Reproductive Rights and Women's Health

Essential Questions:

1. Who is the intended audience of the material? How do you know?
2. Who made the material and why?
3. Why is women's health a political issue? What are the primary concerns addressed in these materials?
4. How do race and class intersect with women's health issues? What differences and commonalities do you see among the groups represented in these materials?

Akwasasne Notes 1977: The Theft of Life
Article from September 1977 issue of Akwasasne Notes titled “The Theft of Life.”

Native American women were coerced into being sterilized, often without knowing that the effects would be permanent. Some of the evidence comes from a study by the U.S. General Accounting Office, some is anecdotal evidence from Dr. Uri, who conducted her own investigation. Also includes a report from another news source describing U.S. AID’s funding of sterilization worldwide, and its director’s stated goal to sterilize 25% of women of childbearing age in order to curb overpopulation.
The Theft Of Life

Manhasset, Minn.,—On a November day in 1972, a 26-year-old Indian woman entered a Los Angeles, California, doctor's office and asked the doctor to give her a womb transplant. "A surprising request," the doctor thought. But not nearly as shocking as the history that preceded the request.

The woman told the doctor that she had heard about kidney transplants, and she desperately needed a womb because her future husband and she wanted to have children.

She had been "sterilized" for birth control purposes six years earlier with a permanent hysterectomy. At the time she was an alcoholic with two children in foster homes. A doctor convinced her that to make the best of her life she should be sterilized. So, she did as the doctor advised.

But, at 26 years old, the woman was no longer an alcoholic. She was in love with a man and they were planning to marry.

She was devastated when she learned that womb transplants are impossible. And the distance she and her husband suffered because of her inability to have children later led to a divorce.

The story was related to the NATIONAL CATHOLIC REPORTER by the Los Angeles Doctor, Connie Lai, a Cherokees and Ohiokowas Indian.

"At first I thought I had discovered a case of malpractice," Dr. Lai said. "There was no good reason for a doctor to perform a complete hysterectomy rather than a tubal ligation on a 26-year-old, healthy woman."

Later Dr. Lai learned that the incident was not an isolated one. She continued to hear from women who complained they were sterilized under duress or without information about the irreversible nature of the operation.

"I began asking the government of Canada and asked on a congressional investigation," she said. Senator James Abourezk, a Democrat of South Dakota, and Oklahoma City, Oklahoma, found that a large number of Indian women, relative to their population size, had been sterilized. Between 1973 and 1975, 1,900 Indian women were sterilized. Among those were 25 women under 21 years old, who were sterilized despite a court order mandating such operations.

The GAO conducted its investigation into IHS records, and did not prove race, religious, other patient-doctor relationships or interview women who had been sterilized. But URI, along with a group of Indian women (many of whom are employed by the government) have been conducting their own "quiet investigation." They have observed IHS procedures and interviewed numerous women who have been sterilized, URI said.

Their investigation, along with the GAO report, has led URI to believe that more than a quarter of all American Indian women have been sterilized, leaving only about 100,000 women of child-bearing age who can have children.

"It is an extreme problem because there are so few Indians in existence; less than a million of us," she said. "We are not like other minorities. We have no gene pool in Africa or Asia. When we are gone, that's it."

URI does not believe sterilizations are prompted by a government plan to exterminate American Indians, Rather,

URI said, they result from the warped thinking of doctors who think the solution to poverty is not to allow people to be born. They have the wrong concept of life. They think that no good life, you must be born into a middle-class standard of living. But most people in the world are not born into unemployment. And I wouldn't have been born if this was a prerequisite for life."

"Doctors have assumed a God-like authority, and they think they are helping people by sterilizing them."

Very few Indian women ask to be sterilized, URI said. "In almost every situation, the woman is talked into it, a very authoritarian, or coerced manner. It is easy to do because the women have so much faith in the doctor, URI said.

One woman told URI that she went to the doctor after suffering from severe headaches. The doctor told the woman she was pregnant, and told her, "Why don't you just get your tubes tied so you won't get sick any more?"

Another woman with three children went to the doctor to be treated for stomach problems. "The doctor immediately assumed the woman was vomiting because she was pregnant, and yelled at her, 'Why the hell don't you get your tubes tied so you won't get sick any more?'"

A large number of women agree to sterilization operations because they are afraid their children will be taken from them if they refuse. Many also believe welfare benefits or services may be withheld from them, URI said.

To avoid this misunderstanding, the IHS is required to inform women that their benefits will not be withheld, and that numerous other birth control measures are available to them. But, URI said, records lack evidence that the woman had been provided this information before agreeing to the operation, the GAO found. The IHS reportedly is now

conforming with these requirements, a GAO spokesman said.

Most Indian women are sterilized at the time they are giving birth and their consent is often taken while they are heavily sedated, URI contends. "Almost every woman having a Caesarean section is bound to be sterilized."

Consent received under such circumstances would violate federal regulations requiring women to be given a 72-hour waiting period between the time of consent and the operation.

Most Indian women do not realize the permanent effects of the operation when they give their consent, URI adds.

"And when they do realize they can't create life, they feel castigated and psychological problems result. It downgrades different women at different times. For some, the realization does not strike until many years later, but when it does, they often have a total nervous breakdown, try to commit suicide, go into prostitution or become alcoholics."

Families are torn apart by the woman's distress, and husbands often resist the operations done without their consent, URI said.

But sterilization is not the only trauma that destroys American Indian families.

Once an Indian child is born, parents stand a one in four chance that they will lose their child.

An Association of American Indian Affair (AAAA) study indicates that 25 to 35 percent of all Indian children are removed from their families and placed in foster homes, adoptive homes or institutions, and the number is growing in some states.

Dozen illegal and official means are often used to remove Indian children from good parents or relatives, evidence submitted to a Senate subcommittee indicates. Public and private agencies apparently are operating under the assumption that most Indian children would be better off growing up non-Indian.

"Officials would seemingly rather place Indian children in non-Indian settings where their Indian culture, their Indian traditions, and in general their entire Indian way of life is extinguished," Abourezk, chairing a Senate subcommittee on Indian child welfare, told the committee three years ago. To date, Congress has passed no legislation to prevent this kind of abuse.

"The federal government has been conspicuous by its lack of action," Abourezk said. "It has allowed these agencies to stick at the heart of Indian communities by literally stealing Indian children, a course which can only weaken rather than strengthen the Indian child, family and community. It has been called cultural suicide."

The greatest influence on Indian emotional life today is "the threat that their children will be taken away from them," William Byler, executive director of the AAAA told the subcommittee.

"Parents who fear they may lose their children may have their self-confidence and their ability to function successfully as parents impaired," he said, "which is why the welfare department (Continued on next page)
1. What is the gist of the article? How does this fit into or challenge your understanding of the context (the bigger picture of what you know about Native Americans and their relationship to the U.S.)? Was anything particularly surprising?

2. What sources does the author use to build their case? What are the potential biases of each of these sources?

3. What conclusions can you draw about why Native American women agreed to be sterilized?

4. What is the connection between sterilization and the removal of Native American children from their parents’ care?
5. What are some of the problems inherent in the U.S. government’s push for sterilization of marginalized groups in the U.S. and abroad? What does the government stand to gain from this practice?


The Black Panther newspaper was published from 1967 - 1980 by the Black Panther Party. It was nationally and internationally circulated, and was the most widely read Black newspaper from 1968 to 1971. Two thirds of BPP party members were women. This piece was written by Brenda Hyson, a woman and member of the Brooklyn branch of the party.
NEW YORK CITY
PASSED NEW ABORTION LAW
EFFECTIVE JULY 1, 1970
BLACK PEOPLE KNOW THAT PART OF OUR REVOLUTIONARY STRENGTH LIES IN THE FACT THAT WE OUT NUMBER THE PIGS — AND THE PIGS REALIZE THIS TOO. THIS IS WHY THEY ARE TRYING TO ELIMINATE AS MANY PEOPLE AS POSSIBLE BEFORE THEY REACH THEIR INEVITABLE DOOM!

In New York City as of July 1, 1970 it will be illegal for women to receive an abortion up to 4 months pregnant. The decision will be based on feelings of the woman and her doctor. The struggle for “women’s liberation” via a woman’s prerogative to eliminate an unwanted child? has won a victory!

But a victory for whom? Perhaps it is a victory for the White middle class mother who wants to have a smaller family, thereby enabling her to have more material goods or more time to participate in whatever fascinates her at that moment. But most of all it is a victory for the oppressive rating class who will use this law to kill off Black and other oppressed people before they are born.

To the Black woman, the welfare mothers, it is an announcement of death before birth. Black women love children, and in order to see to it that they do not starve, that they do not have to suffer all the degradation of this racist, capitalist society, they will kill them before they are born.

Black women love large families and the only reason that they would want to eliminate them is to rid them of the pain and the agony of trying to raise them in a country where farmers like Eastland, who are given large sums of public funds to grow food, where food is actually burned out of Black mothers who kill their unborn children. So why don’t they go hungry? Absurd! Eliminating ourselves is not the solution to the bigger problem in America, nor any other problem that could exist from a so-called unwanted pregnancy in the context of this capitalist society. The solution lies in overthrowing this system and returning the money to the communities of people — REVOLUTION.

We want an immediate end to the murder of Black people.

Money to survive or to die. And at this very moment a plan which calls for a definite sealing on the number of additional children a welfare mother can receive financial assistance for, has already been made into a law in some states and will soon exist in N.Y.C. This will create a situation where a welfare mother is told that she will now receive additional financial assistance for the child she is expecting and the solution provided by the government is a genocidal abortion. It is decided to solve the problem of no means to take care of her child, the law will allow her to murder her unborn child. Black women will reject this “legalization of murder” as just another attempt to force family planning in the guise of pills and collas.

And for those who say that it will prevent useless deaths and permanent injury to those women driven to self-induced abortions, based on capitalist morality, or even for those who have legitimate physical and psychological reasons; we say that an abortion law doesn’t insure good hospital treatment or facilities, Black people know that they receive the poorest services possible at hospitals; this is why they have correctly labeled them as slaughter houses. So we say Black people are not about to trust these slaughter houses to perform such delicate operations.

Black people know that part of our revolutionary struggle lies in the fact that we out-number the pigs — and the pigs realize this too. This is why they are trying to eliminate as many people as possible before they reach their inevitable DOOM!

ALL POWER TO THE PEOPLE

Brenda Hyson
Black Community Information Center
N.Y. Chapter
6. What is the gist of the article? What surprised you?


7. Why would black women feel pressured to have abortions? What would those in power stand to gain from these abortions?


8. What assumptions does the argument rely on? What additional information would you need to back up these assumptions?


9. Based on your background knowledge of the issue, choose another group that would have been interested in this issue. How might they have responded to The Black Panther's argument?


CARASA (Coalition for Abortion Rights and Against Sterilization Abuse) Flyer
Thousands of women from all across the country will be marching on Washington, D.C. and San Francisco on November 20th to unite our efforts nationally for the repeal of all anti-abortion laws, against forced sterilization, and for the repeal of restrictive contraception laws. We will be demanding the right to control our bodies and our lives – a basic right which for so long has been denied us. The Women’s National Abortion Action Coalition (WONAAC-New York) will be organizing women in the New York area for the November 20th march on Washington. We want to build large contingents of high school, campus, Black, Puerto Rican, Asian, Chicana, gay, professional, homemakers and church women, to show that all women are united around the demand: abortion - a woman’s right to choose. We urge all women to come to our office at 137A West 14th St. and help build the November 20th march. Leaflets, buttons, posters, and stickers are available. VOLUNTEERS ARE NEEDED!

Clip & Mail to: WONAAC-New York, Drawer U, Old Chelsea, New York, N.Y. 10011. 212-675-9150/9151

Enclosed find $____ for ______ round trip bus tickets for Washington, ($10.00 @)
____ I want to volunteer to help build the November 20th March on Washington to Repeal All Abortion Laws
____ I (my organization) endorses the November 20th March on Washington to Repeal All Abortion Laws
____ Enclosed is my contribution of $____ to help build the anti-abortion law repeal campaign. FUNDS URGENTLY NEEDED
____ Please send me more information on the campaign to repeal all anti-abortion laws

Name_________________________ Address_________________________
City________________________ State_________ Zip_____________ Phone________________________
Organization/School/Occupation:____________________________________________________

BUSES Leave Nov. 20th 6am from Union Sq. and return that evening to Union Sq.
10. What catalyzed the call for action in this flyer?

11. What tactics does the author use to persuade the reader to join this movement (i.e. statistics, appeals to the reader’s sense of justice)?

12. What commonalities do you see in the types of groups participating in the Coalition? Did any of the groups listed surprise you?

**CARASA “Never Again” Button**
Button with words “NEVER AGAIN” inscribed inside coat hanger, by Committee for Abortion Rights and Against Sterilization Abuse (CARASA)

CARASA was organized in 1977 in response to the 1976 Hyde Amendment, which eliminated Medicaid funding for abortion (still in effect today).
13. What is the significance of the symbolism used on this button, as it relates to the text?

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_____________________________________________________________________
_____________________________________________________________________

14. Why do you think pro-choice groups continue to use the coat hanger as a symbol to this day?

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New Legal Facts from Association for the Study of abortion
Pamphlet titled “The Supreme Court Decision on Abortion: New Legal Facts” by the Association for the Study of Abortion

New Legal Facts

Do parents have to consent to a minor’s abortion?
Parents may not force a minor to have an abortion against her will; probably they can’t force her to have the baby either. The Supreme Court did not decide this question but there is a growing body of law which recognizes that minors do have fundamental constitutional rights—among them the right to make some important decisions which affect their private lives.

Does a husband have to consent to his wife’s abortion?
This is another area of consent the Supreme Court did not consider. Some states require the husband’s consent; most do not and there is considerable legal support for the argument that requiring the husband’s consent violates the constitutional rights of the wife.

Can I be forced to have an abortion?
No. The whole point of the Supreme Court’s decision is to make it unlawful for the state to force you—or any other woman—to have an unwanted child, because that would violate your constitutional rights. It is clear that these rights would be just as seriously invaded if you could be forced to have an abortion. (As a matter of fact, in one case the parents of a minor tried to force her to have an abortion and a state court said that not even parents could do that.)

How can state law regulate abortion during the first three months of pregnancy?
The only regulation the state may make about abortion in the first three months is that it must be done by a licensed physician. The state can have nothing to say about the decision to have an abortion. It cannot disapprove of a woman’s reasons for requesting an abortion or the doctor’s reasons for doing one.

How can state law regulate abortion during the second three months of pregnancy?
Again, decisions as to whether or not to have an abortion rests with the woman and her doctor. The state cannot interfere. But, because the operation is more difficult during this time period, the state may, if it chooses, tell the doctor where the abortion must be done—in a hospital or a specially equipped clinic, for example—and set forth other conditions directed to protecting the health of the woman.

How can state law regulate abortion in the final three months of pregnancy?
Abortions are almost always done during the first five or six months of pregnancy since after this time the fetus may live. For this reason, the Court held that abortions may be prohibited during the last three months of pregnancy unless they are necessary to protect the woman’s life or health.
15. Who is the intended audience of this flyer?

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16. Based on the questions the flyer poses and answers, what are some of the implied concerns of the reader surrounding the new abortion law?

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Our Lives on the Line
Flyer titled “Our Lives On the Line” by activist group Refuse & Resist. Refuse & Resist was an activist group founded in New York City in 1987 in response to what
members saw as a repressive conservative movement headed by Ronald Reagan.

17. Who is the intended audience of this flyer and how do you know?

18. What visual devices are being used to make the argument? What rhetorical devices are being used?
Reproductive Rights Are Human Rights by Meredith Stern

“Reproductive Rights are Human Rights” print by Meredith Stern
OUR BODIES
OUR RIGHTS

WE NEED
AND
HEALTHY
COMMUNITIES
INCLUDING
EXEMPLARY
BASED SERVICES
WE NEED CULTURALLY
COMPETENT
PROVIDERS
WHO SING OUR
LANGUAGES
HIV/AIDS
AND STD
INFORMATION
AND SERVICES.
WE NEED DRUG
AND ALCOHOL
TREATMENT
SERVICES. WE
NEED SERVICES
FOR WOMEN WHO
ARE INCARCERATED
AND REPRODUCTIVE
CARE COVERAGE
ON ALL HEALTH
PLANS.

WE NEED
ACCESS TO
REPRODUCTIVE
RESOURCES
INCLUDING
BIRTH CONTROL
METHODS TO MEET
OUR INDIVIDUAL
NEEDS AND OUR
NATIONAL
POPULATION
CONTROL METHODS
OF COERCING
STERILIZATION.
WE NEED PRENATAL
AND POSTNATAL
CARE. WE ALSO NEED
SAFE AND ACCESSIBLE
AND AFFORDABLE
ABORTION AND
CONTRACEPTIVE
SERVICES FOR PREGNANCY,
AND COMPREHENSIVE
SEX EDUCATION.

REPRODUCTIVE HEALTH
IS A HUMAN RIGHT
ONE IN THREE WOMEN WILL HAVE AN ABORTION IN THEIR LIFETIME.
SIXTY ONE PERCENT OF ABORTIONS ARE OBTAINED BY MOTHERS.
19. **Who is the “we” in the text, and how do you know?**

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20. **Why did the artist choose to include a baby in her image about reproductive rights?**

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21. **Meredith Stern is a white artist here depicting a non-white woman and child. Is this significant to the meaning of the image?**

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