forced to follow more strict regulations dictating in what situations an abortion could be legal (Greenhouse 99). Nevertheless, Blackmun’s opinion functionally erased women from the abortion decision and ceded the ultimate power of “choice” to male doctors. Not only does his wording severely curtail women’s agency in relation to abortion, it also suggests that one rhetorical (and thus extralegal) purpose of the document might have been to reinforce the power differentials between (male) doctor and (female) patient at the very moment women were given “choice.”

Gibson argues that by constituting women as patients (and, by extension, pregnancy as an illness), the opinion situated pregnancy and abortion as primarily medical occurrences, functionally silencing the complicated and varied reasons that women consider abortion in the first place. Additionally, the opinion’s heavy medical narrative and deference to the medical establishment perpetuates a paternalistic relationship between doctor and patient that “effectively disqualifie[s] the agent status of women, ruling their lives and their gendered meanings impotent in the abortion debate” (Gibson 323, 327). The relative inattention that the opinion gives to woman’s choice is surprising, considering how “choice” has functioned as one of the most central terms related to the ongoing cultural debate over abortion. And if one agrees with Clarke Rountree’s assertion that the judicial opinion’s “chief rhetorical work” is to “embody and

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60 And it bears remembering that even though many physicians were increasingly uncomfortable with interpreting vague state laws in order to make decisions about what constituted a “therapeutic,” or legally sanctioned, abortion, the medical establishment had long ago vied for power to determine if and in what circumstances women could abort.
characterize [the Court’s] actions,” then the contribution this document makes in helping to understand the Court’s motives cannot and should not be underestimated (*Judging* 3–4).

*Roe* upholds a woman’s privacy from governmental intrusion into her reproductive decision-making process but forecloses her agency by insistencing that she yield to her (male) doctor’s wishes. A woman’s potential agency via *Roe* is further vexed by the malleable term “unwanted child,” which appears in the ruling and dicta. Justice Blackmun concludes that the right to privacy “is broad enough to encompass a woman’s decision whether or not to terminate her pregnancy,” and goes on to outline several scenarios exemplifying why a woman is better suited than the state to make such a decision about pregnancy. One such example, Blackmun writes, involves

> the distress, for all concerned, associated with the unwanted child, and [...] the problem of bringing a child into a family already unable, psychologically and otherwise, to care for it . . [a factor] the woman and her responsible physician necessarily will consider in consultation. (*Roe*)

Blackmun situates the idea of the unwanted child within the context of the family, thus suggesting that a lack of “want” extends beyond the mother alone and is contingent on factors, psychological “and otherwise,” that might make having (and raising) a child difficult. But by invoking the “responsible physician” from whom the mother can seek counsel, Blackmun’s assertion raises the question *for whom is the pregnancy unwanted?* Although considering whether to have an abortion seems like an individual decision, the mention of responsibility (a trope that will be amplified in later discussions of teen pregnancy, which I examine in chapter five) suggests more far-reaching implications. Namely, responsibility here implies one’s responsibility to raising a healthy and productive child that will contribute to, not depend upon,
the state. Likely, the “responsible physician” would help a mother identify herself as being part of a family “unable” to “care” for the so-called unwanted child—a potential continuation of practices, described in chapter two, whereby authorities convince women of their incapability to mother.

“Unwanted child” means something entirely different, however, for Justice Byron White, who pens a scathing dissent to the *Roe* ruling. White laments that

> [a]t the heart of the controversy in these cases are those recurring pregnancies that pose no danger whatsoever to the life or health of the mother but are, nevertheless, unwanted for any one or more of a variety of reasons—convenience, family planning, economics, dislike of children, the embarrassment of illegitimacy, etc. The common claim before us is that, for any one of such reasons, or for no reason at all, and without asserting or claiming any threat to life or health, any woman is entitled to an abortion at her request if she is able to find a medical advisor willing to undertake the procedure. (*Roe*)

Justice White adds that the Court’s decision suggests that the Constitution “values the convenience, whim, or caprice of the putative mother more than the life or potential life of the fetus” (*Roe*). For White, fickle women are the mothers of “unwanted” children, and the whims of such mothers devalue life, sometimes “for no reason at all.” Women’s agency, then, is a primary problem, an unearned and unwarranted affordance that is intensified by the ruling. Clearly, for White, a woman’s “life or health” represents the only potential justifications for considering decriminalizing abortion; other reasons are gratuitous and point to a woman’s inability to appropriately bear the responsibility of her reproductive capacity.
This mention of the “unwanted child,” then, draws attention to want, or desire, as a key component of an abortion decision, even as its various usages complicate an understanding of who does not (or does) want a child and why. But it is important to understand that the term “unwanted child,” along with a similar term, “unwanted pregnancy,” had previously figured in reproductive discourses. Specifically, the notion of the unwanted child is one that early birth control advocate Margaret Sanger relied upon to differentiate between rich, healthy children (wanted) and poor, malnourished children (unwanted) (“Brief for Appellant”). Thus, in Sanger’s usage, the notion of unwanted children shifts the agent-scene ratio toward the scenic “problem” that results from women having no access to birth control. Similarly, “unwanted pregnancy” was one euphemism for out-of-wedlock pregnancy at mid-century, a trope that surely reflected attitudes (of social workers, parents, etc.) that unwed mothers should not want to raise an “illegitimate” child. But by the 1960s, the U.S. government began using the term in a wider public health context, invoking it in discussions of disease transmission, overpopulation, and President Lyndon Johnson’s War on Poverty (Lord 122-3). This broader social landscape in which to consider why children might be “unwanted” aligns with an assertion by Celeste Michelle Condit: that women’s depiction of abortion rights in popular writing during the years before Roe also shifted from discourses of individual preferences (I want to obtain an abortion) to the threat of a plethora of undesirable, “unwanted children” leading to social imbalance. With the shift, protections guarding against the birth of unwanted children functioned as a social good, not a means for realizing personal desires (186-7). Thus, while Roe’s reference to the “unwanted child”—a reference made in a ruling about reproductive decision-making—calls to mind a woman’s desires (i.e., her agency), the term actually taps into a more vexed history of displaced agency.
If the *Roe* ruling intersected with women’s agency (in practice and in theory) in such complex, even evasive ways, then why do widely held notions of the decriminalization of abortion so frequently collapse into suggestions of women gaining agency in 1973? The answer to this question is, of course, too complex to answer succinctly. But several explanations come to mind, particularly in relation to histories of unwed pregnancy. First, and most generally, *Roe* was decided on behalf of all women, with no exceptions made on the basis of age, race, economic status, education level, etc. (Solinger, *Beggars*, 4). When the ruling is viewed as an equitable validation of female worth, it is more readily understood as an expression of female agency even though it actually functions as a decision about women’s privacy rights—rights that are protected but that are still circumscribed by male authority and power (because of the ruling’s explicit statement of final decision-making power resting with the male physician). Further, Solinger explains that the use of the word choice by abortion-rights advocates after the ruling, a strategic and political decision, added to the notion that *Roe* was intimately linked to women’s agency:

> In a country weary of rights claims, choice became *the* way liberal and mainstream feminists could talk about abortion without mentioning the ‘A-word.’

> Many people believed that ‘choice’—a term that evoked women shoppers selecting among options in the marketplace—would be an easier sell; it offered ‘rights lite,’ a package less threatening or disturbing than unadulterated rights.

(*Beggars* 5)

These observations suggest agency was strongly affiliated with *Roe* in popular imagination, but actually constrained by a pervasive, patriarchal culture that instead feared women’s autonomy and power over their reproductive lives. In the words of Karlyn Kohrs Campbell, such agency is, in reality, “perverse, that is, inherently protean, ambiguous, and open to reversal” (“Agency” 3).
The depiction of *Roe*’s agential capacity within narratives of unwed pregnancy (and more broadly, I would argue) also relies on the mythic power of the Supreme Court, its robed justices sitting on high, making decisions that influence the lives of all Americans. Just as trust was placed in the Pill as a scientific and medical innovation, I suggest, some of the perceived agency “granted” by *Roe* is enveloped in the rhetoricity of the Supreme Court. In general, Americans are persuaded by “the mythology that we live under the rule of law” and hold a “romantic reliance on an impartial judiciary” (Rountree, *Judging* 39). But the mythos of the Supreme Court is even more pronounced, and it seems not inconsequential to the prevalence of the *Roe*-as-agency idea that a group of the most powerful men in the nation determined the ruling. There is a great disparity between the architectures of silence (described in chapter two) that resulted in women surrendering their children for adoption during the going away years and the official, national decriminalization of abortion, which opened avenues of choice for women who faced an unplanned pregnancy. But by overemphasizing *Roe*’s significance to the era of forced hiding, this narrative capitulates to the idea that women’s agency comes at the behest of men, and men with exceeding authority.

**Paths to Sexual Autonomy: Literacies of Sexual Health and Wellbeing**

If the development of the Pill and the *Roe* ruling cannot solely account for women gaining agency over their sexuality and reproductive lives, then what more can be added to this historiography to account for the changes women did experience during and after the 1970s? One way to answer this question is to examine the provocative and subversive writing done by authors of this era who reconceptualized how women might understand and enjoy their sexual

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61 Of course, *Roe* did not grant abortion access to a great number of women who were constrained (willingly or not) by religious belief, poverty, geographic location (in relation to abortion providers), etc. And later legislation like the Hyde Amendment, discussed in chapter five, significantly limited poor women’s ability to obtain abortions.
bodies. Collectively, these authors’ work extended women’s sexual and body-centered literacies, thus establishing ways for women to empower themselves. This ground-up, collaborative, and woman-centered agency building is, I suggest, equally important to the technological and legal changes described above.

As I mentioned in chapter two, Helen Gurley Brown’s publication of *Sex and the Single Girl* in 1962 gave voice to two otherwise unspoken ideas: that women could (and did) enjoy sex and that they could do so outside of the bonds of marriage. Brown’s book was both controversial and cosmopolitan. Much of the nation simply was not ready for such frank discussions of women’s sexual fulfillment—even by the late 1960s, when the “free love” ideology began to burgeon in coastal cities like San Francisco and New York. But by the early 1970s, other writers and activists were further encouraging various forms of sexual and body literacies. These various publications punctured silences that long-enveloped women’s sexuality and sexual health, replacing epistemologies of ignorance (sites of unconscious unknowing) with new vocabularies and ideas. From imaginative literature to non-fiction publications meant to arm women with specific knowledge, this group of texts enabled women to become more literate about their sexual bodies and sexual selves, thus suggesting, provocatively, that such literacy was healthy and natural rather than deviant and shameful. Such texts also modeled women speaking up and out on behalf of their own sexual wellbeing and choice.

Part of the developing counterculture of the early 1970s was the women’s liberation movement, which found its roots in the organization of small groups of women throughout major cities across the nation in 1967 (Echols 3; Kline 14). For some feminists, the goal of liberation necessitated rethinking the relationship that women—and men—had with women’s bodies and women’s sexuality. At a time when complicity to authority was being interrogated on many
fronts, some women critiqued social taboos related to sexuality and sexual bodies. In 1968, for instance, the New York Radical Women published *Notes from the First Year*, edited by Shulamith Firestone (Echols 60-1). This text included a dialogue of women “rapping,” openly and honestly about sex, as well as Anne Koedt’s groundbreaking “The Myth of the Vaginal Orgasm.” Such pieces spoke out against the notion that women’s sexual performance should primarily please men and fueled radical feminists’ growing contention that sex was overly influenced by phallic-centered, Freudian theory (Freedman 263).

Two texts, both published in 1973, put the contentious idea that women did (or should) enjoy sex (and talk about enjoying it) into even wider circulation. Erica Jong’s novel, *Fear of Flying*, follows a female protagonist who has a brief affair and gains strength and sexual satisfaction through the experience. Jong’s text praises the value of anonymous sexual encounters and proposes that women can enjoy and benefit from developing their sexuality outside the realm of marriage. Similarly, *My Secret Garden*, Nancy Friday’s collection of real women’s sexual fantasies, was an attempt to demonstrate the ubiquity and naturalness of women’s sexual thought (Allyn 267-9). Alex Comfort’s 1972 *The Joy of Sex*, although not a feminist project, represented a coffee-table type sex manual with “lurid drawings” that casually, if explicitly, depicted heterosexual sex (Neuhaus 111; Allyn 229-30). America’s conservative bedrooms were increasingly sites of sexual experimentation and candid desire, as books such as Jong’s, Friday’s, and Comfort’s introduced new lexicons of sexual self-expression.

One text, however, stands alone in ushering in an entirely new way in which women might familiarize themselves with their own sexual needs and desires as well as their reproductive bodies. *Our Bodies, Ourselves* represents the efforts of a group of feminist health advocates who, starting in 1970, has continued to collaboratively write and publish a manual
women can use to learn about their bodies. In so doing, the authors helped to make women’s knowledge of their sexual, reproducing bodies a legitimate goal. Such education and advocacy demonstrates how women’s writing activities began to overturn long-held epistemologies of ignorance related to sexuality and reproduction. This writing also articulates counter-narratives meant to reject and revise cultural logics that expected women to remain unfamiliar with and ashamed of their own bodies.

What would eventually become *Our Bodies, Ourselves* began to take shape relatively early in the women’s liberation movement. In the spring of 1969, one of the first women’s liberation conferences was held in Boston at Emmanuel College. One of the offered workshops, “Women and Their Bodies,” brought together twelve participants who bonded over their feelings of being dismissed—not listened to or heard—by doctors. Although the group pledged to continue to meet to develop a list of respectful, informative, local ob-gyns, they soon revised this goal, both because they could not identify any such physicians and because they realized that a larger project would be more beneficial (Kline 14-5). The group continued to meet, invited others to attend get-togethers, and began to do research that they would write up and mimeograph for meetings. Instead of teaching this information, meeting participants would use the researched topics as starters for consciousness-raising sessions where they would talk about topics ranging from menstrual cramps and menopause to orgasm and childbirth (Davis 21-2). Eventually the group named themselves the Boston Women’s Health Course Collective and decided to publish the research and personal narratives that they had been sharing with one another. The first, 193-page, 75-cent version of the publication was typewritten and mimeographed, featuring hand-drawn images and thread for binding (Maranto). In December 1970, the collective published 5,000 copies of the text, now *Women and Their Bodies,* with a
local, alternative press. Alternating a collective authorial voice with excerpts of personal narrative and numerous pictures and diagrams, the text encouraged identification and exploration. After ten printings, the group decided to revise, expand, and publish the book as *Our Bodies, Ourselves* with Simon & Schuster in 1973 (Kline 15-17). Now writing as the Boston Women’s Health Book Collective, the group was available to attract a much wider market of women, significantly building upon its local success. The book has been published continually since that date, has been translated into at least 29 languages, has given rise to a host of companion texts, and has sold over four million copies (Wells 1-2).

If books like *Fear of Flying* and *The Joy of Sex* suggested that, by the early 1970s, the sexual revolution could and should be embraced by anyone, *Our Bodies, Ourselves* reassured its early readers that overcoming sexual ignorance and shame was a slow, complicated process. The authors of the 1973 edition offer that the sexual revolution “has made us feel that we must be able to have sex with impunity, without anxiety, under any conditions and with anyone, or we’re uptight freaks,” reasoning that such “alienating, inhuman expectations are no less destructive or degrading than the Victorian puritanism we all so proudly rejected” (Boston Women’s Health Book Collective 23). *Our Bodies, Ourselves*, as an alternative to other texts of the era, takes the time and care to articulate the feelings of shame that frequently are yoked with sex. Addressing a paradox of the day, the authors explain:

> We are simultaneously bombarded with two conflicting messages: one from our parents, churches and schools—that sex is dirty and therefore we must keep ourselves pure for the one love of our lives; and the other from *Playboy*, *Newsweek*, etc., almost all women’s magazines, and especially television
commercials—that we should be free, groovy chicks. (Boston Women’s Health Book Collective 24)

The results of these conflicting messages is made explicit in the text, for the authors assert that when men become “sexually aggressive,” women “must worry about how to set limits on the sexual encounter” and brace themselves against “this powerful sexuality” (Boston Women’s Health Book Collective 26). More than an early critique of image politics, Our Bodies, Ourselves gives voice to the power differential in many heterosexual sexual encounters and explains that an accepted abuse of this power has fostered women’s inability to understand their own sexuality. The authors further discuss the tendency toward premature marriage (a result of a culture that links female virginity and marriage), as well as the double standard of men being expected to cultivate their sexual prowess before marriage by sleeping with women who are then deemed “bad girls” (Boston Women’s Health Book Collective 27-8). The collective’s willingness to explain these gendered cultural expectations demonstrates its farsightedness. Our Bodies, Ourselves needed to bring to light fundamental ideological beliefs of sexual hierarchy in order for women to begin to resituate themselves as autonomous sexual beings.

Beyond this explication of oppressive cultural logics, Our Bodies, Ourselves also provides detailed information on women’s anatomy, the process of conception and childbirth, various methods of birth control, and a wide range of topics relating to abortion. Susan Wells argues that such information represents body education, or one’s increasing knowledge of her own embodiment and the need to understand not only one’s body, but also that body’s social location (108). But more than a book meant to shape private acts and private spaces, Wells contends that Our Bodies, Ourselves functions as a “grand public telling of secrets” that “opened the public sphere to new issues and new agents” (55; emphasis added). Despite having to

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62 The 1973 edition of Our Bodies, Ourselves does not include information about Roe v Wade.
compose a text that abided by “norms of reticence,” the collective succeeded in giving voice to many aspects of women’s sexuality that were not otherwise explicitly and candidly addressed in the early 1970s (Wells 24).

Women’s health advocates such as those in the Boston Women’s Health Book Collective (BWHBC) succeeded in drawing attention to systemic problems in the medicalization of women’s health and reproduction. The authors of *Our Bodies, Ourselves* showed their suspicion of institutionalized healthcare services by including an outline of current and future demands that women should make of the medical establishment and by providing a vision of community-based health centers that offer preventative services for all clients (Boston Women’s Health Book Collaborative 269-70).

Journalist Barbara Seaman also provided an invaluable contribution to the women’s health movement through the publication of *The Doctors’ Case Against the Pill* in 1969, even though her advocacy had a more complicated relationship with the medical establishment than did that of the BWHBC. Seaman began her career as a health columnist for popular magazines including *Good Housekeeping* and *Ladies Home Journal*. Her writing advocated for women’s greater understanding of health and reproductive issues, and the threat of such activist writing drew attention and critique from those representing different interests. For example, when Seaman penned an article for the *Ladies Home Journal* that promoted temporary methods of contraception and raised questions about permanent practices of voluntary sterilization (such as tubal ligation), the Association for Voluntary Sterilization pushed the magazine to alter or outright censor the piece (Kluchin 36).63

It was Seaman’s book about the Pill, however, that upended a blind public acceptance of oral contraceptives in the late 1960s (Morgen 8). Compiling a variety of anecdotes and

63 The AVS was unsuccessful in this attempt.
testimonies from both physicians and women who have used the Pill, Seaman demonstrated the lack of consensus about the Pill’s usefulness and safety. The largest portion of the text provides detailed explanations of the potential complications related to taking oral contraception, including blood clots, stroke, diabetes, cancer, heart disease, as well as a decrease in the user’s sex drive and diminished sexual satisfaction. One chapter serves as an extended case study of a woman who dies from oral contraceptive-related complications. Along with documenting these potential risks, the text outlines why there existed a disparity between the potential harm of the new drug and the limited discussion of these risks with patients. An early chapter, “The Silence that Could Kill You,” explains that many physicians lack the time, interest, or moral imperative to fully educate their patients on the potential side effects of the Pill. Not satisfied in explaining why physicians might avoid informing patients, Seaman also provides a list of characteristics of “conscientious” doctors (17). Such information not only would have educated Seaman’s readers, but also functioned to invoke an audience of selective, savvy consumers.

Physician Hugh J. Davis, practicing gynecologist and John Hopkins professor, provided the introduction to Seaman’s text, poignantly arguing that doctors’ extensive, uninformed distribution of oral contraceptives is nothing less than “mutes instructing the deaf” (3). Seaman’s decision to have Davis preface her text suggests that her contribution to the women’s health movement gained ethos by leveraging the knowledge and experience of a male physician, even though much of her text is a critique of these very same authority figures. Similarly, by entitling her text *The Doctor’s Case Against the Pill*, Seaman elevates the voices of those physicians she interviewed, thus veiling the extent to which the text relies on women’s personal experiences to argue against blind use of the Pill. Despite these constraints, Seaman’s voice and vision shaped a
book that ultimately questioned the motives and practices of a behemoth, the pharmaceutical industry, earning her the nickname “the Ralph Nader of the pill” (Fox).

Seaman’s critique led to Senate hearings on the safety of oral contraceptives in 1970 and an FDA order that risk sheets be included in all packages of birth control pills (Watkins 4). Although these hearings garnered extensive public attention, women’s health advocates were dismayed that no women were asked to testify. And later, the public would learn that one of Seaman’s collaborators was Hugh Davis, the inventor of the Dalkon Shield intrauterine device (IUD), a birth control method whose safety was not sufficiently tested in the late 1960s. Davis’s IUD led to severe reproductive harm for more than 200,000 women and caused the death of at least 18 more before the company ceased manufacturing it in 1974 (May America 131-2). Thus, even as influential as Seaman ultimately was in helping women gain access to information about the Pill and holding pharmaceutical companies responsible for making a safe product, her story reflects how women’s increased agency over their reproductive wellbeing was complicated by competing interests and situated within an ecology of significant male control. Seaman also demonstrates the tenacity needed to push for women’s increased reproductive agency in its many iterations.

By the early 1970s, a growing number of Americans—especially women—were interested in exploring the idea of sex as being natural and enjoyable and began to reconceptualize sexual health as something over which they had a rightful, personal claim. Publications like Fear of Flying, My Secret Garden, The Joy of Sex, Our Bodies, Ourselves and The Doctor’s Case Against the Pill suggest that readers’ knowledges and interests were varied,

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64 An all-male panel of witnesses on a subject of women’s contraception likely sounds familiar; in February 2012, Republican Representative Darrell Issa, House Oversight Committee Chairman, prevented women from testifying before a Congressional hearing that examined an Obama administration regulation that would require employers to provide insurance with contraception coverage to employees. Republicans opposed the ruling and backed legislation that would allow employers to limit the availability of birth control coverage for employees.
and that creating a discursive space for women’s sexual autonomy was a work in progress. The gradual shift in sexual epistemologies of ignorance and shame demonstrated by these texts counters the notion that the development of the Pill and the *Roe* decision were the primary reasons that women gained agency over their reproductive and sexual lives.

**Conclusion: Women’s Agency and Sexuality: An “It’s Complicated” Relationship**

This chapter set out to complicate the suggestion, advanced by current histories of unwed pregnancy in the United States, that with technological and legislative advances—specifically, the development of the Pill and the Supreme Court ruling on *Roe v. Wade*—the silences related to unwed pregnancy during the 1950s and 1960s fundamentally changed. Certainly, these histories of unwed pregnancy, which are simultaneously histories of adoption, are valid in pointing to these advances as being integral to a weakened 1970s adoption market. In fact, Solinger argues that immediately after the *Roe* ruling, unwed mothers in the U.S. who carried their pregnancy to term were much more likely to keep their babies than in the years prior to 1973 (*Pregnancy* 212). Solinger reasons that this change represents a shift in power whereby unwed, pregnant daughters felt emboldened to acknowledge their own motherhood; specifically, she attributes this shift to *Roe*, which “legalized the idea that pregnancy did not represent a woman’s destiny or place a woman under coercion” (213). I agree with Solinger that however we understand *Roe*, its import to women’s reproductive rights in general, and to those women who had children outside of marriage in particular, simply cannot be denied.

Nevertheless, I suggest that a rhetorical problem still exists, especially as histories of unwed pregnancy gain greater attention and function as part of more far-ranging and inclusive histories of women’s sexuality and reproduction—when they speak both to and beyond adoption
histories. The rhetorical problem, it seems to me, is the ease with which agency continues to adhere to popular understandings of the Pill and *Roe*, despite much evidence to the contrary. For example, *Roe* simply did not give women “immutable voice”; in a backlash against the ruling, Congress adopted the Hyde Amendment in 1977, which restricted government support of abortions for women on Medicaid. The Amendment (which is still on the books) was upheld in 1980 by the U.S. Supreme Court decision *Harris v. McRae*, assuring that the high court did, indeed, sanction the restriction. Such circumscription of women’s access to abortion, along with additional attempts to force women to obtain third-party (usually male) consent for an abortion, is largely to blame for the fact that a mere four years after the *Roe* ruling, 80 percent of public hospitals and seventy percent of private hospitals in the U.S. refused to perform abortions (Solinger, *Pregnancy* 200-207).

And perhaps most significantly, scant attention is given to the many women who simply did not want to obtain an abortion but still faced carrying a “fatherless” child to term. Just because these women might have had access to abortion does not mean that they would necessarily wish to pursue one, and not pursuing an abortion does not necessarily equate with choosing or being able to raise a child. I have been surprised to come into contact with women who hid an unwed pregnancy and surrendered a child for adoption long after 1973. For example, one women with whom I spoke surrendered her child in 1982, in part because she chose, as a practicing Catholic, to carry her baby to term. Nevertheless, this woman felt isolated and uncomforted by a family who did not easily overlook the “sin” of her unwed pregnancy. Stories like this remind that agency is always contingent and contextual.

Similarly, a cultural fascination with the Pill-as-miracle-drug obscures the lived experiences and constraints of many women. More than ten years after FDA approval of the oral
contraceptives, some sexually active women were still in the dark about the fundamentals of sex and conception, much less contraception. Pam, one of the women I interviewed for this project, went to a DePaul home for unwed mothers near Cleveland, Ohio and gave birth during her senior year of high school in 1972. Pam admits that contraception of any kind was just not a familiar concept to her:

You know what, to be honest, nobody, um, it wasn’t talked about a lot. We just kind of had to learn about it on our own. Did I know about the Pill? Afterward I sure did! But, um, uh, no. I don’t know if I knew about the Pill or not. And protection and stuff? I’m like where was my mind? You know what I mean? I didn’t have a lot of information—I didn’t. I don’t know if a lot of the mothers talked about it. Even in schools back then they didn’t educate you about it.

Pam’s experience illuminates how pervasive silences about sexual health remained in the shadow of the sexual revolution, suggesting the vital need for self-knowledge and women’s health advocacy at this time. And Pam’s willingness to blame herself for this lack of information (“where was my mind?”) points to the extent to which women’s sense of accountability for a sexual knowledge to which they had no access could and can be internalized.

One corrective to the tendency to overemphasize and decontextualize the progress represented by the Pill and Roe is to, as I have modeled in this chapter, more fully attend to women’s writings and other literacy efforts that strove to counter sites of ignorance and shame related to women’s reproductive lives.65 Women’s writing influenced the politics of reproductive

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65 I would argue that Jane: The Abortion Counseling Service of Women’s Liberation, founded in 1969, also represents this type of literacy work. Jane members originally attended abortions performed by physicians in order to counsel and support the women obtaining the procedure; by 1971, non-medically certified (but trained) members of Jane performed abortions. (This change was, in large part, due to the group finding out that one self-professed doctor was not actually a physician.) Beside performing abortions, though, Jane had a political goal related to women’s sexual literacy. Jane hope to ensure that “[e]very contact with a woman subtly underscored [the group’s]
and sexual health and wellness during the early portion of the 1970s, even if their efforts resulted in women making marginal gains against a power-heavy, male-dominated medical establishment and entrenched social practices. Attempts to secure abortion would present a similar hurdle, for not only was the road to reproductive control through the availability of safe abortions intimately tied to birth control access, but the ultimate decision rested in the hands of male Supreme Court judges. Nevertheless, by writing about sex and the body, the authors described above created a discursive space for cultivating greater knowledge and reversing the silences covering women’s bodies for so many years.

Reinvigorating discussions of reproductive rights and sexual literacies does more than infuse historical narratives with rhetorical historiography. Rhetorical historiography affords an opportunity to see how language shapes our understanding of salient historical moments as well as the opportunity to critique how we remember these moments. Those memories are, after all, linked to understandings of “who can speak, who must remain silent, who listens, and what those listeners can do” (Glenn, Unspoken 9)—power differentials that apply to historical moments and how those moments carry forward as shared, rhetorical history.66

“Agency” has been a vexed, but central, concept in recent rhetorical studies.67 I agree with Campbell that agency is “polysemic and ambiguous” (“Agency” 1), and this chapter has suggested that more carefully attending to agency is essential when thinking about histories of

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66 Historian Lynne Curry argues that contemporary discourse strips conversations about Roe of nuance, an observation that she notes after having routinely taught undergraduates who perceive the ruling to be either a feminist issue (and thus, does not implicate them) or one that involves a personal choice about pregnancy (166). Curry suggests that our “sound-bite-as-discourse” has diluted Roe v. Wade to “the trope of ‘making a choice,’ something akin to consumers’ freedom to choose among brands of toothpaste at Walgreen’s drug store” (166).

67 As explained by Andrea A. Lunsford, Kirt H. Wilson, and Rosa A. Eberly, “[n]o challenge has been greater for rhetoric in postmodern times than that of accounting for rhetorical agents and their agency” (xxii). Lunsford, Wilson, and Eberly provide an overview of the attitudes about how agency can and should (or should not) function within rhetorical studies, particularly given post-structuralist challenges to individualism and autonomy (xxi-xxiv).
unwed pregnancy in the United States. By considering to how agency in these instances is “both constituted and constrained by externals that are material and symbolic” (Campbell, “Agency” 3), advances in women’s reproductive rights and sexual literacies can be recognized as women’s rhetorical history, not just agency that has been conferred on women by institutions of (male) power. Such revisioning is, I contend, an essential task toward reclaiming histories of unwed pregnancy and appreciating the complex and sometimes invisible way that power functions through language and comes to bear on the female body.
CHAPTER FIVE

Of Epidemics and Epideictics:
Rehabilitating Pregnant Teens in the Late 1970s

“I’d never thought it could happen to me . . . .What on earth was I going to do now?”

These are the thoughts of Terri, a sixteen-year-old, unwed, and pregnant narrator whose first-
person story appears in Good Housekeeping, May 1980. Sharing openly as one might write in a
diary, Terri describes learning of her pregnancy during a visit to her pediatrician, an irony that, in
hindsight, she admits is “funny.” But Terri is initially frightened by her situation, mostly at the
thought of having to tell her parents about the pregnancy: “My parents are very strict and old-
fashioned. What in the world would they think of me? They’ll throw me out! I thought miserably. I was so upset I cried myself to sleep” (“My Problem” 32).

Terri’s pediatrician insists that she visit a gynecologist, although Terri tells the reader little of this appointment. The physician confirms Terri’s pregnancy, and she begins to cry.
Through her tears, Terri asks the gynecologist, “What about an abortion?” The gynecologist simply tells Terri that she is “too far along” for an abortion, but also chides “Why didn’t you see a doctor sooner?” (“My Problem” 32).

Realizing she must confront her parents, Terri describes talking to them as “more horrible than I’d ever imagined.” Her mother and father respond by “shrieking” and demanding to know how Terri could do “this” to them. Terri writes that her parents “seemed to assume I’d marry Bill [the father of the baby] and acted shocked when I said I wouldn’t.” Then they chastise Terri for dismissing the idea of adoption, claiming that her preference “wouldn’t be fair to the baby.”

As the narrative moves forward, Terri is quickly cast off by her boyfriend and is no longer included in parties or gossip with her friends. She describes her feelings of isolation as

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68 It seems fair to assume that in this narrative, the gynecologist is male, not only given the time period, but also given that his/her gender is not explicitly identified.
she lies in bed, mulling her options. Her narrative is peppered with her memories of “bursting” into tears and her feelings of being “utterly rejected.” Trying to make sense of how her identity has changed (now that she could not deny her pregnancy), Terri describes her mixed emotions in relation to others’ reactions:

Being pregnant proved that I was a woman, not a kid like them [her school friends] anymore, that I was sexy and desirable. Some of my friends envied my new status and admired me for keeping the baby. Others thought me stupid to get caught. (“My Problem” 32).

Neither Terri nor her classmates can pin down her new, liminal identity, but her pregnancy proves that she is no longer the same girl she once was.

Terri describes speaking to her nurse about her decision to keep her baby. She insists that the nurse “was calm, friendly, and never sat in judgment.” The nurse reassures Terri that she will not try to take her baby away, adding—perhaps sardonically—that “‘If you are woman enough to be here, you are woman enough to make your own decisions.” Nevertheless, the nurse rehearses to Terri all of the obstacles that she will face as a single, teenage mother. Terri appreciates this communication, less because she is learning about day care waiting lists and items the baby will need, and more because this advice represents to Terri “the first time anyone had treated me like a responsible person.” At a later visit, however, the nurse’s warnings tap into Terri’s feelings of social isolation. “It’s not going to be easy to fit into school life after the baby comes,” the nurse cautions. “Oh, some girls manage to study and date. But it usually means they’ve dumped the baby with Mother and she and Dad are footing the bills. And that’s simply being an irresponsible brat” (“My Problem,” 34).
Apparently having failed at guiding Terri to make the “best” decision on her own, the nurse finally encourages Terri to meet Lisa, the nurse’s young sister, who also had a child as an unwed teenager. Lisa’s functions as a cautionary tale; being a teen mother is hard and socially isolating (boys will either shower you with attention because they think you are sexually available or avoid you because they think you are trying to find a husband). Despite these frustrations, however, it was Lisa’s realization of her own fear of herself as a potentially abusive mother that led her to eventually give her child up for adoption. Confessing that “I could barely keep myself from hitting her,” which “horrified and frightened me,” Lisa explains to Terri that “[f]or my baby’s sake, I had to give her up” (“My Problem” 36).

The story ends, quite abruptly, with Terri ruminating from her bed once again, happy that she finally recognized “how childish and irresponsible” she had been. She admits that Lisa “had put into words a lot of my vague fears,” which allowed Terri to almost immediately make the decision to relinquish her child. Lisa’s counsel allowed Terri to see that she had been “too locked into [her] own viewpoint” and that surrendering her child was “the only responsible thing to do.” Without explanation, Terri’s parents now express their respect for her autonomy as a parent, asking her if she is “sure” that she wants to give up her child. Apologizing to her parents for not having taken their needs (as grandparents) into consideration earlier, Terri proclaims that she finally realizes that “[t]hey did love me and want what was best for me and my baby.” (“My Problem” 36).

I open with “My Problem and How I Solved It: I Was Sixteen, Unmarried—and Expecting a Baby” because the narrative compresses the tangle of complications surrounding a 1980 unwed, teen pregnancy into a story of redemption, and a banal one at that. The confessional, surely penned by a Good Housekeeping staff writer, relies on an uncomplicated,
problem-solution arrangement. Specifically, the story encourages readers to see that “teen” pregnancy (a term that by the later 1970s was being used interchangeably with unwed pregnancy) is a national problem, because “Terri” could be any girl, any parent’s daughter. Further, the article suggests that young, immature, irresponsible, and ignorant Terris are the source of the teen pregnancy problem (or, arguably, that they function as the problem). The only appropriate solution for girls like Terri is to recognize their inability to parent and to surrender their child to a married couple. According to the logic of the narrative, Terri can and does rehabilitate herself. Her “mistake” was getting pregnant, which is a personal problem, a marker of her irresponsibility, and a dangerous condition, for Terri no longer is satisfied to see herself as a complicit, good, little girl. Terri fixes her problem by recognizing her responsibility to her family, her baby, and herself (that is, a future, responsible, productive, and likely married self) and acknowledging her misdirected desires (to keep her child, for example). But relinquishment of her child is not the only surrender this story advocates. Terri’s confusion dissipates once she stops courting her own agency and surrenders to the paternalized and pathologized girl that her parents, the nurse, and even Lisa see her as. Because this is a story of rehabilitation, the narrative jettisons larger discussions of how the network of adults surrounding Terri might also be actors in the drama of teen pregnancy, perhaps feeling a responsibility to address the complexity of “immature” teenagers experiencing unfamiliar sexual drives and stepping into the presumably mature, adult arena of sexuality and reproduction. Instead, the story’s parabolic tone implies that the solution to Terri’s predicament is a private and prescriptive one; if other girls can bear witness to Terri’s epiphany, there will be fewer and fewer pregnant teens in the first place.

The tidiness of Terri’s story belies the vexed and far-reaching public rhetoric surrounding teen pregnancy starting around 1976, when discussions of the “epidemic” problem first began to
circulate as such. This public discourse grappled with how to understand and publicly respond to a so-called crisis of teenage girls becoming pregnant. But Terri’s story also illustrates how, by the 1980s, a national crisis of “babies having babies” was becoming a privatized problem—one that was derided publicly but also aligned with growing resentments toward social interventions that directed public monies toward what were thought to be irresponsible, personal failures.

This chapter examines rhetoric about teen pregnancy during four pivotal years leading up to the neoconservative high tide of the 1980s. As I have argued in previous chapters, the long 1970s represent a gradual shift in spatial practices related to unwed, pregnant bodies—from being physically hidden by families and private institutions during the 1960s to gaining the right to access public spaces, such as high schools in the early years of the decade. By the late 1970s, “teen pregnancy” (a term that applied to many young, unwed mothers) was identified as a new and urgent problem. As a result, unwed pregnancy had become a much more public concern than it had been in earlier decades, although discourses about this enduring problem recast it as one that implicated the public good, over and above a private family’s reputation. Thus, as the terminology of “teen” pregnancy took hold, the enduring silences about the shame of unwed pregnancy as an immoral act gave way to discussions of the causes and effects of a social problem—one with implications simultaneously economic, technological (e.g., contraceptive technologies), educational (e.g., sex education), and medical.

The crisis discourses of the late 1970s provided new frames for understanding the sometimes overlapping, sometimes exclusive identities that aligned with “unwed pregnancy” and “teen pregnancy.” Teen pregnancy, discussed as a problem unique to the late 1970s, increasingly was discussed as being a hazard to public health and to the nation’s economic viability. The urgency of the problem was substantiated by claims that the problem had reached “epidemic”
proportions, a label that circulated widely in popular publications and political discourses. Discussions of teen pregnancy-as-epidemic cast this social problem as a technical quandary for the post-*Roe v. Wade* era, one that could ostensibly be solved by a nation as technologically advanced as the United States. Thus, perfunctorily, such framing seemed to replace older, moralistic concerns of pregnancy outside of marriage at the same time that the so-called crisis warranted the scrutiny of pregnant, unwed girls whose bodies were symptomatic of a critical *public* problem. And at first blush, the rhetorical construction of teen pregnancy as a technical problem seemed to align with the belief, here exemplified by a 1977 *Newsweek* article, that “the stigma of having a child out of wedlock ha[d] diminished considerably” by this time (Schwartz).

This chapter asks how the language about teen pregnancy that emerged during the late 1970s shaped understandings of this “new” problem, conceptions about the teen girls who were being publicly scrutinized, and the public interventions meant to remedy this national “crisis.” In order to answer this question, I examine excerpted discussions of teen pregnancy—originally appearing in public education literature, periodical press publications, and in public policy—to argue that these discourses perpetuate but obscure moralistic notions of who *should* and *should not* be pregnant. I argue that technical and medicalized rhetorics of disability situate teen mothers as pathological, a construction that leverages fears already evoked by a teen-pregnancy-as-epidemic framing. Additionally, as *age* becomes the primary barometer of sexual propriety and deviancy, pregnant teen girls are depicted in paternalistic and infantilizing ways that suggest hyperdependency and justify the need for swift and sure interventions that would save these “children” from their own abnormalized sexuality. Thus, previous practices of *shaming* (and hiding) unwed mothers based on a supposed moral code shifts into practices of *blaming* teen mothers for their bodily and mental immaturity. Further, this immaturity functions as a
disability—an ableism-oriented stigma that is made evident on the girls’ (increasingly public, increasingly visible) pregnant bodies. Because these instances of psogos, or blame, locate kakoethos, or bad character, on pregnant, teen girls’ bodies, the girls—especially those who are unmarried—are repeatedly depicted as giving birth to a “cycle of dependency” on the state. Thus, discourses meant to elicit a public response to the “epidemic” are stymied by their reliance on epideictic rhetorics of blame that insist on teen mothers’ deficiencies; such a rhetorical approach stifles opportunities for identification with these girls and forecloses deliberation about the challenges they face. In short, this rhetorical framing implies that unwed mothers, because they are pregnant, have damaged their potential for “proper,” feminized dependency and pose a threat to the values and financial well-being of the citizenry.

In order to make such claims, I first provide a brief discussion of this charged moment in history, focusing on national political, religious, social, and economic concerns faced by President Jimmy Carter and other leaders of the time, many of whom were preoccupied with the supposed decline of the family and teen pregnancy as a central factor in that deterioration. With this background in place, I next provide an overview of 11 Million Teenagers, a Planned Parenthood publication that presents “teen pregnancy” as a “new” public problem of “epidemic” proportions. I then excerpt rhetorical depictions of “teenage pregnancy” in popular texts and news stories that circulated during these years, charting commonalities across publications as varied as Seventeen magazine, U.S. News and World Report, Ebony, and McCall’s. Such publications adopt a journalistic tone, but their reportage perpetuates notions of teen mothers’ pathology, ignorance, and immoral willfulness, while casting blame on failed sex education initiatives.

The last portion of this chapter examines the language of the Adolescent Health,
Services, and Pregnancy Prevention and Care Act (AHSPPC) and related Congressional testimony. The AHSPPC was proposed by the Carter administration as a response to the “epidemic” and sought a “comprehensive” intervention into the problem. I demonstrate how discourses surrounding the AHSPPC rely on the circulating, disability framings of teen pregnancy and thus extend rhetorics of *psogos* and logics of rehabilitation on the part of individual, teenage girls instead of engaging in deliberation about teen pregnancy as a diffuse social issue with imbricated causes and effects. I conclude by suggesting that discursive framings of teen/unwed pregnancy during the late 1970s ultimately privileged both private responsibilities (e.g., of girls to enact a particular type of dependency and submission) and private needs (e.g., of taxpayers to guard their money) over shared social responsibilities for helping young people navigate their sexual identities. This public conversation emerged at a time when the nation grappled with a new era of women’s rights and when conservative forces mobilized and would soon make great political inroads. Thus, I argue that rhetoric of this era not only prefigures later discursive constructions of unwed pregnancy during the 1980s and beyond, but that its legacy continues to delimit more contextual, socially responsive rhetorical figurations of this ongoing problem.

The End of a Decade: Moral Decay and the Disintegration of the American Family

“As a Nation we must strengthen and support the values of family life for they are inseparable from our finest national traits.”
—Jimmy Carter, “Proclamation of National Family Week”

“Family” served as a central concept of the Carter presidency. Historian Brooks Flippen argues that in late 1970s America, a nation devoid of “a strong and stable family life” and its attendant morals was thought to be especially dangerous, for a decline in the stability of the
American family was considered the source for all types of cultural crisis (45). And a concern over a frayed sense of family values circulated widely during these years of social, political, and economic difficulty.

Although one can trace salient events of the late 1970s, perhaps this portion of American history is best understood as a time of slow transition, not one of bold changes. Carter’s presidency (1977-1981) serves as a helpful frame for understanding the historical moment, and it seems a fitting lens through which to examine this era given the Carter Administration’s interest in the epidemic of teen pregnancy. Carter won the presidential election over incumbent Gerald Ford, and he took office at a time when many Americans were still reeling from the disgrace of President Richard Nixon’s 1974 resignation over the Watergate scandal. The nation was psychologically taxed by Nixon’s deception, and weary from the president’s decision to maintain military action in Southeast Asia despite criticism from many Americans, the press, governmental officials, and foreign leaders (Eisenberg 260). Critics of the war opposed the fighting but also decried the secrecy of the United States’ ongoing participation in the struggle, as well as government-led violence on war protesters, exemplified by the death of student protesters at Kent State University in Ohio and Jackson State University in Mississippi (Gardner 246). Economic peril only exacerbated political turmoil, as Carter assumed the presidency during a period of “stagflation” (high unemployment and high inflation) (Flippen 45). While Carter was in office, Americans would face other social and technological trials: Harvey Milk, the first openly gay municipal official, would be assassinated by another public official, Dan White, who defined himself as an American opposed to social deviancy; the Three Mile Island power plant in central Pennsylvania would be the site of a nuclear accident that would coalesce antinuclear
activism; and the Equal Rights Amendment would continue to incite heated debate as supporters and detractors tried to influence state ratification (Shilts xvi; Hamilton 330, 90).

In short, Carter faced a nation much divided and exceedingly anxious. Calling upon the moral imperatives of Christianity, but determined to not bring religion explicitly into the Oval Office, Carter nevertheless cultivated a values-oriented leadership style (Flippen 107-9). For example, in his 1977 inaugural address, Carter urged the nation to take seriously its “moral duties,” implored Americans to “[l]et our recent mistakes bring a resurgent commitment to the basic principles of our Nation”—a gesture to Watergate marked by Carter’s belief in the possibility for American renewal. In articulating how he, as president, would help guide the country through a “rekindling of confidence,” Carter pledged to focus on strengthening “the American family,” which he described as “the basis of our society.” For Carter, getting the United States back on its chartered, moral course meant girding the nation from the bottom up.

The trouble with “family” was big news in the late 1970s. A 1978 *Newsweek* article purported that U.S. families were in trouble because of several factors: individuals’ unwillingness to follow traditional life patterns and roles; the great financial burden of raising children in a time of economic peril; the “institutional interference” of non-parental influences such as television, schools, and peers; and the rise of parenting experts, whose advice supplanted parents’ “self-respect and common sense” (“Saving the Family”). Whatever the supposed factors leading to its demise, many Americans feared that the “traditional” family (whatever that meant) was being surpassed by the pursuit of individual and alternate forms of happiness.

In 1976, novelist Tom Wolfe declared that the U.S. was experiencing a “third great awakening,” but not one that reestablished an American covenant with Christianity. Instead, Wolfe declared that he was living in “the greatest age of individualism in American history”—
one marked by extreme self-interest and narcissism ("The ‘Me’ Decade"). For many—especially conservatives—Wolfe’s “me generation” was one symptom of a larger problem: a secular humanism that placed individual human desires above the desire to obey God (Mattson 31). At the same time, this late-1970s zeitgeist prioritized “self-improvement and personal fulfillment over political reform and the betterment of the community” (Douglas 237).

During this turbulent era, a desire to revive the “traditional family” (a mythic notion, increasingly supported by religious conservatives) was directly at odds with the desire to work beyond the nuclear family’s constraining, heteronormative, and gendered roles. In particular, signs of cultural decay such as the decriminalization of abortion, a rise in divorce rates, sex education in school, and the mobilization of the gay rights movement threatened what were thought by many to be traditional family structures and values. Additionally, popular discussions of “family” changes (or, as critics would say, disintegration of the family) often and “cavalierly” blamed mothers working outside of the home for a variety of social problems, illuminating the extent to which an acceptable version of “family” depended on gendered logics of “male breadwinning and female homemaking” (Chappell 161). Pro-family nostalgia, then, was intimately linked to women’s economic dependence on men—a dependence that conservatives found acceptable within the context of marriage.

Illegitimate pregnancy remained a moral hazard to American life, and one that was now deemed either corrosive to the two-parent nuclear family or one result of an assumed lapse in family coherence. Capturing a supposed truism of the 1970s, historians Paul Levine and Harry Papasotiriou argue that “the flowering of the sexual revolution and the withering of the nuclear family created alarming numbers of unmarried mothers” (168). A focus on unwed pregnancy as

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69 For a more detailed description of the mythos of “traditional” family nostalgia, see Coontz’s *The Way We Never Were*. 
a critical part of the overall breakdown of the family resulted in what might have been a largely private issue becoming one of public concern, particularly because of the economic strain unwed mothers were thought to put on taxpayers. *Newsweek* cast unwed pregnancy as a central and very public problem because amid all of the factors contributing to unraveling familial mores,

> [p]erhaps the *most* distressing development is the high tide of illegitimacy. Fifteen percent of all births are illegitimate and more than half of all out-of-wedlock babies are born to teen-agers. Illegitimacy is particularly high among blacks: of the 513,000 children who were born to black women in 1976, 50.3 percent were illegitimate. And it is the illegitimate, both black and white, who are most likely to be impoverished, dependent on welfare, deprived of educational opportunities and destined to repeat the cycle with illegitimate children of their own. (“Saving the Family”; emphasis added)

If “family” functioned as a god-term for conservatives near the end of the 1970s, then “illegitimacy,” “unwed pregnancy,” and “teen pregnancy” were devil terms.70

Carter, a born-again Christian who adhered fiercely to the tenet of separation of church and state, saw defense of stable families as a worthwhile goal that could potentially foster political unity. The nation, however, was divided on just how “family” should be defined. Evangelical Christians generally held that the only legitimate type of family was the nuclear family: a married, heterosexual couple with children (biological or adopted). But in this era of dawning (if starkly limited) tolerance of feminism and homosexuality, many liberals envisioned a more flexible notion of “families,” one that acknowledged a variety of kinship arrangements,

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70 “God terms” and “devil terms” exist within an agonistic relationship according to what Kenneth Burke would call a “Constitutional frame.” Attention to such terms plots the coordinates that give meaning to, or constitute, a thing that is understood dramatically (*Grammar* 355-7).
including homosexual partnerships, single-parent homes, and non-married co-parenting relationships (Flippen 103).

Carter demonstrated a belief that “family” was and should remain a central American tenet as he proclaimed “National Family Week” during each November of his presidency. Issuing statements that linked the institution of the family with nationalism, Carter proffered maxims such as “Families are the building blocks of civilization (1978),” “Family values are our most fundamental and lasting heritage (1978),” and “We are a nation of families (1979).” Attentive to changing family structures but still privileging the two-parent household, Carter celebrated “the extended family, the foster family and the adoptive family,” because these families “play a special role by relieving the isolation of those who lack the comfort of a loving nuclear family” (1979). Thus, Carter appealed to seemingly non-controversial qualities that he aligned with families (“warmth, love, compassion, support, and understanding”) while indirectly suggesting that alternate two-parent families could provide a level of “comfort” and love that might well be lacking in one-parent families (1978).

Dissension over acceptable definitions of family—or an acceptable definition, according to many conservatives—came to a head as plans were made for the White House Conference on Families. Carter had promised to hold a conference on the family if he became president, and this pledge won him campaign support from evangelicals like Pat Robertson (Flippen 7). The “event” actually represented three regional conferences held in 1980 to address issues related to family and gender roles, each planned by a coalition of more than fifty liberal and moderate organizations (Williams 145; Chappell 164). Conference planners at the White House, with the President Carter’s consent, chose to name the event a conference on “families,” calling attention to the increasing diversity of family structures. Conservatives not only found fault with this
decision but also used the overall scope and tone of the conference to organize counter efforts. For example, members of a wide array of conservative groups formed the National Pro-Family Coalition in order to send delegates to the conference (Chappell 164). Coalition members attending the regional conferences insisted that “family” be defined according to conservative Christian beliefs and stated their objection to the ERA, abortion, and gay rights (Mason 116). Additionally, rising conservative leader Tim LaHaye helped to organize “America’s Pro-Family Conference” in Long Beach, California in July 1980. The event, which drew more than 5,000 participants, featured Jerry Falwell and Senator Jesse Helms who urged listeners to express their pro-family sentiments politically (Williams 145).

Conservatives’ adherence to a singular definition of family should be understood in relation to the simultaneous rise in an anti-statist sentiment within the New Right, the conservatives who mobilized during the 1960s and 1970s and gained significant political power with the election of Ronald Reagan in 1980. Historian Marisa Chappell links this anti-statism to the Right’s “financial and ideological ties to a resurgent corporate-led laissez-faire conservatism” (165). This increased adherence to a free market ideology meant that conservatives targeted welfare programs like Aid to Families with Dependent Children (AFDC), using the pro-family stance to urge that unmarried mothers should not receive federal support. Thus, conservatives held that “without interference by liberal government planners and regulators, the economy would reward those who practiced sexual restraint and marital fidelity with male breadwinner wages” (Chappell 165). Thus, the coalition of pro-family advocates that gained traction during the Carter presidency would also influence discussions of unwed pregnancy that called attention to a mother’s marital status as being a predictor of her presumed or potential dependency on the state.
“Family” thus functioned as a politically and religiously charged term during the late 1970s, and one around which conservatives mobilized in direct response to Carter-led initiatives. For many, “family” encompassed both the promise and peril of a weary nation struggling to redefine itself, and the term, in its varied instantiations, reflected the splintered ways in which Americans were defining themselves by this time. The late 1970s represent a moment where the nation struggled against contrasting, perhaps competing versions of itself: was America a country invested with a moral imperative of communal responsibility for the good of all, or was the United States the center of a conservative ethic of personal responsibility, accountability to oneself, and fundamentalism? These profiles are reductive but instructive, crisscrossed by ideological, political, economic, and religious discourses. It is during this time that the unwed, pregnant (and now, allegedly “teenage”) body becomes a central figure that catalyzes rhetorics that attempt to suss out how an epidemic of teenage pregnancy fits into these diverging views of the body politic.

**Teen Pregnancy: A Problem Is Born**

An “epidemic” of teen pregnancy was a late-1970s phenomenon that captured the interest and fear of a nation in cultural flux. Sociologist Frank F. Furstenberg points to the enigma the panic, noting that the idea of teen pregnancy “rose to a level of public obsession just as rates of teenage childbearing began to plummet in the late 1960s and early 1970s” (1). In 1976, the Planned Parenthood Federation of America and its sister research organization, The Alan Guttmacher Institute, published an informational booklet about the new American “epidemic” of teenage pregnancy, providing a scientific overview of an issue that, it argued, had reached crisis levels. Coverage of the epidemic began to appear in the periodic press shortly after this research began to circulate, and many news articles quoted from the brochure’s barrage of statistics.
Critics—some writing during this time and many more having voiced suspicions in later decades—insisted, however, that the epidemic was not a crisis at all, but rather a purposeful misreading and misrepresentation of statistical data. Practically ignoring such doubts, the late 1970s discussion about teen pregnancy shows that the pregnant, teenage girl was prominent on the nation’s radar.

Law and sociology scholar Kristin Luker argues that the teen mother identity was not fact so much as a discursive creation, one that came at a time when “statistics [related to pregnancy] could have been used to tell any one of a number of stories,” such as that of increasing rates of abortion among non-teens, for example (*Dubious* 82). Instead, Luker argues that the idea of the pregnant unwed teenager “made a convenient lightning rod for the anxieties and tensions in Americans’ lives” at this time (*Dubious* 106). This section performs a close reading of the rhetorical depictions of teen pregnancy in various publications of the late 1970s in order to understand how the issue was framed for general audiences. I argue that these depictions suggested that the cultural “problem” was a technological one and that rhetorics of blame, disability, and dependency located the culpability for unwed pregnancy primarily on the unwed, pregnant body. This rhetorical approach heightened anxiety about teen pregnancy-as-disease and established a new, but ultimately dehumanizing conception of pregnant girls in need.

**A Problem of Epidemic Proportions**

“How did we get into such an epidemic of childbearing by children?”
— Grace Naismith, “Teen-Age Sexuality: Too Many Pregnancies Too Early”

The “epidemic” trope can most easily be traced to Planned Parenthood’s 1976 publication of the pamphlet *11 Million Teenagers: What Can be Done About the Epidemic of Adolescent*
Pregnancies in the United States? This 64-page document is divided into four sections: a statistics-heavy overview of the state of adolescent pregnancy at the time of publication; a discussion of how a mother and child’s health and wellness are compromised by a teen pregnancy; a sketch of current interventions, including birth control education and the access and availability of abortion; and a vision of what additional interventions might lower rates of teen pregnancy. An afterward by Daniel Callahan, Director of the Institute of Society, Ethics and the Life Sciences, assures that adolescent pregnancy is, indeed, a crisis of “epidemic” proportions (58). The vast statistical data appear under section headers that function as a primer for contemporary unwed and teen pregnancy concerns: “11 Million U.S. Teenagers are Sexually Active” (9); “Half of Unmarried Women Have Intercourse by Age 19” (9); “One Million Teenagers Become Pregnant Each Year” (10); “Nine in Ten Keep Baby” (11); “One-Third of Births to Teenagers Are Out-of-Wedlock” (14) “Teen Mothers Lack Key Skills” (24); “Ignorance, Inaccessibility Main Reasons for Nonuse of Contraception” (30). Overwhelmingly, the document presents “teen pregnancy” as an issue of and about “teen girls.” Of the 41 total graphs and charts in the document that reflected information about “teens” in relation to “teen pregnancy,” 35 of these visuals explicitly measure a statistic depicted as relating to females, whereas only six visuals explicitly measure a statistic depicted as implicating males.73

71 Interestingly, a picture of Judy Fay, the pregnant student at Citrus High described in chapter 3, serves as the image accompanying the “What Could Be Done” section. Fay’s picture in this section of the brochure suggests that she functioned as a sort of poster child for the promise of more tolerant institutional and social responses to teen pregnancy. Subsequently, the reuse of her image also suggests that tolerance as exemplified by Citrus High remained an exceptional practice, not the rule, even several years after the Roe v. Wade ruling.

72 The Institute of Society, Ethics and Life Sciences was a bioethics research center that would later become the Hastings Center.

73 An example of female-specific data is a chart that measures the “percent of births to females aged 14-19 that were out-of-wedlock, by single years of age, United States, 1960-1964-1970-1974” (14). An example of data that includes males is “sources of contraception among sexually active teenagers, United States, 1971,” which would presumably include males and females (43).
Planned Parenthood’s depiction of teen pregnancy as a disease, spreading out of control, tore through media outlets with in its own infectious speed. A host of articles on teen pregnancy—discussed in greater detail below—advance a consistent message that this issue had, in fact, reached epidemic proportions. One article uses a *Webster’s Dictionary* definition of epidemic to prove that the claim is not hyperbolic, adding that the rate of teenage pregnancy exceeded that of venereal disease among teens, which is “acknowledged by just about everyone as epidemic among teenagers” (“Is Pregnancy Good” 35). The rhetoric of urgency infused in these crisis messages emphasize that teen pregnancy was a national problem that bridged political and religious divides. For example, in a 1978 *New York Times* article, Cincinnati Archbishop Joseph L. Bernardin characterized teen pregnancy as an epidemic and one of the most pressing factors, along with abortion, contributing to an American “cultural malaise.” And not only was the nation experiencing a “surge” in teen pregnancies, but according to *US News and World Report*, no end to these escalating figures was in sight (“Rising Concern”).

The “epidemic” frame deserves attention for two reasons. First, doubts existed (and exist) about the claim that teenage pregnancy rates were rising at all, much less whether the term “epidemic” was a hyperbolic label. Thus, Planned Parenthood’s choice to deem teen pregnancy an “epidemic” seems, in retrospect, to be a decidedly rhetorical one. Second, the language of epidemic—aside from being potentially inaccurate—is fraught with meaning significant to discussions of teenage and unwed pregnancy. Specifically, the epidemic metaphor leverages the assumed certainty of medical and scientific language and obscures the hortatory undertones of discussions that implicate female bodies, the body politic, and, surely, many vested interests. The decision to frame teen pregnancy as an *epidemic* imbued this social “problem” with a sense of urgency that demanded public attention and response. Additionally, the brochure’s rhetorical
construction of teen-pregnancy-as-epidemic reinforced a sexual double standard whereby females were blamed for problematic pregnancy; this epidemic framing, however, relied heavily on technical discourses and did not overtly discuss the morality of pregnancy outside of marriage. And with the invocation of disease and contagion that accompanies the epidemic metaphor, this “social” problem increasingly assumed the shape of a public health issue.

News articles reporting on the issue acknowledged a wide range in reported instances of teenage pregnancy (between less than 1 million and 2 million, for example), but this “curious and unaccountable statistical oversight” did little to call into question belief that the crisis existed (“The Growing Problem” 53). A professor of economics featured in a 1978 issue of USA Today even went so far as to argue that the invention of the teen pregnancy epidemic resulted from incorrect readings of logarithmic graphs and belief in “unpublished tabulations.” More, the author urges, this anxiety was being manufactured by Planned Parenthood and the affiliated Alan Guttmacher Institute in order to keep the agency flush with federal monies, some of which funded reimbursement of abortions in Planned Parenthood clinics (Kasun 31-3). Nevertheless, questions about the veracity of the reports were scant; it seems as though journalists were persuaded by the sheer bulk of data provided them.74

Maris A. Vinovskis, Deputy Staff Director of the Select Committee on Population during the late 1970s, witnessed the extent to which the epidemic trope influenced policy discussions during the Carter administration. Alarmed that few questioned the validity of the so-called epidemic, Vinovskis conducted his own assessment of teen pregnancy statistics, finding that the

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74 Acceptance of this data may be attributed, in part, to the fact that it was the first of its kind. It wasn’t until the 1970s that contemporary teenagers became the focus of comprehensive studies of sexual activity. Earlier studies, like those of Alfred Kinsey, were conducted with adults who recalled the sexuality of their youth from memory (Hine 270).
notion of a spike in pregnancy actually ran counter to historical trends. Although Vinovskis claims that rates of sexual activity among teens increased during the 1970s, the rate at which adolescent girls became pregnant in the years between 1953 and 1978 actually decreased by 44.8 percent, suggesting that the most pressing time to worry about teen pregnancy had already passed (Vinovskis 9, 25).

Although “epidemic” might have been a fictitious label, the terminology gained traction and, as noted, provoked little scrutiny. This level of trust in an assessment of an epidemic is less surprising, however, when one considers the apodictic qualities of the “proof” used as evidence. Women’s Studies scholar Paula Treichler, in her examination of rhetorical constructions of AIDS, argues that when a problem is labeled an “epidemic,” subsequent discourse about the problem is marked by “[i]deas, metaphors, and images [that] circulate efficiently.” (This observation helps to explain the glut of popular press articles on teen pregnancy that appear shortly after the Planned Parenthood booklet was published.) Insofar as “epidemic” functions metaphorically to shape audiences’ responses to teen pregnancy as a problem, this framing invokes an epidemiological assessment of that problem. Specifically, the 11 Million Teenagers brochure implies that the research presented in the document represents a new scientific discovery. This sense of an emergent trend—and the Alan Guttmacher Institute’s diagnosis of this trend—is bolstered by the brochure’s opening excerpt from the “First Interhemispheric Conference on Adolescent Fertility,” held in 1976 (7). The brochure goes on to explain that “traditionally,” adolescent pregnancy had been associated with minority and poor populations.

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75 I am wary of relying too heavily on any of the statistical information collected about teenage and/or unwed pregnancy before, during, and after the 1970s, even that which Vinovskis provides as an antidote to the misperceptions rampant during the initial years of the teen pregnancy crisis. As this chapter demonstrates, a general overreliance on the transparency of statistical data fueled a panic that, I argue, obscured the ways in which fear (a by-product of this crisis discourse) articulated to gendered, classed, and raced notions of sexual propriety. Instead, my interest lies in the rhetoric of the obsession with teen pregnancy, and how discursive constructions leveraged disinterested “truths” that provided the fodder for understandings of and interventions on the pregnant, unwed body.
but that “recent evidence suggests that teenagers from higher income and nonminority groups are now beginning sexual intercourse at earlier ages” (9; emphasis added). Such language decontextualizes adolescent and unwed pregnancy as one aspect of the ongoing history of human sexuality and (re)scripts this issue as a new site of research and professional inquiry. Although Callahan’s afterword in 11 Million Teenagers briefly explores the broad social implications of a vested and vexed site of moral disagreement, this discussion comes after more than 50 pages of graphs, charts, and other pieces of evidentiary data that suggest adolescent pregnancy is an issue that can be measured, quantified, and systematically dis-covered.

Through this language of pathology, researchers-as-epidemiologists measure and assess a problem that seems to circulate, virus-like, as a real threat that might be contained. This approach crystallizes an otherwise diffuse, multi-faceted social concern and renders it understandable and treatable. This framing thus performs rhetorically as “anti-rhetoric,” what Edward Panetta and Marouf Hasian, Jr. describe as discourse that functions to advance a singular, “rational,” and “objective” “truth” (58). Panetta and Hasian assert that such discourses are situated and rhetorical, even though they do not acknowledge their own rhetoricity. In fact, the authors argue that such “philosophical or empirical claims to knowledge [. . .] purport to reveal some truth” and “invite audiences to believe that experts possess a special finding that mandates the acquiescence of other discursive participants,” especially because such findings are thought to be “prepared independent of the chaos and politics of ordinary life” (59).

An epidemic orientation demands a locatable source of infection, and discussions of teen pregnancy respond to this need with language and imagery focusing on the teenage, female body, frequently reminding that teenage pregnancy is a “problem” often “compounded because births are out-of-wedlock” (Alan Guttmacher 7). Thus, teenage pregnancy is—through words and
images—situated as a primarily female problem, and this depiction eclipses men/boys’ participation in propelling the so-called epidemic (see fig. 7). Through the many charts, graphs, and tables appearing in the document, readers understand that the crisis is measured almost exclusively by considering age and marital status of females (7-17). Noting that “pertinent information about male adolescent sexual activity is virtually nonexistent” except for “fragmentary survey data,” the brochure justifies its decision to “concentrate in this report on young women aged 15-19, with emphasis on younger ages where data are available and specific comment is appropriate” (9). The publication portrays sexually active teens as individuals worthy of social protections, education, and support systems; it also underscores their dependency, imploring readers to recognize that “it is the value of their [teen girls’] lives, not ours, which is critically at stake” (59).

Fig. 7. Detail from Planned Parenthood’s 11 Million Teenagers. 1976.

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76 Girls’ intent (or lack thereof) to become pregnant is also measured.
A reliance on the terminology of epidemic also represents a signification that elevates pathologizing technical and medical language while it subverts the social implications of human crises. Treichler explains that “an epidemic intensifies existing social divisions and codifies cultural stereotypes because there seems to be no time to do otherwise” (45). The urgency of the epidemic of teen pregnancy, thus, contributes to continued insistence that female bodies are the primary site of a teen pregnancy problem—a new version of the sexual double standard discussed throughout this project. But instead of the moralistic term “unwed” pregnancy receiving top billing in depictions of the epidemic, now the term “teenage” pregnancy makes headlines, a shift that represents a moralistic problem now rewritten to be a technical one (Arney and Bergen 11).

The far-reaching threat of an epidemic fostered depictions of the problem that were also not overtly race- or class-specific (even though they were decidedly gender-specific). Such a representation is significant for, according to Vinovskis, by the late 1970s, “the real problem of adolescent pregnancy for most Americans [was] not the number of pregnant teenagers, but the increasing proportion of out-of-wedlock births” among this group (28). Specifically, between 1960 and 1977, the rate of births to unwed mothers age 15 to 19 increased, according to Vinovskis, by 64 percent. Additionally—and significantly—this increase aligned with a perceived demographic shift: unwed, teen mothers were much more likely to be non-white than white. By 1983, argues Vinovskis, four out of ten white teens who gave birth were unmarried, whereas “almost nine out of ten births to nonwhite teenagers were out-of-wedlock” (28-9). Indeed, of the 34 of pictures of females in the 11 Million Teenagers brochure, 30 appear to be
white and four appear to be non-white.\textsuperscript{77} Although by counting raced bodies in the brochure I am participating in a fiction of visible race difference, the point here is to demonstrate that a status (unwed/teen mother) that was seemingly becoming more race-specific was functionally white-washed within the visual rhetoric of epidemic as constructed by the Planned Parenthood booklet. As I will show below, this gloss will continue to shape discourses of teen/unwed pregnancy and the interventions on the female body that are socially warranted or withheld.

\textit{The Pathology of Adolescence}

Planned Parenthood’s brochure apparently circulated widely and made an impression on readers because it was followed by a host of popular publications that reviewed the pamphlet’s findings and extended coverage of the “problem.” A range of 21 articles devoted to teen pregnancy—addressed to different audiences and published between 1976 and 1980—illustrate the attention the issue garnered at this time. These articles also demonstrate the extent to which a misunderstood and feared “problem” provoked a response that pivoted on rhetorics of blame that hampered responsive, responsible discussions within larger publics.

One commonality across a majority of the articles I examine here is a discussion of teen pregnancy being a legitimate problem and, frequently, this problem being described as an epidemic. Although the mention of unwed pregnancy is not uncommon in these pieces, the teenage mother is of primary focus. But despite relying on “factual” information about teen pregnancy—like that supplied by Planned Parenthood—and portraying a belief in the staggering rates of teen pregnancy, these articles simultaneously express a sense of bewilderment about how

\textsuperscript{77} My count is based on females who are seemingly the subject of the picture (e.g., they appear in the foreground and not in the background). A similar count of males in the brochure shows four males total: three males appear to be white and one male appears to be African-American.
or why teenagers could be having so much sex—sex, no less, that leads to pregnancy. An excerpt from Ebony illustrates this confusion:

behind the national statistics testifying to the proliferating number of adolescents giving births, a perplexing question remains unanswered: Why do teen-agers permit themselves to become pregnant? Why, in this age of easily available birth-control devices, do young Black girls and boys let their sexual activity lead to conception? (Slater 56; emphasis added).  

The bewilderment portrayed in the language above calls attention to itself, particularly when passages like these appear in close proximity to seemingly irrefutable statistical measurements of the national problem. This puzzled tone amplifies the threat of unspecified dangers if the epidemic is not managed.

Teen pregnancy, as a perplexing trend, is hardly more confusing than adolescence is, according to the logic of a number of the articles. As discussions of the social issue of teen pregnancy become interwoven with discussions of adolescence as a unique developmental stage, depictions of the “crisis” begin to adopt an inflection of disability. Adolescence-as-disability relies upon the idea that the teenage years are not just a transitional phase, but represent a time of incomplete identity and non-normalization. The 1970s witnessed an increasing circulation of narratives that rendered teens as “disabled subjects in need of rehabilitation” because of their status as being “always-already under development.” In such narratives, the process of coming-of-age represented not only adulthood (measured in years), but also, metaphorically, the ability

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78 This is one of the few articles that does openly acknowledge race, not surprising given Ebony’s claim to provide an “authoritative perspective on the Black-American community” (Ebony.com).
79 Julie Passanante Elman provides a overview of ABC’s After School Special programs, which offer salient and numerous examples of this teenage disability narrative.
to overcome the dis-abled, non-normative “teenage” state (Elman 267). This logic participates in the notion that “teenager” is an identity that is not only liminal, but also pathological—precisely because it is marked by non-conforming behavior (Nakkula and Toshalis 3). This pathology of adolescence, a notion advanced over a decade earlier by developmental psychologist Erik Erikson, emphasizes the universality of the identity crisis as a necessary step from immaturity to maturity (Erikson 125; Elman 265). Thus, teenage girls who become pregnant threaten to be arrested in their immature and disabled state. Or as one article suggests, such girls have “already achieved a kind of premature, stillborn adulthood” (“The Growing Problem” 53).

The teen (marked by lack), then, warrants the concern and/or fear of adults. Further, likening adolescence to disability (however indirectly) demonstrates an ableist orientation that values the “normalcy” of adulthood (Cherney 10). Such a position is exemplified in Callahan’s contribution to 11 Million Teenagers, in which he urges adults to recognize the “high price” that they are morally obliged to pay to teenagers. For Callahan, this means that adults should “help [teens] avoid those things we [adults] know will hurt them, help to reduce the impact of those acts (even of folly) which they have already done, help them in a word to make it through the teenage years with as little lasting harm as possible” (58).

My understanding of disability is shaped by Tobin Seibers, who argues that “Disability is not a physical or mental defect but a cultural and minority identity. To call disability an identity is to recognize that it is not a biological or natural property but an elastic social category both subject to social control and capable of effecting social change” (4). I contend that reading depictions of adolescence and teen pregnancy as disability rhetorics is fitting, given the physical and emotional crises evoked in these discussions of teenagers, and teen mothers’ subsequent positioning as those needing to be controlled, guided, and/or rehabilitated. A Nation article offers a rare example of a moment of normalizing discourse in relation to teens and the teen pregnancy situation. The article argues that “[t]een sexual irresponsibility reflects the sexual discomfort and frustration felt by most adults, 50 percent of whom are sexually ignorant and/or unsatisfied, according to an estimate by the sex research team of Masters and Johnson” (“Why Teenagers Get Pregnant” 552). This bridge between teen activities/knowledges and adult activities/knowledges is uncommon in other articles, which depict teens as representing a wholly unique identity category.
Penning a *Reader's Digest* editorial, Eunice Kennedy Shriver also invokes a sense of responsibility to teens—in part because of the pervasive notion that their identity is pathological. Shriver responds to another columnist who writes that “[s]hort of locking the entire teen-age population in their rooms, the only thing adults can do is help them avoid the most permanent and disastrous of consequences—pregnancy” (153). This depiction of adolescence as an abnormal and dangerous time that must be endured likewise advances the notion that adults must “help” teens endure the illness of this liminal age and suggests that teens’ danger lies in their sexual capacities and proclivities. Shriver finds these comments “shocking” and “demeaning” in part because they imply that teens “are without values (or that what sexual values they do hold are nothing more than raw pleasure principles)” (153). Yet Shriver’s perspective is unique among those featured in the articles examined here, for most of these depictions of teen pregnancy as a confounding social problem labor over the unknowability (and thus the non-normativity) of adolescence. These depictions of adolescence-as-disability share the notion that teenagers are irresponsible and, thus, innately dependent. As I will discuss in the next section, such dependency can be read positively or negatively but is consistently understood within an overarching narrative that values the nuclear family and sees variations of that kinship structure as a moral and economic threat.

*Identifying “Those” Kinds of Girls*

They are a different breed from their cliché counterparts of a generation ago: more sexually experienced at a younger age, better informed about birth control but not necessarily more concerned, and far less scandalized by pregnancy. And for all those reasons, they are a problem so serious that Planned Parenthood has described it as an “epidemic.” —Tony Schwartz, “Pregnant Teens”
Although adolescence is of great concern to “adult” readers grappling with the pregnancy issue, overwhelmingly teenage *girls* remain the primary focus of these articles. Most of the articles include an anthropological scrutiny of the young, unwed, pregnant mother, a misogynistic move that ultimately locates the “epidemic” on the female’s body, thus distancing it from the sex act (and thus ensuring that this is a teen *pregnancy* epidemic, not a teen *sex* epidemic). But within the epidemiological and pathologized frames described above, studying the female functions as a mere extension of the public health goal of curbing the epidemic. Thus, such scrutiny obscures its own patriarchal and ableist orientations, for as a technical (not moral) issue, teen pregnancy “compels analysis and requires knowledge of its fine structure” (Arney and Bergen 15).

An examination of these articles illuminates four patterns of applying *psogos* to teen girls who have sex and/or become pregnant: (1) girls are held to a sexual double standard whereby others (particularly sexual partners) are effectively absolved of responsibility to prevent pregnancy; (2) girls are depicted as being “ignorant” of their own bodies and reproductive capabilities; (3) girls are said to willfully become pregnant for dubious reasons; and (4) teen girls (as immature/undeveloped adults) are characterized as being abusive or neglectful mothers. All of these constructions figure teenage girls’ deficiency, thus indirectly holding them against a normative standard of “proper” girlhood that values sexual ignorance and (a)sexual innocence. Girls who deviate from this norm, as suggested in these articles, can be blamed for the epidemic, and locating blame aids in differentiating between those who are threatening and those who are threatened.

The sexual double standard circulates through depictions of the problem of teenage and unwed pregnancy, albeit in different ways than it had been applied in earlier years. By the late
1970s, birth control technologies were fairly well advanced, oral contraceptives having been researched and adapted based on concern about the Pill’s safety and side effects (Gibbs 45). According to the logic of the sexual double standard, women and girls of all ages were expected to assume primary responsibility for their fertility, now that the Pill was legally available to unmarried persons because of the Eisenstadt v. Baird ruling (discussed in chapter 4). Of course, accessibility to birth control remained a significant obstacle for many women. Issues of access, however, are secondary to rhetorics of blame primarily directed toward females. For example, 11 Million Teenagers includes a discussion entitled “Ignorance, Inaccessibility Main Reasons for Nonuse of Contraception,” but the contents of this section focus heavily on “teenagers’” lack of knowledge of effective contraceptive practices, especially the perception that “time of month, age, or infrequency of intercourse” make contraception “unnecessary.” The section concludes by stating, “Contrary to some conventional wisdom on the subject, only one in 15 [girls] said that they did not use contraception because they were trying to have a baby, and only one in 11 indicated that they wouldn’t mind getting pregnant” (30). Thus, the “conventional wisdom” about girls who get pregnant out of wedlock—that they are purposefully trying to do so and using (or not using) contraception strategically to that end—is not questioned, even though it is acknowledged as running counter to empirical data. Further, the description advances the notion that girls might not want to get pregnant, but it fails to address boys’ responsibility in obtaining and using contraception, much less the gendered power differentials perpetuated by notions of “proper,” female comportment. At best, girls are expected to guard their own fertility in order to civilize boys, who are under “a great deal of pressure” to “perform sexually to supposedly prove their manhood.” Thus, “girls can help show them that manhood can and does mean a lot of other things” (Wax 173). At worst, girls are expected to transcend overpowering
sexual encounters. One expert\textsuperscript{82} claims that “[m]any girls think it’s ‘all right’ to have sex if they have been seduced or overwhelmed,” and thus “they fail to prepare themselves.” According to this reasoning, any “failure” that results in teen pregnancy rests solely with girls who do not protect themselves. Such a response not only assumes that girls have access to methods of “preparation,” but also—and more problematically—ignores the gendered asymmetry of “seduction” and obscures a reference to rape with the euphemism “overwhelmed” (Naismith 152).

Some of the depictions of young, pregnant girls emphasize their “appalling ignorance” about “the basic facts of their reproductive systems” (Cherlin 729), locating deficiencies related to body knowledge and contraceptive technologies on the female, not on the technology or its dissemination. A 1978 McCall’s article discusses girls’ misinformation about risks related to the Pill and IUDs, additionally noting that “only” 41 percent of girls surveyed could correctly identify, according to the rhythm method of contraception, the time when they were least likely to conceive (“The Teen Pregnancy Epidemic” 45). Newsweek suggests that the “plague” of teen pregnancy stems from teens’ “confusion about what constitutes a sexual act” (Schwartz). Such statements demonstrate that measuring females’ knowledge is an accepted way of addressing this “plague” even though, as I argued earlier, teens are repeatedly rendered irresponsible and immature; indeed, discussions of the need for contraceptive technologies to evolve to better address the current “crisis” were all but absent from this discourse.

By focusing on girls’ ignorance, these discussions pay no attention to hard-won and recent advances in women’s knowledge about their bodies and reproductive technologies—epistemological inroads that resulted from the women’s health movement (described in chapter

\textsuperscript{82} Many of the articles quote individuals with an avowed knowledge of pregnant teenagers, such as psychologists, physicians, workers in teen pregnancy centers, researchers, etc. I use the term “expert” here in relation to how the articles solicit “expert” testimony from these individuals.
4). Given that the movement gained momentum only a few years earlier, teen girls’ ignorance about sex and their bodies is unsurprising. Nevertheless, the fear and misunderstanding exhibited by young, sexually active girls is depicted as an insufficiency of the group, rather than one implication of contraceptive technologies’ complex history, or worse, as a shameful marker of female ignorance. It is the doctor’s impatience with Terri’s ignorance that prompts him to ask her why she hadn’t come to see him earlier in her pregnancy in the story that opens this chapter; Terri’s ignorance creates an aperture for this question, which delivers shame, not information or assurance.

Another conclusion drawn by these articles is that girls “choose” to become pregnant because they are purposefully seeking motherhood. *Seventeen* magazine reports that birth control availability and education is of little concern to teen girls, who “deliberately” get pregnant (“The Teen Pregnancy Problem”). Another article cites a Los Angeles-based head obstetrician who argues that girls purposefully get pregnant in an effort to produce “a doll” that can serve as a “love object” or to retaliate against their parents (Slater 56). And the *Nation* opines:

> The teen years are frightening. The world looks huge, cruel and incomprehensible; the economy is in trouble and teens feel it directly in chronic unemployment or dead-end jobs. Becoming a parent is much easier and more fulfilling than finding work—any work, let alone meaningful, satisfying work. For many teens, a child gives them personal dignity, something to do with their lives, someone to love and someone to hold power over in a world where they feel powerless. (Castleman 551)

Whether these diagnoses suggest a professional psychological assessment or lay observations about the reasons why teen girls get pregnant, whether they suggest pity, empathy, or disdain,
they all ultimately participate in epideictic rhetorics of blame that hold girls culpable for their own ignorance or willful disobedience.

Not only do these depictions adopt a tone that chastises girls for their foolish ignorance or warn readers of girls’ childish self-interest (rather than troubled emotional well-being being used to elicit an ethic of care), some profiles emphasize the girls’ violent proclivities. One expert argues that with “rare exception,” young people are ill suited to parent and that this can lead to “outbursts of violence with the infants as the victim” (“Teens and Pregnancy” 30). In another article, the medical director of the New York Foundling Hospital, who is touted as being “a widely recognized expert in the field of child abuse,” claims that young, unwed mothers often “become saturated with a sense of desperation, alienation and anger” that “leads them” to abuse their child (“The Teenage Pregnancy Epidemic” 48). Again, one is reminded of Terri’s story, and Lisa’s confession of nearly abusing her child, which prompts Terri to recognize that she, too, could likely be a violent teen mother. Such depictions of teen mothers caricature them as uniformly grotesque and mentally unstable, an act of othering that suggests a pathology that can be diagnosed in/on the body.

Depictions of a scourge of teenage pregnancy brought about by ignorant, willful, and potentially violent girls assure that primary blame for this problem lies with the girls and their abnormality, rather than with cultural or social insufficiencies. Appearing within a larger narrative of teen pregnancy-as-epidemic, these constructions identify and articulate abnormality and thus align with Triechler’s argument that epidemic discourse is characterized by a “need for constant flight from sites of potential identity” with the disease-carrier that results in the “successive construction of new oppositions that will barricade self from non-self” (37). Thus,

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83 This “Dr.” is introduced as a “minister, counselor, and branch director for the American Institute of Family Relations in Los Angeles” (“Teens and Pregnancy” 25).
these “depictions” cultivate an epistemology of teen mothers as diagnosable, dangerous, and distinct from the rest of “us.”

*Placement Blame on Sex Education*

Although girls whose sexual activity resulted in a pregnancy were a focal point of discussions about the epidemic, rhetorics of blame frequently extended to public high schools, which, critics complained, failed to provide effective sex education. A few, tottering sex education programs were available to students in various schools across the U.S. by the early 1960s, but advocacy efforts to make such programs comprehensive were generally met with reticence or complete avoidance (Irvine, *Talk* 16). By 1978, schools in Hawaii, Kentucky, Maryland, Michigan, Missouri, and North Dakota required some form of sex education, Louisiana was the only state to specifically ban sex education in schools, and approximately 30 percent of public schools in other states provided some form of sex education (“The Teenage Pregnancy Epidemic” 49). But as with other education policy, there existed a great divide between what was required of schools and what schools delivered. The decision as to whether a school would provide sex education to students in most states rested with school boards, which typically resulted in “crippling restrictions” on what was being taught if not avoidance of the topic altogether (Lincoln 36). Extensive scholarship into the history of sex education programs explores this nuanced history in far greater detail than I present here;84 my intent is to highlight the reality of sex education’s patchy and largely ineffectual presence in public high schools by the late 1970s.

The rhetorics of blame present in many of the epidemic articles demonstrate that public perceptions about how all high schoolers were—or at least *should be*—receiving sex education

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84 For more information about the history of sex education, see: Freeman, Irvine, Luker, and Sauerteig and Davidson.
by the late 1970s veered sharply from the reality described above. Where sex education was being implemented, criticisms arose about programs discussing sex in decontextualized ways that rendered them ineffectual and uninteresting to students (Castleman 551). Nevertheless, a common refrain across many of the articles examined here is “What happened to sex education?” suggesting that the school administrators and teachers were expected to shoulder the responsibility of teaching teens about sex. A 1977 Reader’s Digest article poses the question rhetorically, for it goes on to provide a clear answer:

Obviously they [sex education classes] have failed—many of them ‘watered down’ or discontinued. Faulty presentation by inadequately trained teachers has contributed to the demise of some of the school programs. But the blame rests largely on the parents themselves. By going along with or encouraging restrictions of sex education and basic information on birth-control methods, parents have left their children wide open to the very dangers they hoped to prevent. (Naismith 152)

Such depictions imply that sex education, as a pedagogical pursuit, could and should serve as a panacea to problems of adolescent sexuality, and that blame rests with human actors who “fail” to enact this solution.

This fantasy of sex education producing swift, simple, and far-reaching results (whether that be teens having sex more “responsibly” or less frequently) masks the complexity of addressing teen pregnancy and reinforces the myth that it was a “problem” that could be solved with the right elixir. Here blame deflects attention from the nation’s cultural illiteracy about adolescent sex and allows blame to be projected onto others: teachers, school administrators, parents. Blame also deepens silences about sex that existed at this time. Many parents simply did
not want to talk to their children about the taboo subject of sex, and this reticence likely sheds light on why, according to a 1978 Gallup poll, 80 percent of Americans approved of schools teaching sex ed (Lincoln 36).

Assessing the “Cost” of Teen Pregnancy

We may be forced to decide whether for teen-age pregnancy $1 of prevention is not worth $100 of cure.
—Andrew Cherlin, “Teen-Age Pregnancy: Carter Half Sees the Problem”

Age functioned as a primary measure of problematic pregnancy in the late 1970s, but pregnant teens girls’ status as unwed mothers remained a concern, according to most of the articles surveyed here. Despite claims that the stigma of unwed pregnancy had dissipated, many of these articles reference teen mothers’ marital status and link unwed pregnancy with a mother and child’s reliance on welfare. Thus, along with other supposed abnormalities, teen mothers were frequently associated with unproductivity and dependency (in relation to society). For example, although such discussions frequently reference the unlikelihood that teen moms will graduate from high school, these references typically frame the dropout problem as one that contributes to a lack of job skills or general productivity. One article simply states, “[t]eenage mothers are less likely to be working and more likely to be on welfare than mothers who first give birth in their 20s” (Lincoln 36), while another purports that “[t]een mothers tend to drop out of high school and to survive on welfare,” adding that “[t]hey rarely develop marketable job skills” (Castleman 550). These references lament a lack of self-sufficiency and subsequently highlight teen mothers’ failure to fulfill a social obligation rather than critiquing social systems that force them to choose between being a mother and being a student.
By insisting that teen pregnancy frequently leads to welfare dependency, depictors of the epidemic also frame teen pregnancy as a problem that represents a quantifiable economic “burden.” According to the Reader’s Digest, “A teen-ager’s out-of-wedlock baby generally affects everyone who pays an income tax or sales tax.” This is because “[s]ociety spends an estimated $2250 each year to support a mother and one child on welfare—plus additional amounts for medical care, social-service workers, and aid to any other dependent children the mother may have” (Naismith 151). In another piece, Cornell University psychologist Urie Bronfenbenner laments that “[t]hese people [unwed mothers] are going to put a growing burden on our society, not only to sustain them but to repair the social and economic damage they do” (“Rising Concern” 59). Girls who have babies out-of-wedlock are girls who begin a “drift toward dependency” that ends up “cost[ing] taxpayers about 6 billion dollars a year in welfare payments” (“Rising Concern” 59). If the moral shame related to unwed pregnancy had at all subsided by the late 1970s, these statements demonstrate how a stigma of dependency, fueled by a politics of resentment, took its place.

Aligning unwed pregnancy with dependency did not, of course, reflect “mere” economic “realities”; instead, this dependency trope invoked a host of negative associations, all of which cast teen mothers as a deviation from and a detriment to the normative, able, and productive body. Nancy and Fraser and Linda Gordon trace a genealogy of the concept of dependency in U.S. history and argue that the notion of dependency is so shrouded in stigma that any adult who is not perceived to be an able worker “shoulders a heavier burden of self-justification” in our independence-obsessed culture (131-5). Additionally, dependency functions as a feminized and racialized term that has historically shifted back and forth between identifying an economic state and insinuating a “moral/psychological” deficiency (Fraser and Gordon 131-4).
Such connotations are intimately connected to discourses that affiliate black women with welfare dependency that had already been in wide circulation by the late 1970s, having gained traction through the dissemination of the so-called Moynihan report. In 1965, assistant secretary of labor Daniel Patrick Moynihan composed a memorandum for President Lyndon Johnson entitled “The Negro Family: The Case for National Action.” Intended to be a research report that would help shape Johnson’s War on Poverty, the document asserted that many “Negro” families were unstable, that urban centers were approaching “complete breakdown,” and that an abundance of female-headed families and illegitimate births within the “Negro” community was leading to a “startling increase in welfare dependency” (Moynihan; Gewertz). The report was leaked to the press and met with controversy and extensive media coverage (Gewertz).

Whatever the original intended audience and purpose of Moynihan’s report, its secondary, general audience would have heard similar themes emerging from Ronald Reagan’s speeches during the 1970s and 1980s. When campaigning for governor of California in 1970, Reagan promised to work toward eliminating welfare fraud, and by 1976 he started sharing an anecdote about a Chicago “welfare queen.” The story of this woman who gamed the welfare system in order to collect more benefits than she was due invoked racist sentiments and exploited a politics of resentment. The “welfare queen” trope, although offering no explicitly racial language, was often associated with an African-American woman, Linda Taylor, who was tried for welfare fraud in 1977 (Cannon 457). Popular among many audiences, the trope became exceedingly familiar and, according to political science scholar Ange-Marie Hancock, media depictions of the “welfare queen” consistently link her with “lack of industry and hyperfertility” (75). These depictions affirm Fraser and Gordon’s assertion that the poor, single mother has long been “enshrined as the quintessential ‘welfare dependent’” (134) as well as their claim that
African American women receiving public funds were thought to be “pathologically independent with respect to men and pathologically dependent with respect to government” (138). As Patricia Hill Collins argues, the African American “welfare mother” who is “typically portrayed as an unwed mother,” is a “woman alone” and thus her vilification “reinforces the dominant gender ideology positing that a woman’s true worth and financial security should occur through heterosexual marriage” (79).

The invocation of dependency in articles depicting pregnant, unwed, teenage girls operates within a double register. Specifically, dependency here evokes what Fraser and Gordon call the “bad, relief sense of dependency” but covertly promotes a “good, household sense of dependency” (134). In other words, dependency on welfare is maligned because it is thought to be a marker of individual deficiency rather than a necessity based on a variety of socio-economic factors (Fraser and Gordon 131). But hyperattention to teen pregnancy—an obsession that would, by the early 1980s, evolve into the notion of “children having children”—intimates that these girls deviated from a “proper” dependency on a male breadwinner, such as a father or a husband. “Good, household dependency” has a long history in the United States, and such notions were written into U.S. law well before the industrial revolution (Abramovitz 99). But the late 1970s represents a time when these two notions of dependency were undergoing significant change. Female dependency was not seriously and systematically questioned until earlier in the decade, when women’s movement leaders such as Kate Millett pointed to the family as the social instrument by which this inferiority was taught and perpetuated (Flippen 31).

As mentioned above, women’s increasing autonomy was thought by many to be contributing to a transformation of the American family, and for conservatives, especially, this change was unwelcome and fear producing. The late 1970s experienced a backlash against New
Deal and “Great Society” programs—programs whose spirit of extending public support to those in need replaced older methods of granting welfare entitlements only to women who passed “morals tests” proving that they were not sexually promiscuous (Gordon 298-301). The slow changes in efforts to “award” those who were found “deserving” of certain public entitlements meant that in later decades, single mothers were able to apply for welfare benefits. To some conservatives, this affordance suggested that these mothers were being rewarded for having non-traditional families. Thus, I argue that by the late 1970s, such conservatives experienced a crisis of authority in relation to patriarchal norms that upheld the value of female dependency on men and the supposed universality of the nuclear family. At the same time, neoliberalism—an ideology that espouses the benefits of unregulated, free markets and champions individual choice and economic growth—was gaining traction, particularly given Carter’s deregulation of the economy (Stuckey 78). According to Mary Stuckey, neoliberalism is also defined by a “belief in the market’s ability to replace society’s role in ethical decisions” (79-80). Thus, as the U.S. economy seemingly sputtered, these neoliberal ideas gained currency and the unwed, pregnant body became a visible symbol of “unhealthy” dependency at the same time that willful and ignorant teenage girls seemed to no longer hold themselves accountable to “good” female dependency. Thus, “dependency,” as the term circulates in these articles, is “overdetermined” insofar as it collapses these “multiple” and “contradictory” meanings into one word (Fraser and Gordon 123). The term would have resonated among various audiences that shared economic worries but represented an idea that was only associated with (not explicit about) race.

Additionally, just as the idea of chronic welfare dependency amplifies the fears related to teen pregnancy (fears that were increasingly linked to non-white, female bodies), so does the

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85 The notion of a “crisis of authority” in relation to the non-normative body is informed by Robert McRuer’s introduction to *Crip Theory: Cultural Signs of Queerness and Disability.*
configuration of girls as hyperdependent children evacuate the discussion of overt references to race while inviting a “benevolent” response on behalf of innocent, infantilized girls in need (See fig. 8). This response depends on teen girls’ sexuality being arrested and their reversion to a state of immaturity. As one child psychologist reports in Newsweek, “We must accept responsibility not only for the little girl’s child, but for the child in the little girl” (“Pregnant Teens”).

Fig. 8. A December 1985 cover of Time depicts an infantilized, pregnant girl.

By affiliating teen pregnancy with (pre)scripted “dependency”—a racially loaded term—discussions of teen mothers covertly reinforced the perceived link between unwed pregnancy, non-white girls, and overreliance on state resources. As this issue became increasingly public, (white and non-white) teen girls’ reproducing bodies teetered between good and bad notions of dependency, and the potential for their fertility to be a burden on the public good provided a
rationale for the what the public, then, was owed: a diagnosis of the problem of teen pregnancy and, more specifically, a diagnosis of the girls who were ultimately to blame for it.

Discussions of dependency appeared alongside other examples of psogos, in which girls were depicted as ignorant, willful, and/or pathologically violent. To a far lesser degree, sex education stakeholders were blamed for not having already solved the ostensibly “new” and emerging problem of teen pregnancy. Glaringly missing from these articles are discussions of abortion as part of the teen pregnancy landscape. Scattered and brief references suggest that abortion was not preferred by girls who insisted on keeping their child (Shriver, “A Surprising View” 100) or that it was thought to function as a publicly funded disincentive for women to practice other, “less-expensive forms of birth control” (Kasun 32). In short, the recent decriminalization of abortion remained in the background of discussions that highlight the kakoethos, or bad character, of pregnant girls who threatened to create an endless drain on public funds. With the idea of the epidemic firmly taking hold in the public’s mind, the Carter administration decided that an intervention was needed on behalf of the American family, the children of teen mothers, the mothers themselves, and—not least of all—the taxpayers who would finance the “cycles of dependency” that teen pregnancy created.

A Public Response: The AHSSPCA and Rhetorical Failure

“We are fully aware of the problems that surround a 15-year-old girl with a baby to care for. What we need to know is how to end these unwanted pregnancies.”
—Wyoming Senator Malcolm Wallop, 1978 Senate Hearing

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86 I am relying on rhetorical scholar Jenell Johnson’s theoretical use of the term kakoethos, which refers to the “bad character” or “anti-ethos” of a stigmatized person (463). Johnson provides an extended example of her use of this theoretical term in “The Skeleton on the Couch: The Eagleton Affair, Rhetorical Disability, and the Stigma of Mental Illness.”
“When it comes to reducing the teen pregnancy rate, the Department of Health, Education and Welfare appears to be as sophisticated as a 13-year-old girl who has just missed her period.”

— “Why Teenagers Get Pregnant”

In June 1978, Joseph Califano stood before a U.S. Senate committee, assuring his audience that “adolescent pregnancy is one of the most complex, persistent, and poignant problems facing our society today” (U.S. Senate 1978, 23). Califano headed the Department of Health, Education and Welfare (HEW)—a precursor to the Department of Health and Human Services and Department of Education, both of which would be created the following year. HEW had crafted a new bill—the Adolescent Health, Services, and Pregnancy Prevention and Care Act (AHSPPCA) of 1978—that sought to direct federal monies toward the problem of teen pregnancy, and Califano was its most ardent champion. With a proposed $60 million appropriation (in a time of austerity in many other areas of government spending), the bill was meant to prevent initial and repeat teenage pregnancies, provide care to pregnant teens, and “to help adolescents become productive independent contributors to family and community life” (U.S. House 1978, 2).

The AHSPPCA generated two sets of hearings in the House of Representatives and one hearing before the Senate Committee on Human Relations. Backed by the Kennedy Foundation, the AHSPPCA gathered support from a broad coalition of groups all committed to addressing teen pregnancy (Mittelstadt 330). The legislation proposed a wide range of potential services, including health, educational, vocational, and social services initiatives; as such, it was similar to other HEW-backed projects that had the capacity to burrow into the fabric of communities to address politically volatile public health and welfare issues. Califano recognized the long shadow of the organization and considered his work as HEW secretary to be second only to that of President Carter in having “the most power to affect the lives of Americans” (Califano 329). His
appointment by Carter riled feminists for just that reason, especially given Califano’s open opposition to abortion (Flippen 121-2).

The AHSPPCA represents the Carter administration’s most interventionist response to the supposed epidemic of teen pregnancy. Examination of Congressional testimony about the bill, as well as the legislation itself, demonstrates how this intervention did, indeed, tap into issues that were simultaneously social, economic, medical, and racial. The bill also represented an organized and extensive governmental response to the very problem that was making headlines across the nation. More, it made good on Carter’s declaration that teen pregnancy was a top priority on his domestic agenda (Mittelstadt 329). As such, the bill—and the more than 1,000 pages of Congressional testimony about it—presented an opportunity to shape a conversation about teen pregnancy that would not only result in the AHSPPCA passing through Congress but also its cultivating a mindful, robust response to the so-called epidemic. Although the AHSPPCA succeeded in obtaining a $60 million appropriation for fiscal year 1979, funding was not renewed. By 1981, the Adolescent Family Life Act (commonly referred to as the Chastity Act) became the new legislation for teen pregnancy intervention and ushered in an era dedicated to replacing sex education with abstinence-only education, halving the budget for this effort in the process (Mettelstadt 331; Valenti 111).

Insofar as the AHSPPCA hoped to stanch the epidemic of teen pregnancy, the bill’s short life suggests that this comprehensive executive and legislative effort was simply not successful. The AHSPPCA’s reliance on a rehabilitative framework promotes the productive (able) body as the benchmark toward which adolescents should strive and situates the pregnant, teenage body as

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87 Califano describes the issues taken up by the HEW to be “a tangled ball of tradition, morality, education, children, civil rights, dependency, illness, bussing, welfare, family life, drinking, drugging, smoking, mental health, teenage sex, disease, old age, and fear of dying.” Thus, he argues that the HEW “was the most politically treacherous institution inside the Washington beltway, pinching almost every exposed social, economic, medical and racial nerve in the nation” (Califano 329).
a threatening deviation from this norm. Thus, the AHSPPCA focuses on the *problem* of teen pregnancy and the *need* for a response to an epidemic (leveraging the metaphor’s inherent trafficking in fear of contagion and disease locatable on the body). In so doing, the AHSPPCA depends on rehabilitative discourses that perpetuates a myth: that the problem of unwed pregnancy can and should be fixed, and that such fixing should be directed at the non-normative, pregnant, teen body. Even though the AHSPPCA represented a unified, national response to teen pregnancy, it adheres to many of the rhetorical framings of the issue that were circulating in popular discourse. Specifically, the rhetorics of blame present in popular depictions of teen pregnancy are also present in the AHSPPCA, and Califano and other key speakers rely heavily on *psogos* when framing the bill and the Congressional hearings. This epideictic display of blame delimits the deliberative potential of the hearings, constraining an opportunity for dialogue by remaining fixated on the current epidemic instead of envisioning a realistic response to this complicated social “problem.” Fixating on the able and *productive* body while placing blame on the problematically *reproductive* body illuminates an obsession with “fixing” that, I argue, ultimately renders the testimony and subsequent bill only marginally successful.

Califano’s testimony before the Senate Committee on Human Relations presents the initial, and perhaps most fully articulated expression of HEW’s proposal to respond to the teen pregnancy. Early in Califano’s testimony, he lays out the significance of the bill:

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Teenage pregnancy—the entry into parenthood of individuals who barely are beyond childhood themselves—is one of the most serious and complex social problems facing our Nation today. For most of us, the birth of a child is an occasion of great joy and hope, and investment in the future, a consecration of life. But for hundreds of thousands of teenagers, particularly the majority who are
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unmarried, the birth of a child can usher in a dismal future of unemployment, poverty, family breakdown, emotional stress, dependency on public agencies, and health problems for mother and for child. (U.S. Senate 1978, 18)

This presentation of teen pregnancy as a dire social problem relies on some of the same language of failure, decline, and the drift toward dependency that circulated in popular discourses described above. It also affirms that marital status, along with age, contributes to this “most serious and complex” social problem.

Califano’s depiction explicitly locates this downward spiral on young, unwed mothers, suggesting that their pregnancy is a harbinger of perpetual failure and overreliance on the state. The language of the bill itself marshals existing anxieties about unwed pregnancy and reminds that nearly one million adolescents became pregnant in 1975. Further, the AHSPPCA claims that adolescent pregnancy is “often” responsible for “severe adverse health, social, and economic consequences” including

- a higher percentage of pregnancy and childbirth complications;
- a higher incidence of low birth weight babies;
- a higher frequency of developmental disabilities;
- higher infant mortality and morbidity;
- a decreased likelihood of completing schooling;
- a greater likelihood that adolescent marriage will end in divorce;
- and higher risks of unemployment and welfare dependency. (U.S. House 1978, 3)

Here, the adolescent body is a monstrosity88 because it is sexually mature but not mature enough to birth healthy, able-bodied babies. Not only is this liminal, pseudo-productive status of pregnant teen girls feared for its propensity to produce disabled babies, it is also anxiety-producing because of its reliance on public funds. Repeatedly, adolescent pregnancy is tagged as

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88 James C. Wilson and Cynthia Lewiecki-Wilson remind that we inherit the notion of the abnormal being “monstrous” from Aristotle (12).
being a risk factor for repeat pregnancies, which are threatening because they extend the dependency horizon and allude to indefinite cycles of poverty. According to this logic, unwed, pregnant girls not only deprive the nuclear family unit, but they are inadequate proto-citizens, as well. In short, they fail themselves, their children, their families, and the greater society who now has to bear a burden for their reproductive actions.

The AHSPPCA aimed to bolster a variety of services to teens in order to “prevent unwanted early and repeat pregnancies and to help adolescents become productive independent contributors to family and community life.” (U.S. House 1978, 4) The need for this governmental intervention was the lack of or insufficiency of existing efforts to curb teen pregnancy, and the subsequent “limited effectiveness in preventing pregnancies and future welfare dependency” (U.S. House 1978, 4). According to the bill, HEW will grant monies to local-level agencies that provide “comprehensive” services, with priority given to any “area” with high rates of adolescent pregnancy and/or a large population of low income families with minimal access to “pregnancy related services” (U.S. House 1978, 6-8). Funds might be granted to any number of community-led, “comprehensive” efforts geared toward stemming the tide of adolescent pregnancy, such as family planning services, vocational counseling, educational services to help pregnant students stay in school, mental health counseling, and nutritional services (U.S.House 1978, 11). Any funds provided would not be available beyond a five-year horizon, and reporting requirements include stating the impact the funded service has had on “reducing the rate of first and repeat pregnancies among adolescents, and the effect on factors usually associated with welfare dependency” (U.S. House 1978, 12-3).
Teen Pregnancy: A Fixable Problem

As I have suggested above, the language of the AHSPPCA centers on perpetuating the notion that there is an adolescent pregnancy epidemic and suggesting that funds, to be granted to community agencies, will enable these organizations to fix the problem. Califano’s testimony, which opens the Senate hearing and one of the two House of Representative committee hearings on the bill, introduces the AHSPPCA as a desperately needed intervention that has the power to stop sexually inappropriate adolescent reproductive bodies. The problematic reproductive body that Califano calls attention to in Senate testimony is that of the teenage girl. In explaining the “dimensions of the teenage pregnancy problem in America,” Califano points to the decline in the age of puberty, but only reports this decline in relation to girls. “The average age of puberty in the United States today is 12.8 years for girls, but about 13 percent puberty at age 11 or younger,” the Secretary warns, adding that this means that “some children reach puberty by the fifth grade” (U.S. Senate 1978, 19). By using the average age of female menstruation to measure the “dimension” of teen pregnancy, Califano positions the adolescent female body at the center of this crisis.

Because the problem of teen pregnancy is repeatedly localized onto the pregnant girl’s body (even though Califano and others periodically note its larger social reach), solving the problem can and does assume a rehabilitative tenor. Oriented to resolution rather than accommodation, this approach decontextualizes the various forces contributing to teen pregnancy and places ultimate responsibility for recuperation on the girls themselves, demanding self-regulation while espousing a “comprehensive” solution. Thus, the testimony is framed as an opportunity to move efficiently toward outcomes instead of truly dwelling in the complexity of teen pregnancy (the complexity of the issue frequently being attributed to its having reached
epidemic proportions). For example, Senator Harrison Williams welcomes Califano to open the “journey” of the testimony, adding that he hopes that the journey “will not be a long one, to congressional action in this area of great concern” (U.S. Senate 1978, 17). Also rhetorically constructing the testimony as an exhibition of solution-based approaches, Senator Edward Kennedy, the bill’s sponsor, explains that to the Senate committee that

[w]e will hear why even when family planning services are available to teenagers, some utilize these services and others do not. We will hear why so many young girls, who are still children themselves, become pregnant a second, third, or fourth time, and we will hear how comprehensive adolescent pregnancy care centers have been successful at preventing these tragic repeat pregnancies (U.S. Senate 1978, 42).

Kennedy’s anaphora argues that explanations and solutions are already at hand, and that the testimony only need move, linearly, toward the enactment of the AHSPPCA. Similar to the story of Terri that opened this chapter, this rehabilitative frame relies on the economy of a problem-solution conceptualization that moves past the systematic injustices manifest on the unwed, teen body in order to assure that the disability of teen pregnancy can be overcome.

Such assuredness notwithstanding, the AHSPPCA and its backers fail to deliver on this rehabilitative framing. Perhaps most interesting, though, is how testimony before the House Committee on Education and Labor illustrates witnesses’ attempts to call attention to the rhetoricity of this rehabilitation framing. Chris Mooney, who identifies herself as a director of a program for young mothers and as a former “young student mother myself,” proposes that abortion be addressed more fully in the bill, since abortion functions as a viable option for many pregnant teens who find their situation “such a difficult road to travel” (U.S. House 1978, 57-8)
Mooney reminds that the freedom of choice should include the option of keeping a child, and she urges committee members to consider how “by making remaining pregnant such a difficult option, we are abridging this freedom for many young women” (U.S. House 1978, 58). Critiquing the bill’s emphasis on providing contraceptives to teens, a solution that she notes is not supported by research, Mooney advocates further study with the hope that new “approaches” (not solutions) might be developed (60). Perhaps most tellingly, Mooney ends her testimony with her “greatest concern,” which is that the problem is being approached “overzealously—as if we were ‘stamping out’ an infectious disease.” Reframing the “problem” entirely, Mooney offers that “[p]regnancy is a normal outcome of normal sexual activity. Teens need to see their procreative abilities as a wonderful, powerful gift which must be intelligently used in the context of their goals in life” (60). Mooney thus illuminates how the threat of “teen pregnancy” hinges on the construction of unnatural, exceptional bodies. Borrowing Rosemarie Garland-Thompson’s definition of disability as “a pervasive cultural system that stigmatizes certain kinds of bodily variations” (“Integrating” 17), it is fair to say that Mooney also suggests that pregnant, teen bodies are rendered disabled by this framing, as well.

Also shedding doubt on the supposed problem-solving capabilities of the AHSSPCA is Karen Mulhauser, then-Executive Director of the National Abortion Rights Action League (NARAL). Mulhauser contends that the bill and Califano’s testimony both are “exceedingly ambiguous” about the AHSSPCA’s priorities, which is particularly problematic given that the requested allocation remains “very small when put against the general purposes of the bill” (U.S. House 1978, 117). In addition to critiquing the frequently referenced, yet undefined term “comprehensive services,” Mulhauser also calls attention to the fact that the bill wholly fails to address “the involvement or responsibility of the adolescent male” in relation to this “dire”
problem (U.S. House 1978, 118). Arguing that Califano’s testimony focused on discussing the
*problem* of teenage pregnancy at the expense of the “actual content of this bill,” Mulhauser
concludes that the AHSPPCA is problematic precisely because it “has tried to be all things to all
people” (U.S. House 1978, 199).

Attending to the internal contradictions of the bill and its presentation to Congress helps
make salient one important way in which the rhetoric of the AHSPPCA failed to take advantage
of an opportunity to reframe and meaningfully respond to teen pregnancy. First, I argue that the
AHSPPCA hinges on rhetorical depictions of constrained teen bodies despite its reliance on the
*idea* of self-actualizing rehabilitation. Mulhauser, for example, notes how the bill limits the range
of possibilities of the teenage mother, a limitation that aligns with the deterministic language
mentioned in the articles discussed above. Specifically, Mulhauser argues that according to
Califano, “90 percent of the life script for a teenage mother [is] already written for her” (U.S.
House 1978, 119). Laying bare the AHSPPCA’s “bitterly ironic” logic, Mulhauser explains that
the proposed intervention is based on a linkage between teen pregnancy and “pervasive social
problems” but completely eschews a discussion of “abortion or access to a full range of
alternatives counseling” (U.S. House 1978, 119). More important than wanting to add abortion to
the parameters of the bill, Mulhauser’s observation exposes how pregnant, teen bodies are the
focus of this intervention, but seem to function as part of a goal that places constraints on what
their pregnancy can and should mean. In Mulhauser’s opinion, “To be provided with full
information about all options available so that the pregnant teenager can make her own choice is
the only fair way to deal with a situation which, as even the Secretary has testified, can be totally
devastating to her life and future” (U.S. House 1978, 119).
The irony that Mulhauser makes salient suggests that the AHSPPPCA actually attempts to preserve a compulsory notion of “normal” sexuality within marriage. The bill assumes a rehabilitative approach to teen pregnancy because, as an expression of compulsory pregnancy within marriage, it cannot embrace the normalcy of a spectrum of iterations of pregnancy that includes the unwed, teen mother. Robert McRuer argues that this type of compulsion uses the “appearance of choice” to veil a “system in which there actually is no choice” (7). Thus, while the AHSPPPCA seems to advocate a plan for working with teen mothers as they assess their options during and after their pregnancy, it actually constrains these options. In so doing, the bill indirectly promotes the “propriety” of the traditional, nuclear family.

Dependency and the Threat of the Unproductive, Reproductive Body

Similar to what appears in other descriptions of teen and unwed pregnancy, the refrain that teenage mothers are destined to be dependent on welfare is written into the AHSPPPCA and peppered throughout the House and Senate testimonies. Kennedy, for example, contends that teenage pregnancy “imposes a terrible burden on the girl, as well as a social burden on society” because “for over half these girls, the birth of a child begins a cycle of dependency upon public welfare” (U.S. Senate 1978, 42). The senator adds that the bill makes sense “from a dollars-and-cents point of view,” because it is meant to keep “young people away from the dependency on the community in terms of welfare of other social services” and will “permi[t] them to gain employment or to continue employment” (U.S. Senate 1978, 41).

But even after taking this position of advocacy, Kennedy asks Califano to make a stronger case for the funding request, hinting at the issue’s intersection with race- and class-
based prejudices. Kennedy’s is a lone voice in gesturing toward the volatile intersection of race, class, entitlement, and sexual propriety:

I think what has to be on the minds of an awful lot of Americans, is how can we [. . .] think about a new program that is targeted on people who are generally the poorest people in our society, and in the lower socioeconomic range of our system. This, of course, does happen to others in the higher incomes but generally what we are talking about are children of welfare mothers. The attitude that is abroad, at least in some parts of the country, is that this particular group of young teenagers—perhaps some people in middle America question their moral values or standards. (U.S. Senate 1978, 44).

In response, Califano insists that, above all else, this is an economic matter, and diverting money to a solution “will save this country not simply untold human suffering, but tremendous amounts of money over time” (U.S. Senate 1978, 44).

As I argue above, leveraging the image of the culpable, pregnant, female body makes this “problem” locatable, a rhetorical boon to anyone trying to justify a funding appropriation in lean economic times. But more than just minimizing the complexity of teen pregnancy, Califano also deflects the stickiness of racial and conservative backlash politics that are present during the late 1970s. In so doing, the discourse of the AHSPPCA entrenches itself further in assigning value to the able, productive body and proclaiming the social liability of a non-racialized, non-classed, but nevertheless non-normative young, pregnant, unwed body. The portability of the body metaphor (an analog that shuttles from the physical body to the body politic) and its ability to marshal support for this legislation is illustrated as Califano continues:
[Teenage pregnancy] tremendously scars the individual girls. It scars her in human terms, obviously, but in economic terms, she becomes less productive for our society; she as much more difficulty getting employment; there is a much higher unemployment rate among girls who have babies, and they earn much less over the course of their lives. So I think this investment—a relatively modest additional and initial investment—that we are suggesting of $60 million in a new program will pay enormous dividends for the American people (U.S. Senate 1978, 45).

Figuring the maternal body as the site of production and reproduction (for the sake of production), as Califano does here, reduces the woman to her womb and upholds a patriarchal valuation of woman’s laboring, reproductive capacity (Walker 137). Thus, an overarching goal of the AHSPPCA is not to better learn about, understand, or respond to unwed pregnancy comprehensively, in its various, localized iterations, but to supplant welfare dependent bodies with productive ones. Thus, even as an initiative backed by the Carter administration, the AHSPPCA rhetorically exhibits an allegiance to abel, patriarchal, and conservative orientations. Such a position might have appealed to a variety of members of Congress who wanted to see rates of teen pregnancy decline, and may well have resonated with neoconservatives who, in the 1970s, were advocating antistatism and the market’s ability to be a moralizing agent (Schäfer 127). This perspective also helps to explain Eunice Kennedy Shriver’s insistence that she and other AHSPPCA supporters are “not just trying to get [girls] back to school, and we will. We are not just trying to get them into jobs, and we will. We are trying to encourage them to respect themselves and to understand their obligations to society” (U.S. Senate 1978, 115).
The discourse emerging from the Congressional testimony over the AHSPPCA suggests that the bill retained much of the *psogos* rhetoric present in the other, popular publications described above. The bill also amplified the perceived association between unwed, pregnant bodies and disability, suggesting that pregnant teenage girls have failed to capitulate to a state-sanctioned use of their reproductive capacity. By ever returning to the culpability and failures of teenage girls, the AHSPPCA hearings—hearings meant to foster a robust understanding of and response to teenage pregnancy—are compromised by their own reliance on rhetorics of blame.

By limiting discussions of the AHSPPCA to the epideictic, the bill’s proponents cordoned off opportunities for moving beyond blame, identifying with pregnant teenage girls, and re-visioning ways to address teen pregnancy (even when witnesses, like Mooney, introduce generative, counter-approaches that reconceptualize the situation). Epideictic rhetoric refers to oratory of display that focuses on the present and amplifies “the virtue or vice” of a current situation (Rountree, “Blameless” 296; Sullivan 230). Epideictic typically addresses the orthodoxies and heresies of a culture and, in so doing, articulates the boundaries between “us” and “them.” Rather than making a reasoned argument or introducing audiences to unfamiliar information, epideictic reinforces what an audience already believes about itself (Sullivan 231-3). Thus, as a discourse of “conformity,” epideictic, by definition, deepens a sense of identification among hearers (by praising those like them and/or blaming those unlike them) and dissuades dissent over the speaker’s valuations (Murphy 72; Sheard 766).

Because of these characteristics, epideictic is considered a particularly fitting style “for addressing private and public dis-ease” and discomfort with the status quo (Sheard 766), but an inappropriate or ineffectual type of rhetoric for moving audiences to make decisions (Hauser 15).
Epideictic’s attention to *doxa* ensures that it references abstract, transcendent ideas of a community but not necessarily factual claims grounded in material realities (Sheard 774).

My overview of the AHSPPCA demonstrates that the bill and related testimony relied almost exclusively on fatalistic depictions of teenage pregnancy as a gateway to personal failure, an instance of *psogos* that resonated with the existing, circulating defamation of sexually active teen girls. This rhetoric tapped into assumptions that *good girls* should remain chaste until marriage and that this decision would allow them to preserve themselves to be good and productive wives and mothers within marriage. Thus, the bill upheld the same seemingly universal truths that President Carter advocated in an attempt to draw together a factious nation: the value of “the family” and the indisputable worth of able and productive American bodies. At the same time, it muffled discourse about more politically divisive aspects of teen pregnancy, such as the availability of abortion and the supposed asymmetrical distribution of cases of teen/unwed pregnancy across races and classes (a trend that was alternately acknowledged and denied). Although the AHSPPCA seemed to frame teen pregnancy as an economic, technological, and educational issue (rather than a moralistic one), its failure to ultimately move past blame is illustrated in the epigraph of this section. Two months after the bill was originally discussed, the Senate revisited the AHSPPCA’s proposal and decided that more information about the issue of teen pregnancy was needed—that discussions of solving the problem had not yet produced a satisfying remedy. Senator Malcolm Wallop argued for increased research, noting “We are fully aware of the problems that surround a 15-year-old girl with a baby to care for. What we need to know is how to end these unwanted pregnancies” (U.S. Senate 1978, 32544; emphasis added). Wallop’s statement demonstrates that the teenage girl had served as the primary focus of discussion, and that “expert” testimony functioned to bolster what adults were
“fully aware” of already, upholding preconceptions about these girls that listeners already agreed about rather than introducing new information.

Amid all of the testimony about the AHSPPCA, most of the voices asked to report on teen pregnancy were “expert” witnesses—medical professionals, researchers, or individuals who worked at pregnancy outreach centers. The Senate hearing did include a “teen panel” of four women who talked about their experience as teenagers. One of the women never became pregnant, but discussed her experience going to a local clinic to receive contraception to prevent pregnancy (and thus fulfilling her obligation as a sexually active teenage girl) (U.S. Senate 1978, 137). The other three witnesses on the panel had had a child during their teenage years. The first of these witnesses married her boyfriend and identified herself as a “wife and mother” (U.S. Senate 1978, 126). Another witness gave her child up for adoption and when asked by senators about her marital and work status admitted to not being married but working for the HEW (for which she was congratulated) (U.S. Senate 1978, 133). A third woman, Valerie Kee, testified about her decision to keep her child, stating that she “planned” to have a child as a teenager but did not know how hard it would be to raise this child on her own. Her testimony emphasizes how she was and still is largely dependent up on the Johns Hopkins Center (for teenage mothers). Kee stresses that although she was not prepared to have a child, she “was not dumb” because she “knew there was somebody out there that had some backbone” and would offer to help her (U.S. Senate 1978, 136). Throughout her short testimony, Kee returns to the notion that teenagers who don’t have support from places like Johns Hopkins are “lost” (not simply in need of support), reinforcing her perception that an intelligent young mother is someone who understands her inherent lack of orientation and identifies an agency that will help her “find” her way through the predicament of teen pregnancy (U.S. Senate 1978, 136). This “panel of teens” ultimately
reinforces the goals of the bill as it has been crafted, and the questions they received from senators (e.g., “[H]ave you since married?” “Are you working now?”) underscore the shared values of marriage and productivity that inform this proceeding (U.S. Senate 1978, 133).

Cynthia Miecznikowski Sheard contends that epideictic can be an “open” rhetoric, moving “beyond praise and blame” if it concerns itself with the real as well as the “fictive or imaginary—what might be.” Such a move enables listeners to extend current beliefs and “envision possible, new, or at least different worlds” (770). Unfortunately, HEW and Congress did not extend their discussion to how teen pregnancy might be differently understood—perhaps, for example, as an area of concern that implicates males and females, adults and teenagers equally, or as a social issue that needed to be more fully understood in relation to other shifts in kinship relations. Perhaps most importantly, these discussions insisted, directly and indirectly, that teen/unwed pregnancy was unnatural, an abomination and a threat to universal values. Thus, the AHSPPCA remained tethered to the closed epideictic of psogos that perpetually rendered unwed, pregnant teenage girls “other” and, thus, deficient, their stigmatized bodies the proof of America’s declension from the cherished institution of the nuclear family.

**Conclusion: Teen Pregnancy, From Public Fear to Private Problem**

The dilemma of being young, unmarried and pregnant affects literally millions of young girls from all levels of society—low to upper income, inner city to rural, white to minority. But every girl who finds herself pregnant lives her own private drama of mental, physical and emotional strain and faces the same choices—Judi Marks, “Teens and Pregnancy: No Easy Answers” 89

The late 1970s represent a moment of unparalleled national concern and public discourse related to problematic pregnancy and, thus, an opportunity to (re)shape a national conversation about this public issue in meaningful and constructive ways. Instead, 1976 to 1980 are years of

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89 Emphasis added.
rhetorical failure in public discussions about helping teen mothers because these discourses ultimately make indirect and overdetermined ontological claims that positioned these girls as irredeemably different than the “normal” public and, subsequently, always at odds with public values and goals. At a time when the a number of Americans believed that the American family was in crisis, the idea of “fixing” a teen pregnancy “problem” seemed to be of unquestionable value. As Eunice Kennedy Shriver told the Senate in her testimony on behalf of the AHSPPCA:

I ask only that you think of this legislation as an essential part of our national commitment to family-building and family-renewal: to the creation of the physical, emotional, and spiritual environment in which the birth of a child and the creation of a family are treated with the respect and reverence they deserve. . . . This troubled, fragile, yet most indispensable of all our human resources is yours to protect. (U.S. Senate 1879, 125).

Ableist and patriarchal notions that teen pregnancy was a marker of a national crisis of the family were in such wide circulation by the late 1970s, that appeals for a national intervention program leveraged them in order to muster support in Congress, even though this strategy established strict parameters around how to define the “problem” and, thus, how to respond to it.

The discourses of the late 1970s represent a critical rhetorical moment in the history of unwed pregnancy in the United States, and I argue that this moment of rhetorical failure is responsible for a legacy of psogos that deplores unwed pregnancy as lamentable and pins culpability for unwed pregnancy on women and girls who get pregnant. After Carter lost his reelection bid, Ronald Reagan led the nation into an era of heightened neo-conservatism. In terms of women’s reproductive rights, conservatives had been gathering support during the late 1970s for passage of the Hyde Amendment, which ended Medicare funding for abortions.
Attached as an appropriations rider, the Hyde Amendment (1977) was seen by many to be a backlash against the decriminalization of *Roe v. Wade* and an injustice to poor women who were punished for having a child outside of marriage and relying on federal funds to get an abortion. The Hyde Amendment was challenged in 1979 by the Supreme Court case, *Harris v. McRae*, which upheld it as constitutional. Justice Thurgood Marshall dissented this decision, arguing that it marked “a retreat from *Roe v. Wade* and represents a cruel blow to the most powerless members of our society” (*Harris v. McRae* 1979, 338). Writing in 1981, Angela Y. Davis notes that despite the Hyde Amendment defunding poor women’s access to abortion, the nation still funded surgical sterilizations, funded by the HEW, resulting in an increasing number of poor women having “been forced to opt for permanent infertility” (206). These decisions suggest that the interests of middle- and upper-class Americans—and notions of sexual propriety within marriage—came before the rights of poor and unwed, pregnant women.

Additionally, by 1981, the Adolescent Family Life Act (AFLA) was passed, a “highly controversial” bill that aimed to prevent teen pregnancy and promoted abstinence (over sex education) among teens as well as adoption over abortion (Levesque 67). The AFLA is described by sociologist Janice M. Irvine as a “national project to establish chastity among youth,” because as the “prized child of Reagan’s first term,” the bill set itself apart from other programs focusing on contraception. Instead, AFLA supporters deemed the act to be different from the existing programs in its interest in championing “chastity” and “morality” (*Talk* 90). Thus, the silence and shame of unwed sexuality, especially among the ever-more infantilized “babies having babies,” began to return, casting a shadow over discussions of sexuality that can be felt even today.90

90 The popularity of the term “babies having babies” in the 1980s is suggested by several artistic productions. In 1986, Martin Sheen directed a “CBS Schoolbreak Special” that adapted Jeffrey Auerbach and Kathryn
Thus, at the dawn of the 1980s, Terri, the unwed, pregnant teen from *Good Housekeeping* described at the beginning of this chapter, had less chance of receiving support from an organization intent on understanding her position as a young mother-to-be, navigating a host of choices. Instead, she was guilted by the adults around her and eventually “rehabilitated” through a private exchange with another teen mother who learned to secret her shameful past, and surrender her child, in order to redeem herself. If Terri is, indeed, meant to represent any American girl, then her story suggests that any girl should recognize the danger of unwed pregnancy and its ability to mark personal failure. Thus, the legacy of silence, secrets, and shame attached to unwed pregnancy undergirded national discourses that shaped a time when America had allegedly moved beyond the stigma of unwed pregnancy. The rhetorical failure of these discourses also assures that such stigma marked a privatized burden localized on the pregnant body—a development that shapes public perceptions of teen/unwed pregnancy even today.

Montgomery’s published play “Babies Having Babies.” (Margulies). Additionally, in 1988, R and B artist Terry Tate released the single “Babies Having Babies.”
CHAPTER SIX

Concluding Thoughts: Puncturing Silences, Disclosing Secrets, and Extending Conversations about Unwed Pregnancy

The experience of motherhood by women—both mothers and daughters—is only beginning to be described by women themselves.

When I started this project, I knew that I wanted to listen to and learn from the stories of women who went away to maternity homes in the United States during the middle of the twentieth century. It was difficult to know what I would find along my research journey because I first needed to trace the contour of an absence, a history of silence that was silenced and, to a large extent, still resides in silence. As I listened, read, and learned, I realized that accounting for experiences of silence and erasure that resulted in so many women being shamed into denying their own motherhood was an important part of this historiographic effort. The other part would be overturning several myths suggesting that the hiding and shaming of unwed mothers dissolved away or was legally and politically upended during the 1970s, as women’s lives changed more generally. Thus, I set about asking how the rhetorics of the 1960s and 1970s configures (and reconfigured) the “problem” of unwed pregnancy, shaped the material realities of unwed mothers at the time, and continue to inform public notions of unwed motherhood as an identity category.

The answer to my critical question, then, is two-fold: historiographic and rhetorical. First, this project constructs an historiography, based on interviews as well as archival, primary, and secondary sources, of unwed pregnancy during two volatile decades during the twentieth century. As an historiography, the project recovers voices of women who hid an unwed pregnancy and overturns three myths about the so-call end of the era of hiding and surrender:
that unwed mothers no longer needed to hide because of (1) a new permissiveness that alleviated the shame and stigma of unwed pregnancy, (2) the development of the birth-control Pill, and (3) the decriminalization of abortion with the U.S. Supreme Court ruling on *Roe v. Wade*. Second, using this historiography, the project also functions as a case study of how a biological occurrence (pregnancy), when taking place outside of a value-laden social institution (marriage), is constructed as a “problem,” and how that “problem” is reshaped rhetorically, as social and political contexts change. The overarching conclusion that I draw from this case study is that the rhetorical history of unwed pregnancy is one of silences, secrets, shame, and blame. As this case study suggests, when silences related to discounted bodies are upheld by rhetorics of shame and stigma, the breaking apart of that silence—the “going public” of a once-repressed social issue—is a slow and uneven process that continues to implicate and constrain those bodies. Shame and stigma might be reconfigured, even lessened, but they do not disappear, even when silence is publicly ruptured, and discourses of tolerance and agency seem to supplant fear and secrets.

**A Tale of Two Eras: Revisioning Unwed Pregnancy Since 1960**

In the 1960s, at the apex of the hiding and surrender years, unwed mothers were bound by what I call an architecture of silence. This silence rendered these mothers nearly resourceless and functionally unable to resist a coordinated plan to meant to (1) erase their pregnancy, (2) “unburden” them (and their families) of an “illegitimate” child who would be adopted into a two-parent family, and (3) deny their identity as mothers. This plan was enabled by a host of mechanisms including rhetorics of shame, scapegoating, stigma, and secret-keeping, all of which contributed to this architecture of silence.
Despite the power of this architecture of silence to uphold practices of hiding and identity erasure, its secrets were bound to rupture. They did so during the years of supposed silence, as hiding functioned as a public secret. But the private, familial quandary of unwed pregnancy would begin to shift and become a more public concern by the early 1970s, when unwed, pregnant girls, for example, went to court, challenging school authorities who dismissed them summarily on the basis of a pregnancy, confirmed or rumored. Such agitation served as a precursor to legislation that would mandate the end of such practices. But early legal discourses reveal a lingering, visually amplified stigma about the unwed, pregnant body that counters claims that this stigma dissipated in the early 1970s. And legislative rhetorics of tolerance, though meant to relieve injustice, classified unwed pregnancy as a temporary disability. As a consequence, the unwed, pregnant body, rather than the student-as-mother, became the primary focus of intervention efforts, thus reinforcing notions of difference and abnormality.

Along with the myth of new permissiveness, the advent of the birth-control Pill and the 1973 U.S. Supreme Court ruling on Roe v. Wade have been identified as drawing the hiding and surrender years to a close. But not only were women still “going away” well into the 1970s and later, neither the Pill or the Roe ruling ensured equitable, accessible, safe, and (morally and religiously) feasible avenues for avoiding or dealing with pregnancy outside of wedlock. This misremembering thus exaggerates women’s ability to exercise power over their own reproduction within a landscape where patriarchal control was still alive and well. In reassessing how the concept of agency functions within the narratives of unwed pregnancy in the era of the Pill and Roe, I demonstrate the value of giving greater attention to women-led literacy efforts that helped women break from pervasive rhetorics of shame and ignorance about their sexual bodies, attitudes, and choices.
By the later 1970s, the public faced the realization that despite changing attitudes, developing birth-control technologies, and more open, legal avenues to abortion, the problem of unwed pregnancy still had not gone away. Although outwardly the moral judgment of pregnancy outside of marriage seemed to have lessened, by the final years of the decade, the problem took yet another shape—that of a public health threat. With age as the new barometer for measuring the acceptability of pregnancy, “unwed pregnancy” became “teen pregnancy.” As a public health threat, “teen pregnancy” was a new issue, supposedly having reached epidemic proportions. But the scientific, apodictic rhetoric used to explain why teen pregnancy was such a threat to the public good largely relied on the familiar, pathologizing tropes of earlier times, locating blame primarily on young, pregnant mothers. A Carter administration-backed attempt to address teen pregnancy functioned as the most public expression of what was increasingly labeled a public problem. But days of Congressional testimony yielded little more than epideictic rhetorics of blame that implied that women having children outside of marriage and at a young age were irresponsible, especially because their reproductive capacity was not used productively, in service of society. Instead, teen pregnancy threatened to create cycles of dependence on the state. By the end of the 1970s, the shame and stigma of unwed pregnancy was thought to have been long gone. America, then, set out to solve the public health problem of unwed pregnancy amongst teenagers, but the nation failed to produce a rhetoric that could break free from its hypochondriacal and shame-inflected view of the pregnant, unwed body.

The sheer scope of those touched by unwed pregnancy, as well as the relationship between unwed pregnancy and watershed moments in recent women’s history warrants this project, which sheds light on relatively recent practices that remain largely unexamined. As an extension of the scholarship that has investigated histories of unwed pregnancy in the U.S., this
project demonstrates that the dominant narratives of the era of hiding and surrender perpetuate oversimplified and problematic explanations of change. As a way of building upon the work of other scholars who value the recovery of these silenced histories, I needed to continue to ask when and why discourses and practices did change, and when and why they did not. In so doing, I have been able to more fully account for how rhetorical practices historically related to unwed pregnancy (one area of feminist scholarship) function as antecedents to later rhetorics of teen pregnancy (another area of feminist scholarship). In short, I have tried to demonstrate that seemingly disparate areas of inquiry about women’s history can and should be in conversation with one another.

As the overview above illustrates, the rhetorics surrounding unwed pregnancy during the eras of hiding and surrender and the long 1970s shifted to meet the demands of rapidly changing rhetorical situations. But what did not change was the way in which these rhetorical depictions always rendered unwed pregnancy to be some sort of problem, albeit a problem differently defined at various times. I argue that this problematic view of unwed pregnancy, later teen pregnancy, is persistently focused on the body as a site of deviance and abnormality. What is ironic about discursively rendering unwed or teen pregnancy as primarily problematic is that such a depiction renders the biological reality of the body irrelevant. Said another way, what stops us from naturalizing unwed or teen pregnancy, given the fact that such “conditions” are only possible given the natural capabilities of the human body? A discussion of biological drive is largely missing from these conversations. An historical and cultural obsession with sexual norms and the rhetorical performance of pregnancy as it is socially sanctioned overrides the ability to talk about such forms of pregnancy as natural, and contextual, even if not always ideal or desirable. This cultural habituation toward viewing unwed- or teen-pregnancy-as-problem
functions as what Kenneth Burke describes as a “trained incapacity,” or “the state of affairs whereby one’s very abilities can function as blindesses” (*Permanence 7*).

What this historiographic project suggests is that the long tradition of rhetorically constructing unwed pregnancy as a problematic, abnormal, and shameful state continues to function as a trained incapacity, precluding the ability to recognize, understand, and deliberate about unwed and teen pregnancy in more productive or nuanced ways.

This project also demonstrates the pervasiveness of the sexual double standard within the recent history of unwed pregnancy. Of the numerous primary texts I have encountered during this research (many of which I found while visiting three archives, each with extensive holdings) a paltry few consider unwed or teenage pregnancy as a “problem” faced by two people who had sexual intercourse. Overwhelmingly, and to disturbing and infuriating ends, unwed and teen pregnancy is rhetorically constructed as being a female problem. Discussions of unwed and teen pregnancy most frequently do not address the unwed father, although when they do it is often to suggest that unwed mothers use a pregnancy to “trap” a man into marriage (a trope that seems not to have faded away over the years). What’s more, some of the women I interviewed who surrendered their child for adoption were strongly encouraged or forced to list the father as “unknown” on their child’s birth certificate, even when the father was known.91 Through the 1960s and the long 1970s, women and girls “got themselves in trouble” while men and boys avoided the shame and stigma of sex outside of marriage. In sum, unwed and teen pregnancy remained a mistake, and a female one at that. And the legal, verbal, and visual rhetorics perpetuating this idea contributed to the delegitimization and vilification of unwed mothers.

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91 This practice ostensibly lessened the threat of a father attempting to claim paternity, which might slow down or reverse adoption arrangements.
These two conclusions—that (1) the trope of unwed/teen-pregnancy-as-problem is a pervasive rhetorical construction and (2) a sexual double standard regularly circulates within discourses and silences related to these pregnancies—help to explain why unwed pregnancy during these two decades has been misunderstood and even overlooked by scholars and the general public, alike. Too frequently seen as the source of a problem, unwed mothers have been historically marginalized and silenced. Examining the rhetorics that constrain these mothers’ voices—at the time of their pregnancy and, for some, long after—enables historiographic research and, hopefully, engenders further study.

**Some Inferences: Or, What I Have Learned Along the Way**

Women are controlled by lashing us to our bodies.
—Adrienne Rich, *Of Woman Born: Motherhood as Experience and Institution*

Close analysis of discourses and silences related to unwed pregnancy during earlier decades can also suggest more far-reaching rhetorical patterns and practices. Specifically, this project has led me to draw several speculative conclusions about the pervasiveness of patriarchy within the realm of discourse about women’s sexual and reproductive lives, the propensity for rhetorical bodies to compound the power of rhetorics of silence and shame, and the ongoing visual power of unwed, pregnant bodies.

**Discursive Power, Silence, and the Rhetorics of Shame**

During several of my early interviews, I was surprised to hear why the women with whom I spoke wanted to share their story of hiding and surrender. Although some women are still working through their own grief and sense of betrayal, others warned that they wanted to
talk about their experiences as unwed mothers because they worried our society might return to the seemingly outdated ways of thinking inflicted upon them and captured in their stories. *Send women away to maternity homes? Force them to relinquish their child? Shame them into secrecy?* I silently posed these questions to myself in disbelief. *How could that happen? Surely that could not really happen again!* I listened, but I was not convinced that sharing stories of unwed pregnancy was of dire need now, in relation to contemporary culture and politics. I did, however, (and still do) have a firm commitment that this portion of women’s history should to be given fuller attention, especially given the systematic silencing of unwed mothers. When I first read Ann Fessler’s *The Girls Who Went Away* several years ago, I was shocked that this history happened, that it happened during the lifetime of my parents and the adults who shaped my youth, and that I (someone particularly interested in women’s history) had never, ever heard about it. I was skeptical of the warning these mothers implied, although I respected their opinions. After all, they had gone away. They had relinquished the child they carried to term. They lived all of this and I did not.

In the process of researching and composing this project, however, I began to have my own doubts about the assuredness I, and many other women I know, have felt about the feminist gains of the last forty years, particularly in relationship to reproductive health. First, I was surprised to learn just how slowly and unevenly, when at all, basic rights were afforded to women in relation to their reproductive capacities. I realized my own unchecked belief in the power of the *Roe* decision, for example, to mark a permanent turning point in women’s reproductive history. Learning about the rhetorical efforts of people like Clydie Marie Perry, Barbara Seaman, and Bill Baird illuminated just how strong and pervasive resistance was to women’s ability to attend school when pregnant, ability to read safety and product information
about the oral contraceptives that they were taking, and ability to talk to a doctor about birth control, irrelevant of their marital status. All in all, change was incremental. It was met with resistance based on stubborn cultural logics about unwed pregnancy and the sexual double standard that lingered and always circled back to the assumption that some person other than the woman in question could better speak for her sexual and reproductive needs.

When I compare these hard-fought efforts with the pervasiveness and sheer endurance of a sexual double standard that holds women primarily accountable for all types of sexual encounters and their outcomes, I realize that women’s gains in recent history are laudable, but certainly not unshakeable or irreversible. Much of the same misogynistic doxa of the early part of the twentieth century that I touch upon in chapter one still held sway in the 1960s, the 1970s, and continues to shape expectations about sex today. Such longevity encourages us to realize the extent to which women’s claims over their bodies are fragile and the extent to which patriarchy endures, assuming various iterations but always advancing a hierarchy dominated by heteronormative masculinity. It becomes easy to lull oneself into the disbelief that the past is the past—that times are different, and unfailingly so. Even scholars of women’s rhetorical history like me can unknowingly develop such trained incapacities.

I suggest that the historiography represented in this project is particularly relevant to a contemporary discursive climate hostile to women who speak or make decisions on their own behalf about issues of reproduction and sexual/reproductive health. In February 2012, a variety of conservative-backed initiatives made national headlines because of their relevance to women’s reproductive rights and sexual freedoms. For example,

- Virginia lawmakers proposed legislation that would require doctors to perform a transvaginal ultrasound on women before they have an abortion. A transvaginal
ultrasound is used internally and therefore provides a clearer image during early pregnancy than does an abdominal, or external, ultrasound. The proposed bill was similar to that of seven other states that have pre-abortion ultrasound requirements, although not as strict as legislation in Oklahoma and North Carolina, which mandates doctors to place the ultrasound screen directly in front of the woman receiving the procedure. Governor Bob McDonnell eventually signed the bill into law after the mandate for a transvaginal-type of ultrasound was replaced with an allowance for women to opt for an abdominal ultrasound (Eckholm; Madison).

- Also in February 2012, a debate ensued about a portion of President Barack Obama’s health care plan that would require the health insurance plans of all employers, including religiously affiliated institutions like Catholic universities and charities, to cover birth control. Some Republican politicians framed their opposition to this mandate as an issue of religious liberty rather than women’s rights (Boorstein).

- Later Congressional testimony about the healthcare provision about contraception featured a group of five male religious leaders, but included no female witnesses. Democrats asked that a Georgetown University Law student, Sandra Fluke, be included in the testimony, but House Oversight Committee chairman Representative Darrel Issa rejected the request. Insisting that the debate was about religious freedoms, not reproductive rights, Issa continued to endorse the all-male slate of witnesses, even as several female committee members left the testimony in protest (Keyes; Shine).

These public issues sparked heated debate and raised the concerns of women and men across the political spectrum. But what is most significant about such issues in relation to this
particular project is the extent to which these practices employ rhetorics of shame and/or rhetorical silencing of women who speak out on behalf of issues that implicate their bodies and their reproductive health and wellbeing. For example, the transvaginal ultrasound mandate was considered by some opponents to represent an anti-abortion effort that involved violation of women’s bodies because it mandated that a doctor insert a medical device into their vagina, a violation which some opponents referred to as “state rape.” Thus, the bill rendered women seeking an abortion voiceless and powerless over this intimate and invasive procedure. Another valid critique of the proposal was its use as a technique of shaming. Forcing (or encouraging) women to view an ultrasound before obtaining an abortion can be interpreted as a non-verbal act of shaming meant to discourage women from continuing with the procedure. And in addition to women being barred from Congressional testimony about birth control coverage and access, Sandra Fluke was lambasted by conservative talk radio personality Rush Limbaugh. Limbaugh’s crass attack on Fluke included calling her a “slut” and requesting that if taxpayers are expected to pay for women’s birth control (a supposition that is actually a misrepresentation of the coverage because contraception would not be taxpayer-funded), then women should have to post pornographic videos documenting their sex acts online, to be viewed by said taxpayers (Bey).  

I do not wish to detail the fallacies of Limbaugh’s attack, but rather point to the ways in which these recent debates perpetuate rhetorics of shame that discredit women’s knowledge, control over, and even the ability to speak up for their own reproductive and sexual health and wellbeing. In the case of Sandra Fluke, a statement about the various sexual and nonsexual reasons that women use oral contraceptives was misconstrued to be something that it was not. Instead of being understood as a vehicle to express her opinion within a debate that relates to

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92 Another instance of the sexual double standard, health care coverage of contraception raised public debate whereas healthcare coverage of a male drug Viagra, which is taken to treat impotence, sparks no such debate.
reproductive issues, Fluke’s testimony was framed by Limbaugh as proof of her hypersexuality and lack of morals. Although Limbaugh is dismissed by many as a strategically polarizing media figure, his extreme rhetoric, along with the purposeful exclusion of women’s voices in Congressional testimony that directly addresses women’s access to birth control, demonstrates that rhetorics of shame and purposeful silencing are discursive strategies that are alive and well. Further, such rhetorics enact a sexist power differential through discourse that upholds the notion that men are the appropriate and most wise arbiters of concerns related to women’s bodies and women’s sexual behavior.

Identifying rhetorics of shame and blame as well as architectures of silence helps to shed light on discursive practices that are sometimes blatant, sometimes obscure, but always infused with power. Such rhetorics can constrain those in a position of less power by limiting their opportunities for knowledge, self-advocacy, and expression. This project demonstrates how this rhetorical power has been yielded in the recent past and in relation to unwed, pregnant bodies. This case study also suggests that rhetorical scholars can do more to identify ways that rhetorics of shame and blame and architectures of silence operate today.

*Silence, Shame, and Rhetorical Bodies*

This project has also led me to realize that rhetorics of shame and silence take on additional power when they implicate rhetorical bodies and discussions about those bodies. Cheryl Glenn reminds that “[l]ike speech, the meaning of silence depends on a power differential that exists in every rhetorical situation: who can speak, who must remain silent, who listens, and what those listeners can do” (*Unspoken* 9). When the exigence of the rhetorical situation is a contested issue in relation to a specific body or group of similar bodies, these questions become
even more vexing. My research suggests that notions of corporeal boundaries and limitations, particularly in relation to reproduction, carry significant rhetorical and political importance. For example, a woman’s gestational period is incongruous with deliberative time, particularly in relation to courts of law. Norma McCorvey (better known to many as Jane Roe) served a vital function in the *Roe v. Wade* case, because the case could only go to court if there was a real-life, pregnant plaintiff; an argument could not be made in relation to a hypothetical situation. But the appeal to the U.S. Supreme Court was nearly dismissed because Roe had already given birth. Similarly, relatively little case law exists that can serve as a precedent by which to hold schools accountable for their treatment of pregnant students and teen mothers. Again, part of this lack stems from the short time frame of pregnancy in contrast to the much slower apparatuses of the law, not to mention the material constraints (time, money, education, etc.) of young mothers.

Additionally, discussions about contested bodies often bifurcate the flesh-and-bones body (or, often, specific parts of the body) and the person who are more than the sum of these corporeal parts. Such synecdoche is especially common in relation to unwed and teen pregnancy, when a mother-to-be is reduced to being a distended belly. Fear of the rhetorical power of the pregnant belly is the reason that many women who I interviewed for chapter two were hidden away immediately upon finding out they were pregnant and were uncomfortably girdled in an effort to display slimness and perform non-pregnancy. Similarly, a 2012 memoir by Gaby Rodriguez outlines how this teenager pretended to be pregnant by wearing a fake belly for several months during her senior year of high school. Wishing to “open up a discussion about stereotypes and statistics,” Rodriguez did not disclose the secret about her simulated pregnancy until she stood in front of an assembly of her classmates (Rodriguez 77). After sharing a list of

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93 This is a potentially contentious claim, considering other perspectives like those of posthumanists who are suspicious of delineating the boundaries of “human.”
degrading statements that others said about her because they thought she was pregnant, Rodriguez removed her artificial “bump” and shocked her school. The lesson: once she became visibly pregnant, no-one saw Gaby Rodriguez. Instead, they only saw her belly, and the enthymemetic power of that belly overrode what friends, teachers, and family members knew about Gaby. Rather than seeing the hard-working, responsible, and successful teenager that she had proven herself to be, people now saw an unmarried, teenage mother who, they said (behind her back and to her face), was “dumb,” “irresponsible,” predestined to get pregnant outside of marriage, doomed to be a bad mother, and bound to a dismal future (Rodriguez 155).

Rodriguez knew that only by shedding her visible pregnancy in front of those who stigmatized her would she be able to speak over her body and actually be heard.

Fig.9. A reenactment of Gaby Rodriguez’s rhetorical performance of revealing her false pregnancy to classmates in the Lifetime movie *The Pregnancy Project.*
Examples like these suggest how the body implicates already vexed rhetorical practices of silence and shame and significantly changes the rhetorical situations faced by many young, pregnant women.

_Hiding It or Flaunting It: The Ongoing Visual Power of Unwed, Pregnant Bodies_

Rhetorics about unwed and teen pregnancy have, in some ways, changed greatly since the era of hiding and surrender. Talking about such pregnancies is no longer taboo, as is evidenced by current reality television shows such as _16 and Pregnant, Teen Mom, Teen Mom 2_, and major motion pictures such as _Juno_ and _Knocked Up_. Additionally, during the 2008 presidential campaign, Republican vice presidential candidate Sarah Palin and her family made news when her 17-year-old, unmarried daughter, Bristol Palin, became pregnant. Recently, unwed pregnancy, in various iterations of reality and fiction, has gotten people talking.

Audiences differ in their interest in and opinions of this spate of young pregnancy stories, but notions of appropriateness, visibility, and shame circulate through much of the commentary. Critics of reality television programs about teen motherhood frequently suggest that such shows glamorize pregnancy and encourage girls to become pregnant in order to gain attention and popularity. In the words of one woman who runs a young mother support group in Georgia, “There is no fear and shame in teen pregnancy anymore” (Chang). Others suggest that such programs reflect the difficulties of teen parenting and open up a discursive space in which teenagers and parents can discuss sex and pregnancy. Whether for good or ill, unwed and teen pregnancy has become visible in unprecedented ways, and the very visibility of unwed, pregnant bodies influences these various opinions.
What can be learned if the stories in this historiographic project are considered antecedents to current depictions of unwed and teen pregnancy? I suggest that doing so makes apparent an uncomfortable dichotomy: unwed and teen mothers are either hidden from view or “too” visible. As I argued in chapter three, young, unwed, and pregnant bodies have long been visually powerful and, for many, disturbing or fear-inducing. And throughout my research with primary materials from the 1960s and 1970s, I came upon suggestions that unwed mothers become pregnant for attention—to become more visible. I would argue that ongoing discussions about the appropriateness of contemporary depictions of unwed pregnancy and the motives of the women involved in such story-telling demonstrate that visible, unwed, and young, pregnant bodies are still guarded with suspicion because of this visual power. By being seen, the women in these narratives resist rhetorics of shame, which, I argue, is central to their controversial public presence. Despite so many public and publicized pregnant bodies, what is still lacking are examples of unwed and/or teen mothers and mothers-to-be who can be in the public eye without rousing such misgivings.

**Implications for Further Research**

In order to answer my critical question, I needed to maintain a focus that prevented me from exploring a range of questions and ideas that stem from this project. These implications relate to historiography of unwed pregnancy, feminist rhetorical scholarship, and methodologies within the field of rhetoric and composition.

**Subject-Specific Historiographic Limitations: Ideas for Further Study**

- This examination focuses primarily on the experiences of white, middle-class women who became pregnant outside of marriage. More scholarship is needed on the experiences
of non-white unwed mothers and/or working-class and poor unwed mothers in relation to
the era of hiding and surrender. Rickie Solinger’s scholarship addresses both race and
class, but more work can be done. For example, in my research I could not find any
interviews detailing the experiences of women working in wage homes (residences where
women who could not afford to go to a maternity home could work for room and board).
I also became aware that because my recruitment materials included the words “maternity
home,” some wage-home residents did not think that I wanted to hear their story. More
importantly, as one woman explained to me, she did not think of herself as being part of
“the” story of going away, a reaction that calls attention to her ongoing feelings of
marginalization.\(^94\)

- Additionally, more work can be done to recover the stories of women who went away
  after 1973. As I began my research, I naively believed the three, overwhelmingly
  pervasive myths that I have overturned in this project. I have been in contact with several
  women who hid an unwed pregnancy during the later 1970s and 1980s. I plan to
  interview these women in order to expand the scope of this scholarship. Placing the
  voices of such women alongside historiographic and contextual scholarship like this
  project will provide a fuller and more nuanced account of the recent history of unwed
  pregnancy.

- In addition to moving forward in time, much can be gained by linking historiography of
  the 1960s and 1970s with earlier discursive histories of unwed motherhood. Historical
  scholarship on early maternity homes (Aiken; Kunzel) explores the history of these
  homes before World War I. Early maternity home care differed from care provided by the

\(^94\) As I imply here, I have been in contact with several women who went to wage homes. One woman is willing to
share her experience with me, providing me with additional data for my ongoing scholarship.
same organizations during the hiding and surrender era. More generally, unwed motherhood was closely linked to delinquency and thus was a concern among proponents of eugenics. Longitudinal study can enhance an understanding of the volatility of notions of unwed pregnancy in the United States during the late-nineteenth and twentieth centuries.

- Hiding and surrender was not a U.S.-specific practice. More research is needed on other nations’ historical, rhetorical practices related to unwed pregnancy, whether those practice were similar or dissimilar to those in the United States.

Opportunities for Additional Rhetorical Research

- This project has examined rhetorics of shame and blame that have been historically directed at unwed mothers. But as I have suggested above, rhetorics of shame continue to circulate in a contemporary political climate in which women’s reproductive rights and sexual freedoms are being questioned. The notion of “slut-shaming” has recently gained currency and calls attention to the circulation of shame discourses related to women’s sexuality. The term identifies rhetorics of shame that are directed toward women because of their perceived sexual behavior, their attitudes about sex, and/or their willingness to speak out on behalf of women’s sexual and reproductive rights, freedoms, and interests. Slut-shamers may refer to women as “sluts” or may rely on other shaming discourses that degrade and sexualize women for the reasons just stated. Efforts to conceptualize slut-shaming explicate how those who critique women in these ways rely on rhetorics of shame, often irrationally and to illogical ends. The term “slut-shaming” also draws attention to the sexual slur “slut,” and invites reflection on how, when, and by whom this
epithet is used. The concept of slut-shaming has garnered attention, particularly among young women have begun to reappropriate the term “slut” as an act of self-validation. Other women participate in slut walks or post their views about slut-shaming on the internet, as did 13-year old “astorice” (“Slut Shaming”). Slut-shaming and its critique are sites of rhetorical study that can extend the discussion of rhetorics of shame in this project in valuable directions.

- In March 2012, the South Australian Government issued a formal apology to families affected by “forced adoptions” that took place between 1950 and 1980 (“Weatherill Pledges”). The apology is the first of its kind and has shed light on practices of hiding and surrender in Australia and in other parts of the world. Official apology can be viewed as rhetorically powerful means of validation addressed to disempowered groups. Apology might also be thought to foreclose ongoing discussions of issues related to these marginalized groups insofar as it performs rhetorical closure. What insights on official apology can rhetorical study provide, particularly in relation to groups who still struggle to gain political voice as activists?

- In the process of my research, I have been surprised to learn of the relative dearth of rhetorical scholarship on feminist rhetorics since the 1960s as well as rhetorical study related to the Roe v. Wade decision and subsequent legislation and case law. Susan Wells, Krista Ratcliffe, and Celeste Michelle Condit offer notable exceptions to this claim, having composed monographs that examine specific rhetoricians and texts of the last fifty years. But in comparison to the extensive amount of rhetorical scholarship on women and/or feminist rhetorics of earlier time periods, recent feminist/women’s history remains under-explored.
This project suggests that within feminist rhetorical scholarship, researchers might more fully explore the intersections between rhetorical studies and the relatively recent, interdisciplinary field of girl studies. “Girl studies” refers to a field of inquiry that has developed over the last twenty years and considers “the experience of gendering girls, starting at the earliest moments of their lives and continuing into their transformation to young women” (Lipkin 4). This focus on the “cultural construction of girlhood” is informed by many perspectives across the academy (Mitchell, Reid-Walsh, and Kirk ix), and would benefit especially from rhetorical scholars’ analysis of various texts, discourses, and rhetorical processes by which identities are constructed. As a study of young women in the difficult transition between girlhood and motherhood—categories that are highly rhetorical but intimately linked to the body and the body’s biological functions and performances—this project suggests one area of potential interest to girl studies scholars. Ongoing discourses about teen pregnancy in the United States suggest that the intersection between adolescence and motherhood will continue to be a fruitful and publicly relevant site of inquiry.

Methodological Considerations

Assessing current feminist rhetorical practices, Jacqueline Jones Royster and Gesa Kirsch reflect upon scholars’ interactions with the communities they study and suggest that one “obligation is to partner with [community members] as we join our world to theirs and work with them to set in motion a different, more fully rendered sense of rhetoric as an enterprise with a future” (147). Feminist scholars in rhetoric and composition have increasingly robust models for doing archival work (Ramsey, Sharer, L’Eplattenier, and Mastrangelo; Kirsch and Rohan), but
methodological questions remain about the fraught negotiations feminist scholars can have when interacting with living subjects. Such work can be particularly challenging when the “ethics of hope and care” that Royster and Kirsch advocate involve bringing once-secreted stories public in collaboration with silenced and stigmatized participants. This project has encouraged me to consider the following methodological questions and challenges:

- Who can/might/should our research serve? When we research “public” stories, what should be the purpose(s) of our work and to what audience(s) should it be addressed? How do researchers negotiate these questions in light of the demands and constraints of academic publishing?
- How might the impact of feminist rhetorical research re-render stigmatized community members up for greater—even new—public scrutiny and what are our responsibilities as scholars aware of this risk?
- A feminist ethic of care encourages scholars to view participants as more than just sources of data, and with this perspective I have welcomed participants to remain in contact with me and share their feedback on how “their” stories interact with “my” scholarship. This ongoing relationship can strain the researcher/participant relationship in productive, but also problematic ways. If and when is the goal of collaboration (and the ethical methods for quality collaboration) a benefit to researchers but a constraint to participants? For example, working with participants who have experienced trauma suggests that the recursive potential of ongoing collaboration might significantly add to participants’ risk.
- This project suggests the value of intergenerational work within the field of feminist rhetorical studies, what Royster and Kirsch name a “dialogic relationship between past
and present” (14). As this subfield within rhetoric and composition studies grows and develops, feminist scholars would be well served to explicitly structure intergenerational projects and develop methods and questions that aid in such lines of inquiry. An intergenerational focus would not only add nuance to our own work, but could also aid in discursively reframing larger cultural fissures between generations that are encouraged by the metaphor of feminisms’ “waves,” and the notion of feminism as distinct from “post-feminism.”

- Finally, as feminist rhetorical scholarship moves “far beyond the rescue, recovery, and (re)inscription of a diversity of women participants” (Royster and Kirsch 31), it is important to remember that these three “Rs” continue to be worthy sites of inquiry in their own right. Recovering women’s silenced or ignored voices should represent an ongoing and vital rhetorical project.

**A Final Thought**

“It used to be called illegitimacy. Now it is the new normal.” This claim opens a front-page *New York Times* article on unwed motherhood published in February 2012. The article continues, “After steadily rising for five decades, the share of children born to unmarried women has crossed a threshold: more than half of births to American women under thirty occur outside marriage” (Deparle). Although social, political, and economic contexts change, unwed pregnancy long has been and will long continue to be a reality in the United States. The complex history of unwed pregnancy reflects how this “problem” is one that is always tied to women’s social identity, worth, and rhetorical power—a power that emanates from their pregnant bodies and constrains or enables them to speak, be spoken for, and be listened to. Even as times and
trends change, the term “unwed mother” continues to be saturated with meaning that has accumulated over time. Because so many of those meanings are unspoken but invoked by the pregnant body, giving voice to such rhetorical baggage is of historical and contemporary importance. This giving voice has been the point of this project.

The recent history of unwed pregnancy in the United States is one infused with silences and secrets, even when rhetorics of shame turned to rhetorics of blame and the “problem” of unwed pregnancy went public. Unwed mothers were less likely to be hidden away during the 1970s and later, and discussions about unwed and teen pregnancy slowly moved into more public arenas, but mothers continued to be excluded from joining these conversations in any meaningful way. A reverberating silence cloaked the millions of women who surrendered a child and continued to live in shame and loneliness in the years after their pregnancy. The shame that gave form to an architecture of silence remained, bearing down heavily on women who continued to carry secrets and younger women who faced the same, age-old problem in a different historical moment. The power of these silences and secrets are only beginning to be understood, and they can be so only when they are spoken, when mothers speak and the rest of us listen. As Adrienne Rich explains:

Such themes [of motherhood in bondage] anger and terrify, precisely because they touch us at the quick of human existence. But to flee them, or to trivialize them, to leave the emotions they arouse in us unexamined, is to flee both ourselves and the dawning hope that women and men may one day experience forms of love and parenthood, identity and community that will not be drenched in lies, secrets, and silence (On Lies 197).
Above all else, this project suggests the value of identifying and attending to these silences and secrets—some of which are obvious, some of which are elusive—as integral to this ongoing story.
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Center for Democratic Deliberation Research Fellow, Penn State, 2011-2012. Awarded to selected Penn State students who conduct scholarship that reflects the CDD's concern with civic life and the character and quality of public discourse.

Mary Emily Price Graduate Scholarship in the College of the Liberal Arts, Penn State, 2011. Research monies awarded to one female student per year.

SELECTED CONFERENCE PRESENTATIONS

“Sequestered Bodies and Spaces of Secrecy: Responding to Unwed Pregnancy.” Conference on College Composition and Communication, St. Louis, MO. 2012.


“Reform on Display: Exhibition and Visuality of Progressive Era Appeals.” Conference on College Composition and Communication, Atlanta, GA. 2011.