

Conclusion

On Monday, January 22, 1973, Spencer Parsons was giving a lecture at the Chicago University Medical School. He was speaking about abortion and sharing some statistics about the ten thousand women that the Chicago CCS had counseled since its inception. A messenger interrupted the lecture and handed Parsons a short, hand-written note. The United States Supreme Court had issued a ruling in the case of *Roe v. Wade*. The seven-to-two decision found that states could not proscribe abortion in the first trimester, and could make only limited restrictions in the second trimester. "It was kind of a dramatic thing," remembers Parsons. His work as an illegal abortion counselor was over; in five years he had counseled 996 women.¹

January 22, 1973, proved to be a dramatic day for the entire nation. While abortion rights activists celebrated their court victory, Americans across the country went into mourning for President Lyndon Johnson, who died the same day. *Roe v. Wade* would be front page news on January 23, but it would not be the lead story.

"Nobody predicted it," Howard Moody remembers of *Roe v. Wade*. In fact, the case was the culmination of a series of court cases over the course of several years. Moody, Parsons, and other abortion rights activists kept a very close watch on abortion cases in the Supreme Court, so *Roe v. Wade* could not have been a complete surprise. For example, one of the women Parsons had counseled was a plaintiff in the suit, and his neighbor was one of the plaintiffs' attorneys. Nevertheless, no one predicted a decision with the breadth of *Roe v. Wade*, which struck down abortion laws in thirty states.²

Larry Lader had finished writing his account of the struggle for abortion rights when the

¹ Parsons, interview.

² Moody, interview, 27 November 1997; Parsons, interview; Kaplan, *Jane*, 273-274.

decision on *Roe v. Wade* was handed down. It was too late to add a chapter to *Abortion II: The Making of the Revolution*, so he had the majority opinion published on the inside of the cover, a tribute to the movement's seemingly sudden success. Likewise, Carmen and Moody were only able to include an extra paragraph about *Roe v. Wade* in *Abortion Counseling and Social Change*. Their first epilogue warned of another impending legislative assault on New York's abortion repeal law of 1970. The second epilogue, tacked on in italics, reveals how abruptly their concern became moot. "[*Roe v. Wade*] is the vindication of the movement and the work of the clergy begun five and one-half years ago with the conviction that the prohibitory abortion laws were a violation by the state of the women's right to privacy and personal liberty," they wrote in the new epilogue.³

The National Clergy Consultation Service on Abortion Newsletter was distributed for the last time in October 1973. "Final Edition" was stenciled across the front page. "I want to commend all of you who labored, over a number years, in the cause we believed in," wrote Moody. "I think the emphasis we put on counseling and referral was very important at that time but I think the next significant area is advocacy before hospitals and clinics to assure women that if their decision is to terminate their pregnancy they will be able to do that in a decent medical facility at a fair price." Moody explained that the National CCS would not be closing down altogether, but it would be "less active on a day to day basis," with most of its energy redirected toward "health advocacy."⁴

In reality, it was not the National CCS's energy that was redirected, but Carmen's and Moody's. On May 27, 1973, just six years after the New York CCS began, the Center for Reproductive and Sexual Health, or Women's Services, announced it would be the first major New York City clinic to suspend its operations. The percentage of out-of-state women coming

³ Carmen and Moody, *Abortion Counseling*, 121-122.

⁴ Howard Moody, National CCS Newsletter, October 1973, CCS archive.

to New York for abortions dropped fifteen to twenty percent in the first months after *Roe v. Wade*. With Clergy Consultation Services across the country disbanding or making referrals to clinics of their own, Women's Services was in trouble. The clinic's weekly patient load had dropped from 700 to under 200. Carmen and Moody, however, were not prepared to let the model clinic die. In a joint decision with Arthur Levin and the Judson Church Board, they determined that Judson would assume responsibility for Women's Services. Levin remembers that they wanted to keep "an eye on the second prize; which was a model place, a standard to which other clinics could be held in terms of both the quality of service and in terms of pricing." Barbara Pyle decided it was time to move on, and she left for Atlanta to pursue a career in film production with Ted Turner, who was then an unknown. Levin was the only member of Women's Service's Board of Trustees who stayed on when Judson took over. The new Board of Trustees consisted solely of members of Judson; Moody was the Chairperson.⁵

Judson Church operated Women's Services until 1978. The role of the clinic was expanded to include other medical services such as breast biopsies, which were usually not available on an out-patient basis. Many of the clinic's abortion patients paid for the procedure with Medicaid, and Moody fought hard to ensure that Medicaid funds for abortion were not cut off by antiabortion legislators. Unfortunately, Women's Services low prices did not draw enough patients to keep the clinic in the black. The overhead of the enormous facility was too high, and there was too much competition from other clinics. After five years of trying to make ends meet, the Board of Trustees decided Women's Service was no longer worth their efforts. The clinic was turned over to one of its doctors, and it folded not long thereafter. The last vestige of the Clergy Consultation Service on Abortion disappeared, and Carmen and Moody turned their attentions to other social issues.⁶

⁵ Levin, interview.

⁶ Moody, interview with Barbara Whitaker, *New York Newsday*.

In the ensuing years, the Clergy Consultation Service has been all but forgotten. It receives an honorable mention in most histories of abortion, but few authors appear to give much thought to the question of its significance. The fact that over 2,000 clergy participated is frequently touted, but the magnitude of their contribution is rarely judged. What then, was the real significance of the clergy's massive six-year effort?

The most obvious effect of the Clergy Consultation Service on Abortion was the sheer number of women it saved from the dangers and indignities of underworld abortion. Antiabortion critics might argue that without the CCS women would not have chosen abortion, but all the evidence suggests that this is simply not true. Before the CCS was launched, one million women each year put their lives in the hands of illegal abortionists, clearly demonstrating that they believed that carrying their pregnancies to term was worse than paying the exorbitant price of an underworld abortion and risking their lives. Even at its peak, the CCS counseled only a fraction of the total number of women having illegal abortions, but most of these women would have chosen the same path had their been no clergy referral service. The CCS met a need; it did not create one.

Nearly one half a million women were referred to CCS doctors across America, and in Puerto Rico, Tokyo, Mexico, Canada, and England, and they received the best care available. The complication rate for CCS abortions is unknown, but one statistic that is known is a concrete testament to the safety of CCS abortions: in hundreds of thousands of referrals, there was only one death. If we accept Dr. Tietze's *conservative* estimate of one death per one thousand illegal abortions in the 1960s, the CCS had a mortality rate that was at least three or four *hundred* times lower. Thus, the CCS may have saved hundreds of lives, not to mention sparing hundreds (maybe thousands) of women the horrendous complications of botched but non-fatal abortions.⁷

⁷ For the Tietze statistics, see Chapter One. These estimates are very rough. It is impossible to determine exactly how many women were referred by the CCS (for my estimate, see Chapter Four, Note 34. To further complicate matters, many of the estimated four or five

What is not measured in these statistics, however, is the contribution the clergy made toward upholding the dignity of women through humane treatment and strict requirements that their abortion providers do the same. When Moody and his cadre began counseling in 1967, women seeking abortions were pariahs; they had literally no one to whom they could turn. "There was no institutional support for the usually quite young women who had problem pregnancies," Nanette Davis wrote recently. "Doctors were turning them down left and right, and psychiatrists considered them promiscuous or psychotic; hospitals were impossible in their institutional arrogance. Only the clergymen had a sense of what was happening, and how very isolating and frightening this pregnancy experience was." There can be no doubt that the CCS made an important humanitarian contribution to the lives of hundreds of thousands of American women.⁸

Nevertheless, the CCS was not without its faults. The Service was seen by some women as just one more obstacle that they had to overcome to be allowed to have an abortion. Some abortion rights advocates hoped that abortion would one day be considered merely a common medical procedure and as weighty a moral issue as a tonsillectomy. While clergy counseling was intended to place abortion in a moral context where women would be free from guilt, the very existence of abortion counseling prevented the moral issues related to abortion from being completely diffused. "We didn't want to diffuse abortion as a moral issue," explains Unsworth. "We wanted to cut away a lot of the moralizing reactions that weren't about the morality of the issue at all, but were really about the repression of women." Patricia Maginnis did not reject such distinctions. She called the Service the "Hominy Dominy Counseling Service" and distributed cartoons of a little priestly man with his head in his hands and a sign

hundred thousand women actually received "therapeutic" abortions or legal abortions in New York after 1970. Nevertheless, the CCS mortality rate was *dramatically* lower than the nation's, and by using Tietze's conservative estimate of abortion deaths I believe I have more than compensated for any overestimate of CCS referrals.

⁸ Nanette Davis, letter to author, 16 October 1997.

that read, "Women's Counseling for Problem Clergymen." Her opinion was undoubtedly shared by some, though there is no evidence of any widespread resentment of the Clergy Service.⁹

It is also important to consider not only the Service's success in helping many women, but its failure to help many others. Prior to the launching of Women's Services in July 1970, the Clergy Services throughout the country could do very little to assist economically disadvantaged women. Rev. Charles Straut, spokesperson for the New Jersey CCS, explained,

One of [Moody's] most poignant disparities between dream and reality was the fact that this wonderful service that he and Arlene were founding . . . was really only helping affluent women. And he knew it. We couldn't figure out a way to help the women who really needed help. We were always talking to people . . . about back-alley abortions done with coat hangers, but we knew damn well that that was only done on the poorest and most unfortunate women, who never could have been helped by our so-called 'counseling service' anyhow. Because we could find a lot of \$400 abortions, and a whole lot of \$1,000 and \$2,000 abortions, but we couldn't find any abortions for free.¹⁰

The harsh reality of illegal abortion was that the most unqualified abortionists and the most deadly home remedies were used by the poorest women, the women most beyond the reach of the CCS. This problem was ameliorated by the opening of Women's Services, which performed twenty percent of its abortions for a token fee and was one of the first clinics in the country to accept Medicaid. Unfortunately Women's Services could still only reach a limited number of poor women. A study of 8,500 Women's Services patients in the end of 1971 revealed that the proportion of women paying the token fee decreased dramatically as women came from regions further from New York City. Twenty-three percent of Women's Services patients from Northeastern states paid the minimum of twenty-five dollars for their abortions, while only eleven percent of women from the Midwest and nine percent of women from the South paid the

⁹ Unsworth, interview; Maginnis' cartoon is described in Gorney, *Articles of Faith*.

¹⁰ Straut is quoted in Gorney, "After Abortion Became Legal."

token fee at the clinic. The reason for this phenomenon was clear: women who could not afford Women's Services' full \$125 fee could also not afford the cost of travelling to New York. The clergy could not directly aid many of the women in the most dire need of assistance.¹¹

However, the CCS may have indirectly assisted low-income women through its efforts to bring Planned Parenthood into the abortion movement, through its economic leverage in the abortion market, and through its establishment of the medical paradigm of the ambulatory abortion clinic. As discussed in Chapter Five, individual CCS chapters put significant pressure on Planned Parenthood to get more involved in the abortion problem. In some cases, CCS chapters cooperated with Planned Parenthood in forming joint clinics and services. In other cases, such as in New York, Planned Parenthood and the CCS had a relationship that was strained, though not quite adversarial. The efforts by the National CCS to force Planned Parenthood to cease sending its poor cases to the clergy and develop its own alternatives may have had a powerful effect on Planned Parenthood. This thesis, however, does not explore these issues, and how significantly the CCS influenced Planned Parenthood remains unclear.

The CCS definitely had an effect on the abortion market's prices, though how strong an effect that was is difficult to determine. Carmen and Moody were confident that in the domestic abortion market the CCS forced the prices down dramatically. Acting as a medical clearinghouse, the National CCS had a tremendous number of referrals to offer, and as the abortion rights movement grew, it had a significant number of doctors to whom it could refer women. Thus, the National CCS had real market power, and as discussed in Chapters Four and Five, abortion prices decreased. Levin believes the CCS controlled the market price "to some degree." With the CCS offering abortions for \$200, competing doctors could not charge the excessive rates of \$600 to \$1,000 that were typical before the CCS developed into a national organization. "Though not everybody met the [CCS] price," explains Levin, "it did at least

¹¹ "Report of Clergy Consultation Service Referrals to Women's Services October 1, 1971 - January 31, 1972," CCS archive.

bring down prices." This far-reaching effect of the clergy's efforts is at least as important as its direct efforts in helping individual women.¹²

Women's Services was one of the Clergy Service's most important achievements. The first fully-licensed ambulatory abortion clinic in the country, Women's Services was intended to be a standard setter. Its innovations were discussed in detail in Chapter Five, and one in particular needs to be underscored here: the record of Women's Services, as illustrated in articles by Hale Harvey and Bernard Nathanson in *The New England Journal of Medicine*, provided powerful evidence that free-standing abortion clinics were not only safe, but the ideal setting for low-cost out-patient abortions. Whether Women's Service's legacy is a lasting one is a question whose answer is not explored in this thesis. The failure of the clinic to operate successfully at a lower patient volume after *Roe v. Wade* does not mean that the paradigm of Women's Services was unsuccessful. On the contrary, some aspects of its operation, such as pre-abortion counseling, have been repeated in clinics all over America. Planned Parenthood clinics assume the same kind of responsibility for low-income women that Women's Services did, but it is not known whether Planned Parenthood emulated the clergy clinic, or if it arrived at similar principles independently. The legacy of Women's Services is an issue that is worth studying in depth.

The most significant contribution of the CCS to the abortion rights movement, however, was to harness the moral power of the clergy. Larry Lader remembers that in the beginning of the movement "we needed a breakthrough. . . . So it was tremendously important when the clergy, the cloth, came to help. I cannot overestimate this." When the New York CCS began in 1967, abortion was a word that was so taboo it could hardly be spoken aloud. To have the members of the clergy not only saying the word, but supporting the deed, was a tremendous boost for the abortion rights movement. "It was to free that word up," Moody later explained.

¹² Levin, interview.

"To free it from the silence, from the whispered things." The clergy movement not only freed abortion from the silence, but it infused it with morality. As noted above, however, this moral contribution was not considered desirable by everyone in the abortion rights movement, but it was essential all the same. "Without the clergy movement," writes Davis, "any semblance of legitimization of abortion would have been unlikely."¹³

The media attention that the clergy attracted spread their message of the morality of abortion and the injustice of abortion restrictions. Each time a new chapter of the CCS was launched, the story was covered by the regional press, and a new part of America was introduced to the inescapable fact that prominent religious leaders supported abortion. Though the Clergy Consultation Service on Abortion was not a household word, it seems impossible that Americans could have been completely unaware that the abortion rights movement had religious support.

This in turn had a powerful political effect. A politician who feared the wrath of the Roman Catholic Church would be cognizant of the fact that there were Protestant and Jewish leaders on the other side of the debate, providing an important counterbalance. Furthermore, several CCS chapters, such as New York, Chicago, and Texas, found in their statistical studies that the religious demographics of the women they counselled were the same as those of the region. If one third of the women in the region were Catholic, so were one third of the women counselled by the CCS. Spencer Parsons publicized this fact heavily, and he found it was "political dynamite." A politician had a lot less to fear from his Catholic constituency if he knew that Catholic women were undergoing abortions just as frequently as Protestant and Jewish women. New York Assemblywoman Constance Cook remembers the power the clergy had as community leaders. "It was very important, in my opinion, to have their support," she explains. "The members [of the CCS] were well known, and they had quite a reach in the public

¹³ Lader, interview; Gorney, "Once Upon a Time in America"; Davis, *From Crime to Choice*, 129.

at that time."¹⁴

The Clergy Consultation Service has been disbanded for twenty-five years, but many of its members are still involved in abortion rights organizations. There is a clergy advisory board in Planned Parenthood and even a clergy abortion lobby organization, the Religious Coalition for Reproductive Choice. Moody told a reporter that if abortion were to become illegal again, he would return to the fight. "I would commit civil disobedience, I would do anything I needed to do," he said. Before her untimely death in 1994, Carmen claimed that public outrage would thwart any attempts to make abortion illegal again. "We now have a huge number of doctors all over this country who are used to doing abortions," she said in 1989. "And now we would have more civil disobedience than we did in the old illegal days. I don't think it will ever be exactly the way it was in 1967, when we had nothing. There's too much history, experience and knowledge." In the years since Carmen made her comments, the decline in the number of doctors willing to provide abortions and the violent acts committed against abortion clinics have cast the future security of abortion access into doubt. "It certainly hasn't helped to have a siege environment around clinics and to have people getting killed working around clinics," says Arthur Levin, now the director of the Center for Medical Consumers. "The one fear is that physicians are not being trained for the future." Nevertheless, the history of the abortion rights movements points to a broader base of support for women's right to choose than is generally acknowledged. The battle for abortion rights has been fought not just by feminists, politicians, and doctors, but by clergy. The role of the clergy in advocating the right to abortion was vital in the past, and may be so in the future.¹⁵

¹⁴ The proportion evidence is reported in Sarah Weddington, *A Question of Choice* (New York: G.P. Putnam's Sons, 1992), 33; Parsons, interview; Cook, interview.

¹⁵ Both Moody and Carmen are quoted in Gorney, "After Abortion Became Legal"; Levin, interview.