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Birth Control On The Border: Race, Gender, Religion, And Class In The Making Of The Birth Control Movement, El Paso, Texas. 1936-1973

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BIRTH CONTROL ON THE BORDER: RACE, GENDER, RELIGION, AND CLASS IN THE
MAKING OF THE BIRTH CONTROL MOVEMENT, EL PASO, TEXAS. 1936-1973

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MAKING OF THE BIRTH CONTROL MOVEMENT, EL PASO, TEXAS. 1936-1973

By

LINA-MARIA MURILLO, Ph.D.

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Birth Control on the Border: Race, Gender, Religion and Class in the Making of the Birth Control Movement in El Paso, Texas, 1936-1973

ABSTRACT

This study examines the history of the birth control movement on the U.S-Mexico border from 1936 until 1973. Historians have focused on various aspects of the history of reproductive control and rights nationally, but none have analyzed the borderlands region in this regard. In order to address this absence in the historical literature, this study seeks to highlight the role of organizations, activists, and patients, specifically within the ethnic Mexican community as they defined reproductive control and rights along the Texas border. El Paso, Texas served as a major port of entry for Mexicans and other groups at the turn of the twentieth century and was, therefore, viewed as a strategic site for population control. Ethnic Mexicans served as the labor force during the region's rapid industrialization at the turn of the twentieth century. Coupled with El Paso's proximity to Mexico, wealthy El Paso families perceived Mexicans' growing numbers both as a racial threat and economic necessity. In 1937, with help from the birth control pioneer Margaret Sanger, a group of influential white women garnered enough community support to open the Mothers' Health Center, the first birth control clinic on the border. Sanger's eugenic calls for population control through socially engineered families echoed the sentiments of many prominent El Paso community members. Their efforts were met with steep opposition from the Catholic Church, who charged birth control activists with inciting racial tensions in the city. Nearly a decade later, the clinic joined the Texas Birth Control League and became an affiliate of Planned Parenthood Federation of America. From its very inception, the organization in the borderlands touted population control as their major concern, particularly within the ethnic Mexican community in the region. In spite of clashes between the Church and birth control activists, thousands of women, overwhelmingly Catholic and Mexican, visited the clinic for reproductive care, including contraception, well into the 1970s.

However, the history of the first border clinic affords entry into a multiplicity of birth control histories in the borderlands. While women obtained contraception at local Planned Parenthood clinics, others traversed the border zone in order to access a different form of birth control. The profitable El Paso-Ciudad Juárez abortion corridor allowed American women in the 1960s and 1970s to procure this illicit procedure just across the national boundary. With help from a feminist abortion referral service in San Francisco, California thousands of women traveled to Mexico's northern cities in search of abortion providers before *Roe v. Wade* legalized the procedure in the United States. At the same time as abortion activists sought to flout restrictions to abortion access in the U.S. and Mexico, Chicana/os in South El Paso were beginning to mobilize. Although Planned Parenthood of El Paso promised birth control would help ameliorate poverty in the predominately ethnic Mexican neighborhoods, community members pointed to structural racism as the main culprit of their social and economic marginalization. By 1969 a group of community residents and Chicana/a professionals opened the Father Rahm clinic (later called Clinica La Fe), which boasted an all Chicana staff during its first years. By focusing on reproductive health as a cornerstone of their services, Chicanas actively questioned the role of white feminists and the patriarchal Catholic Church as they redefined the importance of reproductive justice within their community as the century came to a close.

Although early manifestations of the birth control movement in El Paso were emboldened by overpopulation rhetoric, by the 1960s and 1970s, radical feminists and Chicanas were contesting Planned Parenthood's aims in the borderlands focusing instead on reproductive rights and justice. Ultimately, this study contends that the history of the reproductive control and rights in the borderlands challenges national narratives about the movement and highlights the significance of ethnic Mexican women in the struggle for reproductive justice.

Table of Contents:

Acknowledgements.....	iii
Abstract.....	vi
Table of Contents.....	viii
List of Figures.....	ix
Chapter	
Introduction: Reproductive Control in the Borderlands.....	1
Chapter 1: Building the First Border Birth Control Clinic on the Border.....	17
Chapter 2: Race, Gender, and Overpopulation: Establishing Planned Parenthood of El Paso, 1937-1960.....	58
Chapter 3: Overpopulation and Reproductive Choice: Ethnic Mexican Women and Birth Control, 1945-1960.....	95
Chapter 4: Illegal Methods: Abortion in the Borderlands 1950-1970.....	127
Chapter 5: Reproductive Justice in the Age of Overpopulation: Chicanas and Planned Parenthood in 1970s El Paso, Texas.....	167
Conclusion: Reproductive Justice in the Present and Future.....	201
Bibliography.....	212
Curriculum Vitae.....	219

List of Figures

1. Ms. Maude Gillespie, <i>El Continental</i> News Clipping; Photograph of 519 S. Ochoa Clinic...	67
2. Clinic Letterhead, Circa 1954.....	69
3. “Race Building in an Empire,” Pamphlet, Birth Control League of Texas.....	77
4. “Instrucciones a Los Pacientes,” Pamphlet, Planned Parenthood of El Paso.....	81
5. Advertisement for Planned Parenthood, <i>El Continental</i> 1964.....	107
6. “Knock on Every Door,” Pamphlet.....	118
7. “The Abortees’ Songbook: Privacy.”.....	140
8. “The Abortees’ Songbook: Responsibility to the Abortion Rights Movement,”.....	146
9. “Letter from Dr. Sergio Rodriguez,” <i>Medical World News</i>	158

Introduction: Reproductive Control in the Borderlands

El Paso, at the time, had one of the largest maternal and infant death rates among cities of its size in the United States. Ignorance and superstition among the poverty stricken was rampant.¹

--Betty Mary Smith Goetting, 1959

It is generally held throughout the Mexican-American community of South El Paso that the existing health and social welfare systems are not sensitive to the community problems and needs. Because of the insensitive methods used in the delivery of health services, several deterrents to seeking, finding and receiving adequate health care in South El Paso exist.²

--Amelia Castillo, circa 1970

Davalos, in Juárez, who it turns out had a very beautiful, modern operating theater, and they were going all day, every day with U.S. abortion patients...Davalos invited us to come down and I was justifiably proud of his operation...³

--Patricia Teresa Jone Maginnis, 2015

Betty Mary Goetting, Amelia Castillo, and Patricia Maginnis's words show the trajectory of the birth control movement in the El Paso-Ciudad Juárez borderlands. While in the early 1900s population control rhetoric defined the need for birth control, by mid-century other activists and more sweeping reproductive demands altered this vision. As opposed to the historical literature of reproduction and birth control in the United States that has focused on national activism, science, and medicine, "Birth Control on the Border," adds to the growing historiography that seeks to understand how home-grown and regional movements for natal control and later reproductive rights and justice came to be, how the location affected the purpose of the movements in the area, and how local communities interpreted the need and significance of reproductive control along the national boundary.⁴ Thus this study reveals the ways reproductive control unfolded along the U.S.-

¹ Betty Mary Goetting, "My Association and Friendship with Margaret Sanger" in *Our Margaret Sanger by Many of Her Friends, Relatives and Colleagues*, vol. 1, ed. Erma Brown, Dorothy Brush, Masake Leward, and Ellen Watumull, 1st edition. (Copyright applied for 1959), unpublished manuscript, Sophia Smith Collection, Smith College, Northampton, Mass. 84.

² Amelia Castillo, "South El Paso Health Assistance Center," private collection, circa 1970.

³ Interview with Patricia Teresa Jone Maginnis, April 24, 2015.

⁴ In celebration of *Roe v. Wade's* 40th Anniversary, Linda Kerber argued for greater focus on local histories about women's reproduction and the movement for reproductive rights. She states "Here is where our students—undergraduate and graduate—can make a real difference by their research. Working with advisers and archivists, they can frame questions, and they can seek to reconstruct a history that is in grave of danger of being lost. They answers they find can contribute to the accumulation of necessary knowledge..." Linda Kerber, "The 40th Anniversary of *Roe v.*

Mexico border from 1937, which marks the opening of the first birth control clinic in El Paso, Texas, through 1973, the year *Roe v. Wade* legalized abortion across the country.

The first birth control clinic along the U.S.-Mexico border opened in April 1937 to mixed reviews as various members of the community came out to support as well as to deride its establishment. In the months prior to its inauguration, Betty Mary Smith Goetting, the founder of the Mothers' Health Center of El Paso, along with her ally and friend, the great American birth control pioneer, Margaret Sanger, set the stage for establishing a clinic at the edges of the nation-state. As Goetting suggested in the quotation, birth control promised a "new and constructive civilization" by curbing overpopulation—the supposed cause of wars, famine and poverty. The dire health concerns in South El Paso, the main ethnic Mexican enclave in the city, had drawn concern by Progressives since the turn of the twentieth century, but little was done to assuage the economic exploitation of the Mexican origin community that assured high levels of poverty. Moreover, de facto school segregation, and low wages coupled with derelict infrastructure and deplorable housing served to concentrate high infant mortality and maternal mortality rates in that area of town. Instead of addressing the social inequities that led to this health crisis, birth control activists believed that through proper education on family limitation, and controlling their reproduction, ethnic Mexican women could help improve conditions in the barrio. However these efforts were met with forceful resistance from the Catholic Church. As priests decried the class inequalities that led to a

Wade: A Teachable Moment," in *Perspectives on History: The Newsmagazine of the American Historical Association*, vol. 50, no. 7, (October, 2012), <https://www.historians.org/publications-and-directories/perspectives-on-history/october-2012/the-40th-anniversary-of-roe-v-wade>; See Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005); Laura Briggs, *Reproducing Empire: Sex, Race, Science and U.S. Imperialism in Puerto Rico*, (Berkeley: University of California Press, 2002); Elena Gutierrez, *Fertile Matters: The Politics of Mexican-Origin Women's Reproduction* (Austin: University of Texas Press, 2008) Lena McQuade, "Troubling Reproduction: Sexuality, Race and Colonialism in New Mexico, 1919-1945," (Ph.D. dissertation: University of New Mexico, 2008); Mary Melcher, *Pregnancy, Motherhood and Choice in Twentieth-Century Arizona* (Tucson: University of Arizona Press, 2012); Alexandra Minna Stern, "STERILIZED in the Name of Public Health," *American Journal of Public Health*, July 2005, Vol. 95, No. 7; Natalie Lira, "'Of Low Grade Mexican Parentage': Race, Gender and Eugenic Sterilization in California, 1928-1952," (Ph.D. dissertation: University of Michigan, 2015).

demand for natal control, the Church called for boycotts of Sanger's speeches and of businesses supporting the movement. Despite the contrasting rhetoric of birth control activists, imbued with eugenic and neo-Malthusian ideology, and Roman Catholic antagonism, ethnic Mexican women from El Paso and Ciudad Juárez came in large numbers to learn about and receive contraceptive information and devices until these birth control clinics permanently closed their doors in 2009. However, the promises made by the 1930s birth control activists never materialized, and disgraceful conditions in the barrio continued unabated well into the second half of the twentieth century.

In 1969, young Chicana/o professionals, inspired by the Chicana/o movement, joined with local community leaders in South El Paso to address the medical crisis in their barrios and created the Father Rahm clinic. It provided family planning and reproductive health exams. As Amelia Castillo, the first clinic director suggested in the quote above, the facility was sensitive to the concerns and needs of its community. By this time the Mothers' Health Center had affiliated with Planned Parenthood Federation of America, a strong international voice for family limitation, and had changed its name to Planned Parenthood of El Paso (PPEP).⁵ While this organization's mission continued to focus on curbing population growth, Chicana/os believed a more holistic approach, one premised on health and wellness as part of a larger social justice agenda, was needed in the barrio.

Two years before Chicana/os mobilized to address the healthcare desert in their communities, women from around the United States began arriving to El Paso attempting to quietly cross the border and obtain illegal abortions in neighboring Ciudad Juárez, Mexico. Albeit illegal in both the United States and Mexico, an illicit abortion business was flourishing just across the Rio Grande. Patricia Maginnis, a young feminist and pro-abortion activist living in California's Bay

⁵ The organization affiliated with Planned Parenthood in 1946 during a state meeting in Dallas. "Meeting Minutes September 1946," Planned Parenthood of El Paso records, MS 286, Box 1.

Area, offered a non-profit abortion referral service that allowed American women to use vetted abortion providers located along northern Mexico. As Maginnis explained above, she personally visited some of the clinics in Mexico to verify the use of proper medical standards and equipment. As law enforcement on both sides began to clamp down on the business, abortion providers became concentrated in Ciudad Juárez just minutes away from El Paso's downtown. The transnational birth control business and the controversy that ensued once it was discovered by the public facilitated the push for legalization of abortion in the United States.⁶

"Birth Control on Border," is the first study to offer analysis of reproductive control on the edges of Mexico and the United States where the nation-state's power is ever present and permeable. Three themes guide this study. The first exemplifies what the historian Johanna Schoen describes as the tensions between "choice and coercion."⁷ Reproductive control has been simultaneously a source for liberation and a method to dominate women's fertility. This was particularly true in El Paso, as the movement began in order to control what elites believed to be a burgeoning poor ethnic Mexican population. After the Mexican Revolution and the Great Depression, wealthy and middle-class El Pasoans saw ethnic Mexicans as a tax burden on (presumably white) citizens who strove to make their "community a decent fine place in which to rear ... children."⁸ Ethnic Mexican women's desires to reproduce were therefore viewed as suspect and a potential drain on American (presumed Anglo or white non-Mexican) citizens' own reproductive capabilities. As anthropologist Leo R. Chávez suggests of discourse concentrated in the latter part of the twentieth century, Latina reproduction has been cast as "irrational, illogical, chaotic, and therefore, threatening."⁹ Thus, birth

⁶ Because of public pressure in the city, and also, perhaps, because of their own conservative views on abortion, Planned Parenthood of El Paso never offered abortion procedures, before or after *Roe v. Wade*.

⁷ Johanna Schoen, *Choice and Coercion*.

⁸ Betty Mary Smith Goetting, "Draft of Speech," Box 11, Folder 4.

⁹ Leo R. Chavez "A Glass Half Empty: Latina Reproduction and Public Discourse," *Human Organization*, Vol .63, No. 2, (2004), 175.

control clinics were created specifically to bestow upon poor ethnic Mexican women the miracle of family limitation, which would, in the eyes of wealthy white progressives in El Paso, curb poverty and social degeneration in El Paso's barrios. Planned Parenthood clinics operated in this fashion well into the 1970s. Seemingly tone-deaf to changing social mores and civil unrest across the country, Planned Parenthood in El Paso was not involved in the fight to legalize abortion in the late 1960s and 1970s and did little to embrace Chicana activists as they sought greater access to healthcare. I argue that while Planned Parenthood dominated the birth control movement for a large part of the early twentieth century, by the late 1960s Chicana and abortion rights activists demanded a much more comprehensive birth control agenda than Planned Parenthood sought to address.

The tensions between coercion and choice underscore a second theme that stretches the length of this study: the construction of ethnic Mexican and Chicana reproduction as problematic and in need of control. This process relies on the racialization of Mexicans within the United States. Chicana/o scholars suggest that ethnic Mexicans were viewed as racial "half-breeds" in the nineteenth century and, thus, considered "incompatible" with the larger "pure white stock" American nation, particularly after the U.S war with Mexico in 1848. Although considered legally white under the Treaty of Guadalupe Hidalgo, Chicana scholar Laura Gómez explains that their social status as racially "in between" constructed Mexicans as the constant outsiders inside the United States.¹⁰ Looking at cities like El Paso can help explain the ways in which ethnic Mexicans were seen as outside the boundaries of proper American citizenship—exposed to oppressive living conditions and exploitative labor—further revealing the mechanisms that racialized their reproduction. Historian Mario García contends that "occupational and wage discrimination, in

¹⁰ Laura Gómez, *Manifest Destinies: The Making of the Mexican American Race* (New York: New York University Press, 2007), 83.

addition to racial and cultural prejudice, kept them [Mexicans] tied to...slums where the worst housing existed.”¹¹ Additionally, historian Monica Perales states that Mexican residents of the city were an integral part of the economic boom in the early twentieth century, primarily because city officials were able to exploit their labor.¹² In El Paso, as in other border cities, ethnic Mexicans were seen as both a racial threat and economic necessity. Thus, rather than championing sterilization of Mexican origin women, the birth controllers believed it was in the city’s best interest to simply constrict reproduction through contraception.¹³ This phenomenon can be linked to what anthropologists call *stratified reproduction*: “the power relations by which some categories of people are empowered to nurture and reproduce, while others are disempowered.”¹⁴ The racialization of ethnic Mexicans in El Paso, thus, empowered whites to decide how Mexican women should reproduce. Like other scholarship, this study suggests that in California and El Paso, Texas Mexican origin women’s fertility, reproduction, and sexuality, was constructed as abnormal, unfit and excessive much earlier than in other places.¹⁵

Furthermore, “Birth Control on the Border” addresses the ways that coercion operated to control ethnic Mexican women’s reproduction in the borderlands. Compulsory sterilization of poor

¹¹ Mario Garcia, *Desert Immigrants: The Mexicans of El Paso, 1880-1920*. (New Haven: Yale University Press, 1981), 127.

¹² Monica Perales, *Smeltertown: Making and Remembering a Southwest Border Community* (Chapel Hill: University of North Carolina Press, 2010), 30.

¹³ Leo R. Chavez “A Glass Half Empty: Latina Reproduction and Public Discourse,” *Human Organization*, Vol .63, No. 2, 2004; Alexandra Minna Stern, “STERILIZED in the Name of Public Health,” *American Journal of Public Health*, July 2005, Vol. 95, No. 7, pp. 1128-1138; Elena Gutiérrez, *Fertile Matters*; Virginia Rose Espino, “Women sterilized as they give birth: Population control, eugenics, and social protest in the twentieth-century United States,” (Ph.D. dissertation: Arizona State University, 2007).

¹⁴ See Faye Ginsburg and Rayna Rapp, “Introduction: Conceiving the New World Order,” and Shellee Colen, “‘Like a Mother to Them’: Stratified Reproduction and West Indian Childcare Workers and Employers in New York,” in *Conceiving the New World Order: The Global Politics of Reproduction*, eds. Faye Ginsburg and Rayna Rapp, (Berkeley: University of California Press, 1995); Leo R. Chavez “A Glass Half Empty: Latina Reproduction and Public Discourse,” *Human Organization*, Vol .63, No. 2, 2004

¹⁵ See Lena McQuade, “Troubling Reproduction: Sexuality, Race and Colonialism in New Mexico, 1919-1945,” (Ph.D.dissertation: University of New Mexico, 2008); Natalie Lira, “‘Of Low Grade Mexican Parentage’: Race, Gender and Eugenic Sterilization in California, 1928-1952,” (Ph.D. dissertation: University of Michigan, 2015); Heather M. Sinclair, “Birth City: Race and Violence in the History of Childbirth and Midwifery in El Paso-Ciudad Juárez Borderlands, 1907-2013,” (Ph.D. dissertation: University of Texas at El Paso, 2016).

women and women of color serve as the main examples of coercion within the historical literature; however, the more subtle attempts to discipline ethnic Mexican women's reproduction are understudied.¹⁶ In much of its advertising, Planned Parenthood of El Paso insisted that the use of birth control was voluntary and reversible. Rather than championing forced sterilizations, I argue that birth controllers, like Goetting, sought to enforce specific patterns of reproduction that were in line with a post-Depression era vision of frugality and "living within ones means." As Goetting explained, "this privilege [birth control] has been withheld from the poor who should share in this above any other form of social security. And they pay in terms of ill health, infant deaths, maternal deaths. They pay for it in slums, child labor, unemployment [sic]. These are the victims of America[n] society..."¹⁷ Although women were never forced to use contraception, the rhetoric that accompanied the movement sought to *educate* them on the economic morality of contraception. Birth control would lift the destitute out of poverty and release the affluent classes from the burden of supporting "unwanted children." Goetting reflected on this as she remarked on the values and mores of the well-educated and economically empowered family who "knows that today the excessively large family is physically and economically undesirable and they have replaced chance fecundity with intelligent control."¹⁸ Thus, ethnic Mexican families were viewed in contrast to their white counterparts as chaotic and in need of reproductive discipline. According to sociologist Adele Clark, "the term *disciplining* becomes inflected with connotations of exercising *control over* participating individuals and groups...Disciplining thus can involve policing and enforcing particular

¹⁶ Alexandra Minna Stern, "STERILIZED in the Name of Public Health," *American Journal of Public Health*, July 2005, Vol. 95, No. 7, pp. 1128-1138; Elena Gutiérrez, *Fertile Matters: The Politics of Mexican-Origin Women's Reproduction* (Austin: University of Texas Press, 2008); Virginia Rose Espino, "Women sterilized as they give birth: Population control, eugenics, and social protest in the twentieth-century United States," (dissertation: Arizona State University, 2007); Natalie Lira, "'Of Low Grade Mexican Parentage': Race, Gender and Eugenic Sterilization in California, 1928-1952," (dissertation: University of Michigan, 2015).

¹⁷ Betty Mary Smith Goetting, "Draft of Speech," Betty Mary Smith Goetting Papers, MS 316, Box 11, Folder 4.

¹⁸ Betty Mary Smith Goetting, "Draft of Speech," Betty Mary Smith Goetting Papers, MS 316, Box 11, Folder 4.

perspectives.”¹⁹ Therefore, I contend that disciplining and by extension controlling ethnic Mexican women’s reproduction was at the heart of the movement in El Paso when it began in 1937.²⁰ In the eyes of birth controllers, the city’s proximity to Mexico underscored the dire need to keep the numbers of Mexican origin people within the city in check. As one early supporter of the clinic noted, “The location of El Paso on the Border makes it [a birth control clinic] essential.”²¹ El Paso Planned Parenthood clinics did not engage in compulsory birth control or involuntary sterilizations, but not for lack of trying. Birth controllers struggled for decades to make contraception a part of public health campaigns and mandatory for women with tuberculosis and other signs of ill health, as well as championing door-to-door campaigns offering contraceptives to women in the barrio. Though historians have long documented the eugenic and population control rhetoric that accompanied Sanger’s birth control crusade nationally and internationally, this study is the first to analyze the phenomenon along the U.S.-Mexico border and within the ethnic Mexican community in El Paso, Texas.²²

¹⁹ Adele Clarke, *Disciplining Reproduction: Modernity, American Life Sciences, and “The Problem of Sex,”* (Berkeley: University of California Press, 1998), 7.

²⁰ Further studies are needed in order to understand why Texas never adopted compulsory sterilization laws like other states did particularly in the 1920s and 1930s. In 1948 Clarence Gamble, along with the Human Betterment League attempted to bring sterilization laws to Texas, even furnishing model legislation, but their plan never found enough supporters. Planned Parenthood of El Paso always graciously declined the sterilization services offered by Gamble. Clarence Gamble Papers, 1920-1970s, H MS c23, box 42, folder 687, Center for the History of Medicine, Francis A. Countway Library of Medicine.

²¹ “South El Paso Birth Control Clinic Given Endorsement of Club Women,” *El Paso Herald-Post*, (El Paso, Texas), February 6, 1937.

²² David Kennedy, *Birth Control in America: The Career of Margaret Sanger* (New Haven: Yale University Press, 1970); James Reed, *From Private Vice to Public Virtue: The Birth Control Movement and American Society Since 1830* (New York: Basic Books, Inc., Publishers, 1978); Linda Gordon, *The Moral Property of Women: A history of Birth Control Politics in America* (Urbana: University of Illinois Press, 2002); Carole McCann, *Birth Control Politics in the United States, 1916-1945*. (Ithaca: Cornell University Press, 1994); Wendy Kline, *Building a Better Race: Gender, Sexuality, and Eugenics from the Turn of the Century to the Baby Boom* (Berkeley: University of California Press, 2001); Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005); Betsy Hartman, *Reproductive Rights and Wrongs: The Global Politics of Population Control* (Boston: South End Press, 1995); Mathew Connelly, *Fatal Misconceptions: The Struggle to Control World Population* (Cambridge: Belknap Press of Harvard University Press, 2008); Andrea Tone, ed., *Controlling Reproduction: An American History* (Wilmington: Scholarly Resources, Inc., 1997).

The last major theme that runs throughout my study is the contestation of discourses on coercion which delineate the forces of “choice” I link to Loretta Ross’s iterations on reproductive justice. While Ross’s specific analysis of African American women’s experiences with reproductive control and activism does not directly relate to this study, her concerns about the production of scholarship on these issues underscores the impetus for my dissertation.

African American women have a long history in the struggle for reproductive freedom, but racist and sexist assumptions about us, our sexuality and our fertility have disguised our contributions to the birth control and abortion movements in the United States. Distilling facts from the myths is difficult because so many accounts of African American history are written from perspectives that fail to even acknowledge our presence in the reproductive freedom movement.²³

Ethnic Mexican women, Chicanas, and Latinas rarely appear as active agents in the narratives about reproductive rights in the United States. What little is known about their reproductive lives is told in narratives about compulsory sterilization and few describe how these women sought out birth control on their own terms.²⁴ I acknowledge that pinpointing Mexican origin women’s agency is no easy feat, given that many of the sources used for this dissertation belong to Planned Parenthood of El Paso archives and the Betty Mary Goetting papers. However, I suggest that a careful reading of these documents, particularly the data collected by clinic staff and doctors in order to assess the patients that attended the clinics for the first 30 years, reveals how ethnic Mexican women scrutinized, accepted or rejected various forms of contraception and reproductive information. Additionally, this data reveals how Chicanas in the Southwest, like their Puerto Rican counterparts, were participants in research studies for new spermicidal foams, jellies and the contraceptive pill in the late 1950s and early 1960s. Further still, the work of Amelia Castillo and the other women in Segundo Barrio, who sought to carve out their own space for providing healthcare, which included

²³ Loretta Ross, “African-American Women and Abortion: 1800-1970,” in *Theorizing Black Feminisms: The Visionary Pragmatism of Black Women*, eds. Stanlie M. James and Abena P.A. Busia (London: Routledge, 1993), 141-142.

²⁴ Elena Gutierrez, Alexandra Minna Stern, Laura Briggs, Jennifer Nelson, Lena McQuade, and Natalie Lira.

the distribution of contraception and comprehensive reproductive medical exams, demonstrates how ethnic Mexican women did take charge of their reproductive care and health despite decades of neglect from charitable organizations and the state.

Moreover, notions of reproductive choice are significant in the border region in regards to the second wave women's movement and the Chicana/o movement that brought abortion and reproductive concerns by women of color to the fore, respectively. Chicana and abortion rights activists were not protesting in favor of women's reproductive rights in downtown El Paso, however, they were involved in radical attempts to subvert the status quo. Using a clandestine abortion referral service, Patricia Maginnis aided hundreds of women across the El Paso-Ciudad Juárez divide as they sought to procure illegal abortions in the years before *Roe v. Wade*. Fleeing restrictive laws in the United States, American women fled to Mexico in search of reproductive freedom. During those same years Amelia Castillo was writing grants in order to acquire funding for a healthcare clinic in Segundo Barrio, one of the Southside's main ethnic Mexican neighborhoods. Although population control advocates, their rhetoric tinged by eugenic ideas of racial purity, dominated the early part of the reproductive control movement along the border, by mid-century underground abortion referral services and the Chicana/o movement had altered the linear emphasis of institutions like Planned Parenthood in the city.

The border further accentuates notions of choice within the birth control movement and reproductive rights movement because it contests the movement's well established histories as well as diversifies its cast. Historians up to this point have focused on the life of Margaret Sanger and her associates, like Clarence Gamble, and other prominent scientists and doctors involved in the movement's inception.²⁵ There are numerous studies about the history of reproductive

²⁵ David Kennedy, *Birth Control in America: The Career of Margaret Sanger* (New Haven: Yale University Press, 1970); James Reed, *From Private Vice to Public Virtue: The Birth Control Movement and American Society Since 1830* (New York: Basic Books, Inc., Publishers, 1978); Linda Gordon, *The Moral Property of Women: A history of Birth Control Politics in America* (Urbana:

technologies, from early douches to the diaphragm and the creation of the Pill.²⁶ Histories about the creation of birth control clinics, as well as research on Catholicism and contraception line the edges of the historiography.²⁷ Fascinating research has been done to capture the troubling history of abortion across the United States, although fewer histories exist about women of color in the movement, particularly in the 1920s and 1930s.²⁸ I bundle these various branches of scholarship in order to show how the borderlands movement compliments, but also contests, these well-established narratives. “Birth Control on the Border” reveals how ideas about, technologies for, and resistance and receptiveness to reproductive control were deployed on the Mexico-U.S. borderlands.

Presently these histories are replete with the achievements of mostly white, middle-class women, who for decades dominated these reproductive control campaigns. Rather than focus solely on the accomplishments and tenacity of white birth controllers in the borderlands, my research seeks to foreground the conflict between white activists and their ethnic Mexican counterparts in El Paso and later in Juárez throughout the twentieth century. There is a change in tone between in this

University of Illinois Press, 2002); Carole McCann, *Birth Control Politics in the United States, 1916-1945*. (Ithaca: Cornell University Press, 1994); Ellen Chesler, *Woman of Valor: Margaret Sanger and the Birth Control Movement in America* (New York: Simon and Schuster, 1992); Jean H. Baker, *Margaret Sanger: A Life of Passion* (New York: Hill and Wang, 2011)

²⁶ Andrea Tone, *Devices and Desires: A History of Contraceptives in America* (New York: Hill and Wang, 2001); Andrea Tone, eds. *Controlling Reproduction: An American History* (Wilmington: Scholarly Resources, Inc., 1997); Elizabeth Siegel Watkins, *On the Pill: A Social History of Oral Contraceptives, 1950-1970* (Baltimore: The Johns Hopkins University Press, 1998); Bernard Asbell, *The Pill: A Biography of the Drug that Changed the World* (New York: Random House, 1995).

²⁷ Rose Holz, *The Birth Control Clinic in a Marketplace World* (Rochester: University of Rochester, 2014); Cathy Moran Hajo, *Birth Control on Main Street: Organizing Clinics in the United States, 1916-1939*, (Urbana: University of Illinois Press, 2010); Annette B. Ramírez de Arellano and Conrad Seip, *Colonialism, Catholicism, and Contraception: A History of Birth Control in Puerto Rico*, (Chapel Hill: University of North Carolina Press, 1983); Kathleen Tobin, *The American Religious Debate Over Birth Control, 1907-1937* (Jefferson: McFarland and Company, Inc., 2001); Leslie Woodcock Tentler, *An American History: Catholics and Contraception* (Ithaca: Cornell University Press, 2004); Tom Davis, *Sacred Work: Planned Parenthood and Its Clergy Alliances*, (New Brunswick: Rutgers University Press, 2005); Sharon M. Leon, *An Image of God: The Catholic Struggle with Eugenics* (Chicago: University of Chicago Press, 2013).

²⁸ James Mohr, *Abortion in America: The Origins and Evolution of National Policy, 1800-1900*, (Oxford: Oxford University Press, 1979); Rosalind Pollack Petchesky, *Abortion and Woman's Choice: The State, Sexuality, and Reproductive Freedom*, (Boston: Northeastern University Press, 1990); Kristin Luker, *Abortion and the Politics of Motherhood*, (Berkeley, University of California Press, 1984); Leslie J. Reagan, *When Abortion Was a Crime: Women, Medicine, and the Law in the United States, 1867-1973* (Berkeley: University of California Press, 1997); Carole Joffe, *Doctors of Conscience: The Struggle to Provide Abortion Before and After Roe v. Wade*, (Boston: Beacon Press, 1995); Johana Schoen, *Abortion after Roe: Abortion After Legalization* (Chapel Hill: University of North Carolina Press, 2015); Jennifer Nelson, *Women of Color and the Reproductive Rights Movement* (New York: New York University Press, 2003); Loretta Ross, Elena Gutiérrez, Marlene Gerber, and Jael Silliman, *Undivided Rights: Women of Color Organizing for Reproductive Justice*, 2nd Edition, (Chicago: Haymarket Books, 2016).

project as the first three chapters rely heavily on archival materials from Planned Parenthood that foreground the voices of those at the top. However, the last chapters reveal the voices of those at the margins of the birth control debate and their attempts to claim space within it. Thus, an analysis of the birth control movement on the border expands our understanding of the subjects involved, as I attempt to show how radical feminists and ethnic Mexican women contributed to the movement as patients and later as field workers and activists demanding a more expansive healthcare movement in their communities.

“Birth control on the Border” is divided into five chapters that each engage events, relationships, organizations and individuals that comprise the history of the birth control movement in the borderlands. The first three chapters center on the establishment of Planned Parenthood in El Paso, and chapters four and five describe the birth control movement outside the walls of the expanding birth control institution. Chapter one seeks to understand the forces that engendered the movement in El Paso by examining the “population problem” in the city from its creation in the 1880s to the founding of its first birth control clinic in 1937. Although a mostly white city, the influx of migrants in the wake of the Mexican Revolution threatened to outpace the growth of the Anglo population there and heightened racial tensions. While ethnic Mexicans’ cheap labor was an economic necessity, the white establishment attempted to keep them economically and politically subordinate via insufficient wages and access to derelict housing. Margaret Sanger made several trips to El Paso in the early 1930s before her birth control message finally resonated in 1937 as wealthy El Paso families garnered enough money and support to create a clinic. Backlash from the Catholic Church was swift and city leaders clashed over the meaning of birth control for their border city. National fears about overpopulation and its more dire connections to racial degeneration, famine and war trickled down to the borders of the nation. Rather than foreground

feminist ideals about liberation through contraception, activists in El Paso touted birth control as the best way to end poverty and overpopulation in the mostly ethnic Mexican areas of the city.

Chapter two focuses on the years between 1940 and 1960, and the ways Planned Parenthood of El Paso aligned its message of overpopulation with state, national and international birth control agencies in order to create a more sustainable movement, however neglecting local ethnic Mexican women's potential contributions to the cause. Although guided by PPFA regulations, PPEP worked in various ways to fundraise and train staff and volunteers in order to serve a population they viewed as hyper-fertile and in dire need of birth control. By 1945 El Paso had more clinics than any other city in Texas. PPEP was organized by some of the most capable and well connected women in the city. Through local women's clubs, church groups (mostly Protestant and Jewish who were beginning to come around to the idea of birth control) and businesses, the women on the board of directors sought to educate the community about the importance of contraception for the "poorest among us." They pursued the assistance of well-known and respected doctors as well as bilingual nurses to work at the clinics. Social workers were hired to attract patients not only in the barrio, but at local hospitals and maternity clinics around the city. Throughout its first twenty years, other than the women hired to clean the clinics, the organization—especially on the board—remained overwhelmingly white in its racial makeup. There were no ethnic Mexican women working on the board, as nurses, or as social workers until the late 1950s. White field workers and nurses found it increasingly difficult to work within a community they felt did not whole-heartedly welcome contraception. Consequently, by 1959, PPEP hired several ethnic Mexican field workers whose enthusiasm and dedication propelled them to outperform social workers before them. Countless new patients streamed into the clinic just as new contraceptive technologies, like the Pill, revolutionized the movement for decades into the future.

Chapter three traces the use of PPEP clinics by mostly Mexican-origin women and how new birth control technologies provided problematic opportunities for pharmaceutical companies and population control advocates as they capitalized on women's desires to control their fertility in the 1960s. Technological advances in contraceptives dominated clinic life in the early 1960s, as women had greater access to diaphragms, spermicidal jellies and the Pill. Whereas the women on the PPEP board of directors created rules and regulations that governed the use of the clinic, the national organization championed the use of experimental contraceptives and provided local clinic patients as case studies. PPEP patients cooperated with research, but it is unclear to what degree. However, what can be gleaned from clinics missives is that patients did reject or abandon particular contraceptives, which suggests attempts to exercise autonomy and self-interest. The organization's intense focus on ethnic Mexican fertility changed when news broke in the early 1960s that PPEP was the recipient of cutting edge birth control technologies, and women of different races, ethnicities and economic backgrounds arrived at the clinic requesting contraceptives. By the end of the 1960s board members decided that all women desiring birth control, regardless of their economic wealth, would not be turned away. Even as women from varying socio-economic backgrounds sought birth control, PPEP stayed on message underscoring the seriousness of overpopulation. Door-to-door campaigns characterized PPEP's attention on population control in the late 1960s. By utilizing educational models developed in Puerto Rico years before, field workers focused specifically on areas with high concentrations of ethnic Mexican women in order to distribute experimental forms of contraception. Though ethnic Mexican women commanded some control over use of contraceptives during these years, their autonomy was mired in a population control rhetoric that defined PPEP at the time.

While the first three chapters focus on Planned Parenthood in El Paso, chapter four examines the history of the illicit abortion referral service that provided a major reproductive health

service along Mexico's northern border. This chapter discusses the complex nature of the underground border business populated by feminist activists, rogue doctors and clinics, and by hundreds of women seeking unlawful methods for reproductive health. Years before the Supreme Court legalized abortion in 1973, clinics specializing in the procedure flourished on the northern Mexican boundary. The creation of the Society for Humane Abortion (SHA) spearheaded by two California feminists, Patricia Maginnis and Rowena Gurner, helped American women find safe and inexpensive abortions in Japan, Canada and Mexico. Maginnis had long standing connections with abortion providers in Tijuana and Ciudad Juárez, where hundreds (if not thousands) of women visited clinics from about 1966 to the early 1970s. At its height SHA had subverted laws in both the United States and Mexico in order to secure abortion procedures for women who wanted them and created a fascinating world of doctors, lawyers, abortion providers, clinics and activists willing to put their lives at risk in order to advance this cause, making large amounts of money in the process. SHA's referral service helped to shed light on the dangerous circumstances American women were willing to endure in order to obtain abortions, and these so-called "abortion mills" in Mexico set the backdrop for the legalization of abortion in the United States in 1973.

Chapter five recovers the history of Chicanas and their participation in the reproductive justice movement in El Paso in the late 1960s and early 1970s. While civil rights movements articulated the fundamental requirements for social justice for women and people of color across the United States, tensions over reproductive care and access to basic health facilities brought discourses on overpopulation and the meaning of citizenship to a head in the city. At the same time that Planned Parenthood of El Paso fought for greater access to poor women by proposing the use of public health clinics in order to distribute birth control information, Chicana activists were fighting for basic healthcare including birth control in the barrio. PPEP continued to suggest that South El Paso (the Segundo Barrio and Chihuahueta areas), whose poverty was notorious, suffered from

overpopulation. Chicanas on the other hand, all but ignored PPEP plans, and continued their work to bring greater access to all forms of healthcare to their communities. As the Chicana/o movement sought to gain respect and representation on a national level, Mexican American women in El Paso worked tirelessly to secure a more holistic reproductive health program.

“Birth Control on the Border,” is not an attempt to condemn organizations like Planned Parenthood or to merely “add and stir” Mexican origin women into the narrative of a movement dominated by white women. Rather, I suggest that examining reproductive control from the national margins contests earlier histories and complements new studies stressing how ethnic Mexican women’s contributions as patients and activists challenges the myths that they were not interested or concerned with their reproductive health and lives. Additionally, it highlights the ways in which the border afforded freedom for some women, while marking ethnic Mexican women’s bodies and their reproduction as inherently threatening to the national body. I believe that reproductive choice, freedom, justice and autonomy lie at the very foundation of our existence. Because of our over consumption, our planet’s future is in jeopardy, and this coupled with the loss of resources will guarantee that the issue of overpopulation will rise again. Wars raging across the globe, the concentration of wealth in the hands of the few, the indiscriminate violence against women and people of color from the state and those acting on its behalf, the prison industrial complex, the corporatization of education, the loss of privacy, and the tightening grip on reproductive rights are all part of a larger system that views our bodies as expendable and valueless. This study, then, is an examination of the forces that led to the creation of this oppressive system along the U.S.-Mexico border during the twentieth century, and how women at various moments fought back in order to reclaim their reproductive autonomy.

Chapter 1: Building the First Birth Control Clinic on the Border

With support from the birth control pioneer Margaret Sanger, the Mothers' Health Center of El Paso, Texas opened on April 27, 1937 becoming the first birth control clinic along the U.S.-Mexico border.¹ Days before the clinic opened, Mrs. Betty Mary Smith Goetting, the president of the clinic's board, declared: "We believe with this clinic a new era is beginning in El Paso, an era of lessening relief burden and of social progress."² While hundreds of women were clamoring for access to contraception, others thought birth control could be used for eugenic purposes in order to root out those who were considered "unfit" and to curb population. By the late 1930s women's liberation from unwanted pregnancy through birth control had been muted by a desire to focus on population control and eugenics. Sanger aligned her cause with doctors, scientists, and wealthy financiers as a means to address population quality and quantity.³ Goetting, a progressive activist, believed birth control would reduce poverty and destitution in El Paso's Southside, an area populated by a burgeoning ethnic Mexican community.⁴ Goetting organized like-minded women to support the cause. Mrs. Albert E. Ponsford, chairman of the Young Matron's Department of the Women's Club, asserted that birth control "would be a great asset particularly for the Spanish-speaking population of El Paso."⁵ Armed with two powerful slogans, "Every Child a Wanted Child"

¹ The Mothers' Health Center became the 323rd clinic to open in the nation. "Birth Control Clinic Sites Are Sought," *El Paso Herald-Post* (El Paso, Texas) February 24, 1937.

² "El Paso Birth Control Clinic Under Sanger Plan Opens Tuesday," *El Paso-Herald Post* (El Paso, TX) April 24, 1937; "Open Birth Control Clinic," *El Paso Times* (El Paso, TX) April 25, 1937.

³ Linda Gordon, *The Moral Property of Women: A History of Birth Control Politics in America*. (Urbana: University of Illinois Press, 2007), 243.

⁴ In a phone conversation with the author, her son Kurt E. Goetting noted her connection to the suffrage movement during her short stint in New York City. According to Kurt Goetting, it was during this time when Betty Mary was introduced to the birth control movement in the early 1910s. Notes on language: The documents used for this study are not always clear in discerning between nationality and ethnicity, thus I will use the terms *ethnic Mexican* and *Mexican origin* to discuss this community in El Paso.

⁵ "South El Paso Birth Control Clinic Given Endorsement of Club Women," *El Paso Herald Post*, (El Paso, Texas), February 6, 1937, 1.

and “A Charity to End All Charity,” the Mothers’ Health Center championed ideas that connected welfare, racial degeneration, and overpopulation with poverty and disease in the barrio.⁶

While city leaders and wealthy residents were enthusiastic about bringing birth control to South El Paso, the Catholic Church along with others in the community were not moved by Sanger’s message.⁷ Battles over the creation of the clinic took center stage in newspaper columns, on the pulpit, and via mail. Although some Catholics stressed women’s natural roles as mothers, others suggested Sanger was using contraception as a remedy for poverty, particularly in El Paso’s Southside. As mostly Anglo and Jewish wealthy El Paso women created committees to begin fundraising for the clinic, Catholic priests aided by Mexican civic leaders vehemently opposed the move. As activists and the Church vied for authority over the city’s conscience, there was a third group of active participants, whose choices, decisions, and beliefs were often ignored or misrepresented entirely as the first years of the birth control movement took hold. Hundreds of poor women from all over El Paso sought basic access to reproductive care and found support at the birth control clinic even as the women who created the clinic viewed their reproductive capabilities as suspect. Early reports from the Mothers’ Health Center suggest that women using its services were overwhelmingly Catholic and Mexican.

The creation of the first birth control clinic along the border renewed race, gender, and class tensions around overpopulation that had long pitted city elites and progressive Anglo residents against the burgeoning ethnic Mexican community. Although many women wanted access to contraception, birth control was viewed by some as yet another attempt to control the poor, largely ethnic Mexican population in South El Paso. The Catholic Church believed birth control to be

⁶ “Mothers’ Health Center, The Password,” March 1938. *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library, El Paso, Texas.

⁷ “Open Birth Control Clinic,” *El Paso Times* (El Paso, TX) April 25, 1937.

immoral and fought vehemently against it. These various groups defined the opinions in El Paso, a city longing for its place in a modernizing nation. This chapter contends that while women used birth control in the barrio, progressive white women intended it to curb the growing ethnic Mexican population and discipline Mexican origin women's fertility on the border.⁸ By focusing on the margins of the nation-state, this chapter examines how birth control came to dominate the politics of population along the border and how reproductive control came to racialize Mexican origin women's fertility.⁹

The national campaign for women's reproductive rights started in the late nineteenth century with women like Elizabeth Cady Stanton championing "voluntary motherhood" for married women.¹⁰ Yet it was not until Margaret Sanger coined the term birth control in 1915 that the movement officially took off.¹¹ Encouraged by socialist radicals like Emma Goldman, Sanger, an ardent feminist and socialist herself, believed birth control would help women "rise in one big sisterhood to fight this capitalist society which compels a woman to serve as an implement for man's use."¹² Sanger toured the country in 1916 with a message that encompassed ideas that connected birth control to sexual liberation and free speech.¹³ Historian Linda Gordon suggests that intellectuals during this time, influenced by Sigmund Freud's popular ideas of the dangers of sexual repression, believed "birth control now meant reproductive self-determination along with unlimited

⁸ Historian Johanna Schoen explains birth control was not only supported by public health initiatives, but was attractive for eugenic and economic reasons. Thus, "the distribution of birth control to the poor would reduce the birthrate among those currently on relief" and it could curb the population "whose offspring were considered to be undesirable." Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: The University of North Carolina Press, 2005), 71.

⁹ Two other studies exist at this time that discuss birth control in the borderlands, but neither describe the use of birth control in a border city. See Mary Melchor, *Pregnancy, Motherhood, and Choice in Twentieth Century America* (Tucson, University of Arizona Press, 2012); and Lena McQuade, "Troubling Reproduction: Sexuality, Race, and Colonialism in New Mexico, 1919-1945, (dissertation: University of New Mexico, 2008).

¹⁰ Gordon, Chapter 4: Voluntary Motherhood.

¹¹ Gordon, 138.

¹² Margaret Sanger as quoted in Miriam Reed, *Margaret Sanger: Her Life in Her Words* (Fort Lee: Barricade Books, 2003), 35.

¹³ Gordon, 154.

sexual indulgence.”¹⁴ The sexual revolution of the early twentieth century was nurtured by bohemians, radicals, artists, free love advocates, and revolutionaries. Among them, women like Emma Goldman and Margaret Sanger believed that birth control was key to women’s sexual liberation.¹⁵

Betty Mary Smith Goetting, the leader of the birth control movement in El Paso, was no bohemian or free love advocate, but a newly married woman in the years that Sanger began her crusade around the country. The youngest of five children, Betty Mary Smith was born in the far east Texas town of Jefferson in 1897. Her parents, David M. and Ibry Smith, moved the family to El Paso in 1910, just as the Mexican Revolution was taking hold on the opposite side of the border.¹⁶ In 1913, Betty Mary left El Paso for Riverside Library School in California and returned four years later to work with head librarian Maud Durlin Sullivan at the El Paso Public Library. She married Charles A. Goetting in 1918 and decided she needed birth control.

Information was difficult to access, however, because the Comstock Laws prohibited the distribution of birth control information and materials at the time. The fight against the Comstock Laws helped Sanger garner national attention for her cause when in 1915 she faced trial for violating Anthony Comstock’s regulations on lascivious materials after publishing information on contraception in her magazine the *Woman Rebel*.¹⁷ The Comstock Laws were created to stop the traffic of obscene sexual materials through the mail; adding contraception to the list of materials had been Anthony Comstock’s personal decision.¹⁸ Goetting was a shrewd young woman and managed to find a way to educate herself on birth control. It is unclear who initiated the exchange of

¹⁴ Gordon, 128.

¹⁵ Gordon, 142.

¹⁶ Year: 1900; Census Place: Jefferson Ward 2, Marion, Texas; Roll: 1658; Page: 9A; Enumeration District: 0091; FHL microfilm: 1241658. Ancestry.com. 1900 United States Federal Census [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2004.

¹⁷ Carole R. McCann, *Birth Control Politics in The United States, 1916-1945* (Ithaca: Cornell University Press, 1994) 24.

¹⁸ Ibid., 439.

reproductive information in the summer of 1918 with Goetting via the U.S. postal service, but Goetting was willing to risk jail in order to receive it.

At the peak of rapid societal changes involving sexuality and women's liberation, Goetting's first missive on the subject was from a Ms. Elsie Parsons of Rhode Island, who in great detail described various forms of birth control known to her. Ms. Parsons stated that "the mechanical contraceptives I know of are three, a rubber cap for covering the mouth of the uterus, a cover of five [*sic*] skin or rubber for the penis, and withdrawal of the penis before the orgasm."¹⁹ In clear violation of the Comstock Laws Ms. Parsons nonetheless declared that "it is a pity that you cannot talk the matter over with someone of experience, as there are details affecting nerves and emotions that a girl should know about for her own good and that of her mate."²⁰ Goetting was curious about the ability to control her reproduction and took Ms. Parson's advice, finally reaching Sanger herself.

Goetting corresponded with Margaret Sanger as early as May 1919, where Sanger described the significance of birth control, particularly for poor women. Indeed, Sanger's radical roots along with her experiences as a nurse in the poorest areas of New York City, had motivated her crusade for birth control across the country.²¹ Giving some credence to the Comstock Laws, Sanger sent the pamphlet to Goetting under "separate cover." Without mention of the word "birth control" Sanger assured Goetting the information contained in the pamphlet was the "greatest need of womankind."²² Sanger's message influenced Goetting and the birth control movement in El Paso, particularly as Sanger began to foreground issues of population control and eugenics as cornerstones of her movement. Enclosed in the initial letter sent to Goetting, Sanger attached a list of "Books to

¹⁹ Letter August 11, 1918, Elsie Parsons to Betty Mary Goetting. *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library, El Paso, Texas.

²⁰ Tone, 435; Letter, Elsie Parsons to Betty Mary Goetting.

²¹ David Kennedy, *Birth Control in America: The Career of Margaret Sanger*, (New Haven: Yale University Press, 1970)16.

²² Letter May 2, 1919, Margaret Sanger to V.V.P., *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library, El Paso, Texas.

Read on Birth Control.”²³ Neatly organized, the list read back and forth between books on birth control and reproduction and those on eugenics. Among the works included were *Uncontrolled Breeding* by Adelyne More (1916), Margaret Sanger’s *What Every Girl Should Know* (1920), *Limitation of Offspring* by Dr. Wm. J. Robinson (1916), Havelock Ellis’ *The Objects of Marriage* (1920), and *Parenthood and Race Culture* by C. W. Saleeby (1909). Sanger managed to weave birth control and eugenics seamlessly in her book list.

By the 1920s the feminist underpinnings that characterized Sanger’s fight for birth control were beginning to dissipate and Sanger dedicated herself entirely to the professionalization of the movement. Sanger joined forces with scientists, academics, doctors, and wealthy men and women in order to create clinics in every major city in the country. Indeed, Sanger was deeply influenced by eugenic and neo-Malthusian ideas that translated well in certain parts of the country.²⁴ Concerns over population quality and quantity had long plagued El Paso and were particularly evident in the early 1910s when city leaders sought to confront overcrowding and poverty in South El Paso as the Mexican Revolution spilled over the border. In the 1920s, Goetting took care to keep abreast of Sanger’s changing ideas, because among Goetting’s letters, speeches, and scrapbooks devoted to her activism in the birth control movement in El Paso was a small collection of books mirroring the works recommended by Sanger. From this collection one can glean the influence Margaret Sanger had on the budding birth control activist because over half of the books Goetting acquired were written by the birth control pioneer. Some of the most eugenically laden works in the collection were Sanger’s classics *Woman and the New Race* (1920), *The Pivot of Civilization* (1922) and *Motherhood in*

²³ Letter May 2, 1919, Margaret Sanger to V.V.P. *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library, El Paso, Texas.

²⁴ Historian Linda Gordon suggests that in the early days birth control activists like Sanger argued for a “radical version of Neo-Malthusian analysis [that suggested] that overlarge families weakened the working class in its struggle with the capitalist class.” Gordon maintains that their neo-Malthusian ideals, largely focused on economics, were concerned with helping working class families raise their standard of living and thus gain greater political control. Gordon, 139,145 and 147.

Bondage (1928). These texts, along with the letters she exchanged with Sanger, helped to foment Goetting's desire to bring birth control to the borderlands

In order to understand the impetus for the birth control movement in the region, a brief history of the city is necessary. White settlers arrived at the Paso del Norte (currently Ciudad Juárez) in the early nineteenth century, while present-day El Paso was born as a small Anglo settlement just a decade before the U.S war with Mexico.²⁵ In its initial years traders, merchants, and soldiers from Kentucky, Indiana, Missouri, and New York populated the town.²⁶ The greatest threat to both the Anglo and Mexican populations were Native communities along the river. This particular region was contested land inhabited by Apache and Comanche nations that fought to defend the encroachment of Spanish, Mexican, and American settlers. Mexicans and Americans sought to rid the area of a population deemed troublesome at best.²⁷ As local historian C.L. Sonnichsen stated, “Since 1846 the business of bounty hunting had increased prodigiously and the red men were furiously resentful.”²⁸ Native American communities in this region had been the targets of prolific ethnic cleansing campaigns since the arrival of the Spanish in the seventeenth century making the eradication of indigenous populations by mid-century a source of wealth for many settlers.²⁹ Although Mexicans and Americans engaged in a concerted effort to subdue the indigenous population and settle this area of the Southwest, to usher in larger industrial changes, racial tensions were high between them. Indeed, the national impulse for war against Mexico was rife with racial ideology suggesting that the West be saved not only from the “savagery” of indigenous nations, but also from Mexicans, considered a “mongrel” race. Manifest Destiny and the supposed superiority of American governance created justifications for the usurpation of Mexican land. As Chicana/o

²⁵ Sonnichsen, 103.

²⁶ W.W. Mills, 18; Sonnichsen, Chapter X: The Americans Arrive and Chapter XI: The Pivotal Fifties.

²⁷ Leon C. Metz, *Border: The U.S.-Mexico Line* (El Paso: Managan Books), 4.

²⁸ Sonnichsen, 130.

²⁹ Sonnichsen, 94.

scholars contend, after the U.S. war with Mexico, Mexicans became “foreigners in their native land,” transformed into second-class citizens, and despite being classified as white, were relegated to an inferior position in the American racial system well into the twentieth century.³⁰

Populations continued to shift by the end of the nineteenth century when capitalist endeavors in the borderlands characterized by resource extraction—mostly mining and refining—along with trade, agriculture, and cattle ranching helped to make places like El Paso into bustling cities almost overnight. The arrival of railroads in the 1880s facilitated cross-country and trans-border trade. Historian Mario García has suggested that this booming metropolis needed cheap labor and as the Ellis Island of the southwest, El Paso became the passageway for thousands of Mexican immigrants on their way north.³¹ Alongside thousands of working-class Mexican citizens, the railroads facilitated the arrival of a new wave of settlers from the Eastern United States. Mostly Anglo men, known as health seekers, traveled west to the newly acquired territories in order to find climatic cures for respiratory diseases like tuberculosis.³² Finding health and economic wealth in the Southwest these newcomers began intense relocation campaigns as a means to bring more whites to the region. By the late nineteenth century relationships were altered, as more space was needed to accommodate the growing Anglo population.

Plans to make El Paso a white health resort amiable to industry and the exploitation of natural resources were truncated during the first two decades of the twentieth century as the revolution in Mexico took hold along the border. Hundreds of Mexicans fleeing violence in their

³⁰ See Laura Gómez, *Manifest Destinies: The Making of the Mexican American Race* (New York: New York University Press, 2007); Ernesto Chávez, *The U.S.-War with Mexico: A Brief History with Documents* (Boston: Bedford/St. Martin's 2008); Deena J. González, *Refusing the Favor: The Spanish-Mexican Women of Santa Fe, 1820-1880* (Oxford: Oxford University Press, 1999).

³¹ Mario García, *Desert Immigrants: The Mexicans of El Paso, 1880-1920* (New Haven: Yale University Press, 1981), Chapter 2: Out of the Desert.

³² See Heather Sinclair's forthcoming article, “White Plague, Mexican Menace: Health Seekers, Tuberculosis, and Gendered Contagion in the American Southwest, 1880-1930” in the *Pacific Historical Review* discussing the El Paso as a major health seeker resort in the late nineteenth and early twentieth century, particularly for white male tuberculars.

country began to make homes across the river in El Paso.³³ According to Oscar Martínez the ethnic Mexican population rose from approximately 8,700 in 1910 to over 68,000 in 1930.³⁴ Most ethnic Mexicans in El Paso lived just across the border from Ciudad Juárez, in the area below the train tracks in what would become the neighborhoods of Segundo Barrio and Chihuahuita in South El Paso. A rapid increase in population and a swift growing economy coupled with de facto second-class citizenship, helped to create enclaves of economic exploitation and poverty for ethnic Mexicans in El Paso. García explains that nearly 75 percent of “Mexicans in 1900 worked either as laborers, service workers, or operatives,” making meager wages.³⁵ City leaders beleaguered by this growing population sought to educate ethnic Mexicans in such a manner as to equip them for menial labor and service oriented work in order to “solve a major economic problem by adding to the productivity of its Mexican population.”³⁶ Organizations like the Women’s Civic Improvement League, suggested that young Mexican origin women, the main providers of domestic work in the city, be instructed in proper “housekeeping, cooking, and sewing” so that “every American family would benefit.”³⁷

Although the Southside provided cheap labor for the elite and middle-class families in El Paso, it was quickly becoming a problematic sector of the city and its residents were increasingly marginalized by poverty and neglect. Between 1900 and 1930, the state along with private citizens were involved in social reform movements with the intent to combat the spread of disease and to control high infant mortality rates. At the same time that eastern male health seekers flooded the city, infant mortality rates were steadily rising. Ethnic Mexican babies were overwhelmingly

³³ Oscar Martínez, *Chicanos of El Paso: An Assessment of Progress* (El Paso: Texas Western Press, 1980) 8.

³⁴ Ibid., 6.

³⁵ García, *Desert Immigrants*, 85.

³⁶ García, *Desert Immigrants*, 113.

³⁷ García, *Desert Immigrants*, 113.

represented in the data.³⁸ City elites struggled to confront the staggering numbers, and, in the end, historian Heather Sinclair contends that charitable efforts to curb infant deaths were more a performance of white progressive activism than a sincere attempt at addressing the roots of premature death for babies in the barrio.³⁹ Only a few years later, attempts to confront a supposed influx of epidemics from Mexico spurred the United States Public Health Service (USPHS) to design and build a disinfection plant on the Santa Fe international bridge that linked El Paso with its sister-city Ciudad Juárez. By early 1917, Claude C. Pierce, a senior surgeon of the USPHS, who later became medical director of Planned Parenthood in the 1940s, had established a full-fledged quarantine of all those entering El Paso from Mexico.⁴⁰ Mostly Mexican bodies were inspected, deloused, and cataloged in order to qualify for admittance into the United States.⁴¹ Historian Alexandra Minna Stern explains that these inspections continued well into the 1920s as Mexicans coming into El Paso and those residing in the Southside were viewed as harbingers of disease, even as no new cases of typhus—the main culprit of the quarantine—were documented. High infant mortality rates and the continued specter of infection served to stigmatize ethnic Mexicans as their presence was increasingly linked to social and racial degeneration in a modernizing city.

City leaders wrestled with population concerns as poverty and degradation became hallmarks of the Southside. City planners studied the Southside in great detail releasing reports about the overcrowded tenements in the area. The Kessler Report, published in 1925, described Chihuahuita

³⁸ See Gabbert, Ann R., "Defining the Boundaries of Care: Local Responses to Global Concerns in El Paso Public Health Policy, 1881–1941." (Ph.D.dissertation: The University of Texas at El Paso, 2006), Chapter Nine: Maternal and Infant Welfare: Inherent Contradictions in Maternalist Care; Heather Sinclair, "Birth City: Race and Violence in the History of Childbirth and Midwifery in the El Paso-Ciudad Juárez Borderlands, 1907-2013," (Ph.D.dissertation: The University of Texas at El Paso, 2016), Chapter Two: The Border Violence of Let[ting] Die: The Cloudcroft Baby Sanatorium and Precarious Infant Life in El Paso, 1903-1936.

³⁹ Sinclair, Chapter Two: The Border Violence of Let[ting] Die.

⁴⁰ Alexandra Minna Stern, "Buildings Boundaries and Blood: Medicalization and Nation-Building on the U.S.-Mexico Border, 1910-1930." *The Hispanic American Historical Review*, vol. 79, no. 1 (February, 1999), 42.

⁴¹ Alexandra Minna Stern, "Buildings Boundaries and Blood: Medicalization and Nation-Building on the U.S.-Mexico Border, 1910-1930." *The Hispanic American Historical Review*, vol. 79, no. 1 (February, 1999), 42 and 45.

as “covered with one story or two story tenement houses crowded with human beings.” George Kessler, a planning consultant, and Walter Stockwell the City plan engineer, remarked how “numerically the population is almost entirely of Spanish speaking antecedents, mainly Mexican born or of Mexican parentage. A large proportion are not citizens.”⁴² Kessler and Stockwell suggested that the city:

Proceed with the sanitation of Chihuahuita and have a thorough cleaning up in the sections where human inhabitants are congested...This entire district instead of being an eyesore, unhealthful and a disgrace to the city, can be and ought to be made a section of exotic charm and special interest to visitors and residents. Community centers and great vocational schools are needed here.⁴³

Findings in this report were echoed in studies that continued into the 1930s, as Stockwell pushed for changes that would transform South El Paso from an unhealthful disgrace to a beacon of exotic delights for city residents (presumably Anglos) and visitors alike. In 1930, Mayor R.E. Thomason appointed a committee to fulfill the recommendations made by Kessler and Stockwell. In addition to building new tenements and bathing facilities for residents, the committee was charged with securing funding for these endeavors, but “the committee was unable, however, to interest private investors in their project.”⁴⁴ A year before the birth control clinic opened in El Paso, Stockwell applied for federal aid to help mitigate the destitution on the Southside and provide proper housing for its residents. He concluded that “indecent, unsafe, and unsanitary conditions in the housing of the City as a whole are confided almost entirely to the substandard areas of the south side.”⁴⁵ While

⁴² “A Short History of South El Paso, Department of Planning City of El Paso, October 1967: Part III: The 1925 Kessler Report,” *South El Paso, Chicano Vertical File*. Sonnichesen Special Collections Department. The University of Texas at El Paso. 24.

⁴³ “A Short History of South El Paso, Department of Planning City of El Paso, October 1967: Part III: The 1925 Kessler Report,” *South El Paso, Chicano Vertical File*. Sonnichesen Special Collections Department. The University of Texas at El Paso. 23.

⁴⁴ “A Short History of South El Paso, Department of Planning City of El Paso, October 1967: Part III: The 1925 Kessler Report,” *South El Paso, Chicano Vertical File*. Sonnichesen Special Collections Department. The University of Texas at El Paso. 25.

⁴⁵ “A Short History of South El Paso, Department of Planning City of El Paso, October 1967: Part III: The 1925 Kessler Report,” *South El Paso, Chicano Vertical File*. Sonnichesen Special Collections Department. The University of Texas at El Paso. 26.

the city was willing to spend time and money on data collection, reports, and consultants, little was done to ameliorate poverty in the barrio.

Without proper sanitation and because of overcrowded housing, these barrios became harbingers of illness and disease; high infant mortality rates reigned. Tuberculosis—originally brought by Anglo health seekers from the east coast—and typhus became inextricably linked to the poor areas of the city and by extension its residents.⁴⁶ Campaigns to “Save the Babies” not only recognized high infant mortality rates within the ethnic Mexican community, but, as historian Ann Gabbert determines, highlighted “rising anxieties over the changing composition of the general population” and the so-called “browning of America.”⁴⁷ Although unskilled ethnic Mexican workers were used to fuel the booming border economy, the city government and wealthy residents’ reluctance to address economic destitution and exploitation on the Southside connotes their disregard for the community living in those areas. Meanwhile high infant mortality rates, the constant specter of disease, and the unsanitary conditions caused by economic neglect of South El Paso fueled eugenic ideas connecting race, disease, overpopulation and uncontrolled fertility to the ethnic Mexican residents of the city.

Apprehension over population issues on the border coincided with national and international economic upheavals that dominated national debates regarding immigration and contraception. The Great Depression rattled economic systems around the globe and locally prompted the deportation of thousands of ethnic Mexicans from the Southwest in the late 1920s

⁴⁶ See Heather M. Sinclair, “White Plague, Mexican Menace: Health Seekers, Tuberculosis, and Gendered Contagion in the American Southwest, 1880-1930” (forthcoming); John McKiernan-Gonzalez, *Fevered Measures: Public Health and Race at the Texas-Mexico Border, 1848-1942*, (Durham: Duke University Press, 2012); Ann Gabbert, “Defining the Boundaries of Care,” Chapter One.

⁴⁷ Gabbert, Ann R., “Defining the Boundaries of Care,” 37; Heather Sinclair further develops the significance of the “Save the Babies” campaigns and the racial violence of infant mortality in South El Paso. See Heather Sinclair’s “Chapter Two: The Border Violence of Let[ting] Die: The Cloudcroft Baby Sanatorium and Precarious Infant Life in El Paso, 1903-1936.”

and early 1930s.⁴⁸ Further fueling anxieties about overpopulation problems, the city registrar led a campaign to change ethnic Mexicans racial designation on birth and death certificates from white to “colored” in 1936. In a city under Jim Crow this would mean further social and political marginalization for the ethnic Mexican community. Only six months before the birth control clinic opened in the city, El Paso officials justified the racial classification change saying that the high infant mortality rate among Mexican origin families, mostly in El Paso’s impoverished Southside, was skewing the population data for the area.⁴⁹ Mexican civic leaders were quick to shut down that devastating legal designation. However, these various forces that over decades sought to label the Mexican origin population as problematic, suggesting cultural rather than structural issues were to blame for the degradation in the barrio, created the precarious conditions for the arrival of the birth control movement in El Paso.

Before Sanger’s initial visit to El Paso, birth control had been a topic of interest for some in the border city in the early 1930s. Doctors, religious leaders, city fathers, and residents issued statements through the newspaper regarding the importance and dangers of contraception in moralistic and anti-sexist terms.⁵⁰ Some argued against the supposed immorality of birth control, especially as a means to rid society of poverty. One such resident, perhaps recalling attempts to address overcrowding with urban renewal projects in prior years, retorted, “Why not keep the children and get rid of the slums?”⁵¹ On the other hand, women like Jone Howlind determined that if by the grace of a higher power men could get pregnant, birth control would be mandatory for all

⁴⁸ Francisco Balderrama and Raymond Rodríguez, *Decade of Betrayal: Repatriation in the 1930s* (Albuquerque: University of New Mexico Press, 2006); Fernando Saúl Alanís Enciso, *Que se queden allá: El Gobierno de México y la repatriación de Mexicanos en Estados Unidos* (Tijuana: El Colegio de la Frontera Norte, 2007).

⁴⁹ See Mario T. García, “Mexican Americans and the Politics of Citizenship: The Case of El Paso 1936” *New Mexico Historical Review*, volume 59, issue 2, 1984. Mark Overmeyer-Velázquez, “Good Neighbors and White Mexicans: Constructing Race and Nation on the Mexico-U.S. Border”. *Journal of American Ethnic History* 33 (1).

⁵⁰ “Birth Control Assailed by E.P. Minister,” *El Paso Evening Post*, (El Paso, Texas), March 23, 1931; “Thinking Out Loud: Let George Try it!” *El Paso Herald-Post*, (El Paso, Texas), August 4, 1933.

⁵¹ “Thinking Out Loud Opposes Birth Control,” *El Paso Herald-Post*, (El Paso), July 31, 1933.

married couples.⁵² In 1933 city-county health officers attempted to bring birth control information to residents in order to stem the high infant mortality rates particularly in the so-called “Spanish-American” parts of the city, but due to public outrage, predominantly from the Catholic community, they retracted their campaign.⁵³ Dr. J. A. Puckett, president of the El Paso County Medical Association added that while birth control was proper in some cases, in most others “it is a very dangerous thing for the public to know, it must be handled very carefully.”⁵⁴

In 1934 Sanger arrived extolling the virtues of natal restriction. During her first attempt to lay the groundwork for a birth control clinic in El Paso, she met with over 40 physicians from the city and her message was simple: a “conscious control of birth rate.”⁵⁵ Sanger described society’s obsession with control stating that, “We control our tempers, our appetites, our currency. But we allow the increase of children who cannot be given a chance at life, in homes which cannot afford them, do not want them...”⁵⁶ Her mostly white and wealthy audience could reference high infant mortality rates, disease, and crumbling infrastructure in El Paso’s Southside; perhaps birth control was the answer.

By the 1920s the feminist underpinnings that characterized Sanger’s fight for birth control were being overshadowed by her association with eugenicists and promoters of population control. Historians have long argued over her connections to the movements for racial betterment and it still remains unclear to what degree Sanger personally subscribed to the scientific rationales for

⁵² Jone, Howlind, “Thinking Out Loud: Let George Try it!” *El Paso Herald-Post*, (El Paso, Texas), August 4, 1933.

⁵³ “E.P. Health Officer Will Advocate Birth Control in City and County in Effort to Decrease Death Rate: Dr. T.J. McCamant Will Defy Law and Provide Contraceptive Information to Wives; Catholic Priest to Protest,” *El Paso Herald-Post*, July 26, 1933; “Pasoans Shun Birth Control: Want Babies: Only One Asks Information on Subject at County Health Office,” *El Paso Herald-Post*, (El Paso, Texas), August 3, 1933.

⁵⁴ “Health Officer Urges Birth Control But Will Not Give Out Information,” *El Paso Times*, (El Paso, Texas), July 27, 1933.

⁵⁵ “Mrs. Sanger Meets at Luncheon with El Paso Doctors,” *El Paso-Herald Post*, December 8, 1934.

⁵⁶ Ibid.

engineering the human species.⁵⁷ Some argue that Sanger's connection to eugenics was strategic. Historian Carole McCann suggests that "if, as eugenics represented it, the American race was deteriorating because of inefficient breeding, birth control's application of 'reason and intelligence' to reproduction could regenerate the race and ensure public health and welfare."⁵⁸ Eugenics bound birth control to science, rather than sexual liberation or women's emancipation from unwanted motherhood.⁵⁹ Sanger quickly understood that establishing clinics and promoting changes in legislation required money and power from wealthy financiers.⁶⁰ Thus, eugenics, not women's liberation, would bring much needed funds to Sanger's campaign. This is not to say that Sanger was not swayed by the progressive values of eugenics. These ideas had emerged more than a hundred years before with Thomas Malthus's *Essay on the Principle of Population, as It Affects the Future Improvement of Society* (1798) which argued that overpopulation caused disease, poverty, and the suffering of humanity. At the turn of the twentieth century men like Francis Galton combined Charles Darwin's biological discoveries with Malthus's economic theories, to outline the doctrine of eugenics.⁶¹ Eugenics had an insidious impact on the American psyche, conflating social problems like poverty, illiteracy, and disease and moral ideals regarding sexuality, such as promiscuity and homosexuality, with a supposedly biologically inferior body. Equally, wealth, intelligence, and health, along with proper family size were viewed as markers of strong, well-bred racial traits. Sanger found enthusiastic supporters for these eugenic ideas in El Paso.

⁵⁷For debates on Sanger's connections to eugenics and racist thought see Linda Gordon, *The Moral Property of Women*; Carole McCann, *Birth Control Politics in the United States*; Emily Taft Douglas, *Margaret Sanger: Pioneer of the Future* (1970); David Kennedy, *Birth Control in America: The Career of Margaret Sanger* (1970); James Reed, *From Private Right to Public Virtue* (1978); Ellen Chesler, *Margaret Sanger: Woman of Valor* (1992); Jean Baker, *Margaret Sanger: A Life of Passion* (2011).

⁵⁸ McCann, 99.

⁵⁹ McCann, 123.

⁶⁰ Gordon, 172.

⁶¹ Matthew Connelly, *Fatal Misconceptions: The Struggle to Control World Population* (Cambridge: Belknap Press of Harvard University Press, 2008) 2.

Following Sanger's visit in 1934, local doctors warned that birth control information "if legalized, would fall into the hands of quacks and cause licentiousness among young people."⁶² The residents of El Paso, mostly men, imbued birth control with the power to uplift the "race" and end high infant mortality rates, but also promote immorality in their society. In 1937, Sanger would resurrect these discussions during a second visit to construct a birth control clinic on the border. The opposition began to mobilize, as Goetting remembered, from the "first mention of her [Sanger's] name and first printing of her picture."⁶³ Using their influence in the city the birth control activists had chosen the Hilton Hotel as the site for Sanger's first major public speech.⁶⁴ The women on the committee and the manager of the hotel himself did not take into account that the Hilton family was Catholic. Goetting recalled years later that "The night before her [Sanger's] arrival (although there had been publicity for several days), numerous Roman Catholics started a concentrated effort to keep our distinguished guest from speaking not only at the Hilton, but anywhere in El Paso."⁶⁵

There was no greater national enemy of the birth control movement than the Roman Catholic Church.⁶⁶ Goetting soon learned how organized and persuasive Catholics could be in El Paso. Promising a boycott of the hotel and a note from the Catholic Bishop Anthony Schuler declaring he would "withdraw the blessing of God" from the Hilton, its manager ceded to pressure from the Catholic community and cancelled the event. Quickly the women on the organizing committee for the clinic called on Mrs. C.M. Harvey, the wife of the President of the El Paso National Bank, and asked for her help. Goetting explained that because "the Harvey's held 55

⁶² "Clinic Turned Down for Birth Control: Doctors Here Say Few Physicians May Get Together Later," *El Paso Herald-Post*, (El Paso, Texas), December 11, 1934.

⁶³ Goetting, *Our Margaret Sanger*, 82.

⁶⁴ Ibid.

⁶⁵ Ibid.

⁶⁶ While there were Protestant denominations that also opposed birth control in the 1920s, by the 1930s the most vocal group that remained was the Roman Catholic Church. See Kathleen Tobin, *The American Religious Debate Over Birth Control, 1907-1937*. (Jefferson: McFarland & Company, 2001) 123.

percent operating stock in the Hotel Paso Del Norte,” and Mrs. Harvey was able to change the location of the speech to their inn.⁶⁷

Goetting tried to combat the Catholic boycott of the speech by framing the debate over birth control in progressive and eugenic terms. She explained that, “birth control stands for social betterment, racial progress, and a more wholesome family life.” She exalted early twentieth century ideals that connected progress and modernity with racial betterment attainable through socially engineered families.⁶⁸ Goetting skillfully acknowledged the supposed problem among the poor ethnic Mexican community when she declared that “the task before us is to enlighten those poor in body and financial means, who comprise 65 percent of the population.” Using common sense eugenic notions, like those that saturated Sanger’s speeches during this time, Goetting easily wove poverty and racial inferiority together in order to make her case for birth control in El Paso. She insisted that many in El Paso believed birth control a necessity, especially in their “largely Mexican community.”⁶⁹ Goetting’s message divided the city, as activists on both sides of the debate prepared for Sanger. In the end, Sanger arrived in El Paso on February 24, 1937 and gave a speech on the importance of birth control at the Del Norte. She was introduced by the president of the El Paso County Medical Society, Dr. Will Rogers, who was also Chief of Staff at the Hotel Dieu, the only Catholic hospital in the city. A clear snub of the Church, Goetting exclaimed, “What a triumph that was for us!”⁷⁰

Addressing over 75 doctors and their wives as well as a group of El Paso nurses, almost 250 people in total, Sanger’s first public speech to the El Paso community described the dire situation of

⁶⁷ Goetting, *Our Margaret Sanger*, 83.

⁶⁸ See Lisa Lovett, *Conceiving the Future: Pronatalism, Reproduction, and the Family in the United States* (Chapel Hill: University of North Carolina Press, 2007); Alex Stern; Wendy Kline, Johanna Schoen.

⁶⁹ Goetting, *Our Margaret Sanger*, 82.

⁷⁰ *Ibid.*, 84.

humanity and the problems that would arise from overpopulation.⁷¹ During her much-awaited speech, Sanger decried “the advance of Christianity, of charity, or humanitarianism, will not allow the natural order of nature to dispose of the feeble-minded, the diseased, the insane, the old as it should. Though it may sound cruel to say,” she continued “they should die, if they live they will, in majority of cases reproduce their kind, which is to throw upon the social order of the world certain types who are illiterate, deformed, and diseased, from birth.”⁷² Historian Kathleen Tobin explains that nationally Catholics were brought into the discussion about birth control after Social Darwinists suggested that “charity toward the poor and weak” was interrupting natural selection. Allowing those considered unfit to live, by protecting them from their inevitable demise, would ruin the race. Tobin states that “this concern over charity increasingly drew Catholicism into the debate as Catholics were viewed as overly sentimental and unrealistic in giving to the poor.”⁷³ Sanger despised the sentimentality of those wanting to “save” the unfit and eagerly championed the Mothers’ Health Center slogan, “The Charity to End All Charity.”

In her speech, Sanger declared “do not be afraid of the word sterilization...it will figure largely in the future and is a thing needed for many types.”⁷⁴ She was correct to assert that sterilizations would become common in many states. The legalization of state sponsored sterilization began in Indiana in 1907.⁷⁵ Dozens of states adopted sterilization laws that sought to control the reproduction of women (and to a lesser degree men) who might pollute the racial make-

⁷¹ “Birth Control Money Sought: Will Raise Clinic Money Through Membership in Organization,” *El Paso Herald-Post*, (El Paso, Texas), February 26, 1937.

⁷² Margaret Sanger quoted in “Birth Control Lecture Heard by El Pasoans,” *El Paso Times* (El Paso, Texas) February 25, 1937.

⁷³ Tobin, 16.

⁷⁴ See Elena Gutiérrez, *Fertile Matters* (Austin: University of Texas Press, 2008) Unfortunately, this would become a cruel reality for women all across the United States, as Gutiérrez asserts, many Mexican-origin women would fall victims to forced and secret sterilizations in Los Angeles showing the tangible effects Sanger’s discourse had on women of color; for more about sterilizations see Stern, *Eugenic Nation*, Chapter 2; also Briggs, *Reproducing Empire*, Chapters 3 and 5.

⁷⁵ Alexandra Minna Stern, *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America* (Berkeley: University of California Press, 2005), 5.

up of the nation.⁷⁶ Indeed, these laws were directed across the racial spectrum as poor white women, African American women, Mexican origin women, and Native women were sterilized well into the 1970s.⁷⁷ Eugenic scientists connecting the supposed hereditary trait of feeble-mindedness to social ills such as poverty, illiteracy, alcoholism, promiscuity, and criminality, used sterilizations to rid the body politic of those who threatened to diminish the strength of the Anglo-Saxon stock.⁷⁸ White women's reproduction, in particular, became racialized as eugenicists sought to rid the Anglo-Saxon race of "feeble-mindedness," but also encouraged proper breeding by those with desired racial traits.⁷⁹ At the heart of controlling white women's reproduction was the protection and preservation of white supremacy in a nation reeling from immigration changes and a drop in fertility rates among white women at the turn of the twentieth century. In this way the project to control Mexican origin women's reproduction takes on a distinctively complex role. Under the Treat of Guadalupe Hidalgo ethnic Mexicans were legally white, but socially treated as racial "half-breeds." Their reproduction, then, especially along the border with Mexico, was viewed as racially suspect. Although compulsory sterilization was never championed in El Paso, or in the state of Texas, Sanger's call to destigmatize underscored her dedication to population control and the preservation of white supremacy at the borders of the nation-state.

⁷⁶ Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization, and Abortion in Public Health* (Chapel Hill: The University of North Carolina Press, 2005), 82.

⁷⁷ See Karin L. Zipf, *Bad Girls at Samarcand: Sexuality and Sterilization in a Southern Juvenile Reformatory* (Baton Rouge: Louisiana State University Press, 2016); Natalie Lira, "'Of Low Grade Mexican Parentage': Race, Gender, and Eugenic Sterilization in California, 1928-1952," (Ph.D. dissertation: University of Michigan, 2015); Wendy Kline, *Building a Better Race: Gender, Sexuality, and Eugenics from the Turn of the Century to the Baby Boom* (Berkeley: University of California Press, 2001); Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization, and Abortion in Public Health*; Alexandra Minna Stern, *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America*; Jane Lawrence, "The Indian Health Service and the Sterilization of Native Women," *The American Indian Quarterly*, vol 4, no. 3 (2000):400-419; Andrea Smith, *Conquest: Sexual Violence and American Indian Genocide* (Cambridge: South End Press, 2005).

⁷⁸ Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization, and Abortion in Public Health*, 83.

⁷⁹ See Wendy Kline, *Building a Better Race: Gender, Sexuality, and Eugenics From the Turn of the Century to the Baby Boom* (Berkeley: University of California Press, 2001), Chapter Two; Alexandra Minna Stern, Johanna Schoen, and Karin Zipf. For discussion of sterilizations and whiteness after World War II see Rebecca Kluchin, *Fit To be Tied: Sterilization and Reproductive Rights in America, 1950-1980* (New Brunswick: Rutgers University, 2009).

Sanger made the issue of population control the pillar of her first speech in the border city. The *El Paso Times* noted that “Mrs. Sanger said it is inevitable that within the coming five to 10 years, because of overcrowded population in Germany, Italy, and Japan, the face of the world will be changed. When too many people inhabit a section of the world, war cannot be avoided.”⁸⁰ Sanger’s prophetic discourse—World War II was on the horizon—reassured wealthy white El Pasoans that “social progress” and “modernity” would come in the form of contraception for the poor, Mexican population in the city. During the question-and-answer period of the event, Goetting recalled how some underscored the importance of birth control “especially among the Mexican population” and how it could help alleviate the “largest maternal and infant death rates” in the city.⁸¹ Furthermore, proper education on the fundamentals of birth control for a progressive and modern society would defeat the “ignorance and superstition among the poverty stricken.”⁸²

Although Sanger was finally allowed to speak at the Paso Del Norte Hotel, many clergymen and lay Catholics expressed genuine concerns about this controversial issue on grounds broader than Church dogma. One historian writing about the Texas birth control movement contends that the role of the Church in cities like El Paso highlighted its archaic and misogynistic oppression of women’s voices.⁸³ However, El Paso’s priests relied not just on Church dogma to critique the creation of a clinic, but focused also on the underlying racial and class tensions that the birth control debate stirred up. Many in the Mexican community felt they were the main targets of the campaign for natal control; their suspicions were not unwarranted. Often women in the movement echoed

⁸⁰ “350 El Pasoans Meet to Hear Mrs. Sanger on Birth Control,” *El Paso Times* (El Paso, Texas) February 25, 1937.

⁸¹ Goetting, *Our Margaret Sanger*, 84.

⁸² Goetting, *Our Margaret Sanger*, 84.

⁸³ Harold L. Smith, “‘All Good Things Start with the Women’: The Origin of the Texas Birth Control Movement, 1933-1945” *Southwestern Historical Quarterly*, Volume 114, Number 3, (2011): 268.

Ponsford's declaration that birth control "would be a great asset particularly for the Spanish speaking population of El Paso."⁸⁴

Nationally the Catholic Church's position on eugenics influenced their take on birth control and the voices of some clergy and believers in El Paso serve as examples of this manifestation in the borderlands. As historian Sharon Leon suggests, Catholics understood the religious plurality of American society, and thus critiqued eugenics as it was applied to reproduction vis-à-vis sterilization, using arguments not clearly outlined as "Catholic." Leon states that Catholic theologians "emphasized scientific objections to the procedure, they raised legal questions about appeal and due process, and finally they identified social justice issues posed by the economic and racial biases against the targeted population."⁸⁵ While sterilization was never championed in El Paso, some priests wove race, class and social justice issues to contest the presence of Sanger and her birth control philosophy in the city. Reverend J. Quigley, who promoted the official position of the Church while simultaneously foregrounding issues of race and class in El Paso, responded to Sanger's call for a birth control clinic to the editor of the *El Paso Times* on March 2, 1937. Quigley contended that "Mrs. Sanger wishes to effect race control by encouraging race suicide; correct economic ills by moral perversion..." Quigley invoked the notion of "race suicide," which was commonly used at the turn of the twentieth century to bemoan the low birth rates of Anglo women, to describe the attempt to control the reproduction of the Mexican-origin community in El Paso. By weaving issues of race and class with the church's official position on birth control, he endeavored to show that immorality was not only connected to a perversion of God's law, but also encompassed the subjugation of the poor through population control. Quigley continued to decry Sanger's

⁸⁴ "South El Paso Birth Control Clinic Given Endorsement of Club Women," *El Paso Herald Post*, (El Paso, Texas), February 6, 1937, 1.

⁸⁵ Sharon Leon, *An Image of God: the Catholic Struggle with Eugenics* (Chicago: University of Chicago Press, 2013) 67.

motives and explained that “to reach the perfect family by rejecting the teaching and example of the Perfect Family—Jesus, Mary, and Joseph. She would control poverty and pain by preventing life.”⁸⁶ Ironically, the image of the “Perfect Family” was exactly what Sanger sought to exalt: small, calculated families. Still the reverend held to his belief that Sanger’s ideas were cemented in social engineering. While Quigley’s argument was somewhat flawed, it nonetheless revealed race and class issues directly. His words informed the way many people in El Paso understood the effect birth control would have on their community; the Church capitalized on these tensions in order to subvert the creation of a birth control clinic in the city.

Reverend H.D. Buchanan was another such example of El Paso’s diverse Catholic Church who foregrounded class as a major issue in regards to the birth control debate. He inverted the fundamental philosophy of Progressive era discourse and suggested that birth control was immoral not because of official Church doctrine that considered it a perversion of nature, but because of class inequality. In a February 1937 reflection piece in the *El Paso Times* he wrote:

Nowadays we cannot pretend that there is food enough for all. There is even comfort enough for all; but having attained to a degree of luxury—with the help of the hard labor from the less intelligent, let us not forget—we declare that we do not want to share any of our good things through reasonable taxation with those whose hard work was largely responsible for our prosperity, as we complain that women on relief continue to bear more children. The enormous wealth of the nation must not be shared. The poor have no right to have any more children than are strictly needed to do our work for us. The clamor for birth control comes now, as it always has, from the well-to-do.⁸⁷

His assessments of the birth control movement in El Paso and its connections to class and the exploitation of workers were striking because of their lack of adherence to official church doctrine. Buchanan suggested that the “well-to-do” were those most interested in controlling the birth rates of the poorest people in El Paso, who at that time were overwhelmingly Mexican or of Mexican

⁸⁶ Rev. Daniel J. Quigley, “Clinics or Asylums?” *El Paso Times*, (El Paso, Texas), March 2, 1937.

⁸⁷ Rev. H.D. Buchanan, “Clamor For Birth Control Comes Now, As it Always Has, From the Well-To-Do,” *El Paso Times*, (El Paso, Texas), February 22, 1937.

origin. Although Reverend Buchanan was trying to defend the rights of the poor to have children, the problematic specter of eugenic language crept into his article. Emphasizing the “hard labor from the less intelligent” was a subtle, but visible sign that he too racialized the Mexican population by describing them as ignorant and easily exploited. As radical as Buchanan’s statement was at this time, it was not isolated from the racist ideas that were so pervasive in the 1930s. Yet, the absence of Church ideology that considered birth control “unnatural” and “blasphemous” from Buchanan’s article highlights the issues of inequality and exploitation; his words were echoed by other clergymen in El Paso.

It was not only Catholic clergy involved in the discussion who sought to complicate the issues and discourse on birth control. Mrs. S.P. Tracht, identified in the newspapers as the first vice president of the El Paso Diocesan Council of Catholic Women, questioned the location of the clinic.⁸⁸ During Sanger’s second trip to El Paso, Tracht addressed the women on the birth control committee with questions that complicated their special designations for birth control. “Why do we need a clinic on the southside [*sic*]?” Tracht queried. With Sanger’s emphasis on birth control as a means to address social degeneration, Tracht offered recent reports from local doctors suggesting that children north of the tracks were being treated for “social diseases.” She went on to ponder the reasons for the high proportion of sexually transmitted diseases clustered on the north side of the city, declaring, “if that condition exists, there must be a whole lot of immorality north of the tracks. The doctor did not mention any such condition south of the track.”⁸⁹ Goetting and other committee members assured her that the clinic was not interested in controlling sexually derived

⁸⁸ Later the President of the El Paso Diocesan rejected the inference that Tracht spoke for their entire group.

⁸⁹ “Birth Control Clinic Need on South Side Is Questioned: Frank Discussion of Child Problem at Meeting of Committee Follows Objection to Institution in El Paso,” *El Paso Herald-Post*, (El Paso, Texas), February 25, 1937.

maladies, like syphilis and gonorrhea, but in curbing reproduction.⁹⁰ Tracht sought to connect “social diseases” to birth control in order to moralize the debate over contraception and perhaps even to highlight the hypocrisy of the committee’s focus on the Southside as the purveyors of social decay. Mrs. C.M. Harvey halted the debate and retorted that city officials revealed “an appalling birth rate south of the tracks where families ‘have one baby after another’.”⁹¹ It seems that claims made by Sanger and some of the other committee members were not always consistent, particularly regarding the greater eugenic significance of birth control in El Paso. Venereal diseases and questionable moral decay north of the tracks was not to be discussed in the same vein as the quality and quantity of population south of the tracks.

The roots of poverty in the barrio, as discussed by Tracht and the birth control activists in 1937, were linked to overpopulation not economic exploitation. When Tracht’s initial query about location and social degeneration was all but ignored, she then questioned economic inequality on the Southside and the supposed links to overpopulation there. Tracht pointed to issues of class inequality and asked the women of the birth control clinic board: “Should we not examine our consciences? ...Are we paying a living wage to our servants from that section of El Paso?” While Goetting agreed that many El Paso women “abused the house servant wage” she nonetheless believed that “if there had been two, three, or four children in families in that section, those children could have gone through high school and fitted themselves for a higher type of work.”⁹² Goetting’s comments discounted economic exploitation, particularly in regards to education. As Mario García and Vicki Ruiz have noted, El Paso’s de facto segregated school system, which

⁹⁰ Historian Ann Gabbert explains that campaigns against prostitution in El Paso often centered on the spread of venereal disease; discourse was cloaked in moralistic terms. Syphilis and gonorrhea were of major concern in the first decades of the twentieth century. Ann R. Gabbert, “Prostitution and Moral Reform in the Borderlands: El Paso, 1890-1920,” *Journal of the History of Sexuality* 12 (2003): 578.

⁹¹ “Birth Control Clinic Need on South Side Is Questioned: Frank Discussion of Child Problem at Meeting of Committee Follows Objection to Institution in El Paso,” *El Paso Herald-Post*, (El Paso, Texas), February 25, 1937.

⁹² Ibid.

focused primarily on preparing Mexican-origin youths for vocational training “served to funnel Mexican youth into factories and building trades.”⁹³ Mexican origin women were also “funneled” into menial work in the service sectors, predominately as domestic workers. Thus, Goetting acknowledged the exploitation of the domestic workers in the city, but was reluctant to see racial prejudice and exploitation as the cause of poverty and returned the focus to Mexican women’s uncontrolled fertility as the major cause of their destitution. Tracht attempted to emphasize the low wages given to “servants” of elite El Pasoans as the central cause of poverty and degradation in that area of town, but she was outmaneuvered. Like her male counterparts, Tracht, a Catholic laywoman, wanted to foreground economic exploitation and even racial discrimination as driving forces in the discussion about birth control, yet her arguments were swiftly dismissed.

The tensions created by eugenic ideology connecting social ills to hereditary traits, further complicated the debates concerning the mission of the Mothers’ Health Center of El Paso before the clinic was even opened. Giving a nod to Sanger’s eugenic tone and her speeches on the eradication of the “feeble-minded” in society, Tracht voiced her concerns about positive eugenics. “Suppose we are able to limit the families of the poorer classes,” Tracht stated. “How are we going to encourage families of means to have larger families?” Sanger quipped, “Take the burden of relief and taxation off their backs.”⁹⁴ While the wreckages of the Depression were still in plain sight, worries about an over taxed and relief burdened elite may have seemed premature. Yet, the slogans adopted by the Mothers’ Health Center of El Paso encompassed these two important, interconnected ideals Sanger sought to underscore in El Paso: ending poverty (and the welfare that came with it) accompanied by a shoring up of quantity and quality of children. The mottos of the birth control clinic for instance, could be viewed a bit more skeptically. “Every Child a Wanted

⁹³ Vicki Ruiz, *From Out of the Shadows: Mexican Women in Twentieth-Century America* (Oxford: Oxford University Press, 1998), 40; Garcia, *Desert Immigrants*, Chapter Six: The Mexican Schools.

⁹⁴ “Birth Control Clinic Need on South Side Is Questioned,” *El Paso Herald-Post*, (El Paso, Texas) February 25, 1937.

Child” was not merely about individual mothers and their desires to space and plan their families, but, perhaps, about society’s role in deciding what kind of children were, indeed, *wanted*.

Furthermore, “The Charity to End All Charity” could be viewed less as an altruistic statement than as a refrain likened to an investment, suggesting elites could donate to birth control today in order to lessen their burden of taxation and relief in the future. As Tobin explains “the idea of supporting the ‘well-born’ over the ‘dependent’ had become prevalent among some British and American Protestants who viewed Catholics as short-sighted and contributing to the degeneration of civilization.”⁹⁵ Indeed, the debate between Tracht and the mostly Protestant birth control activists foregrounded the troubling ways wealthy residents ignored blatant economic exploitation of the poor and sought eugenic solutions to poverty.

The confrontation between Goetting, Sanger and Tracht caused enough of a stir that even *El Continental*, the Spanish-language newspaper, decided to report on Tracht’s defense of Mexicans in South El Paso. The ethnic Mexican population in El Paso was by no means economically homogenous, and the wealthy Mexican families who controlled the Spanish-language press largely stayed clear of discussion on birth control. Few articles on the birth control movement appeared in *El Continental*, particularly during the early years of the birth control clinic controversy. Yet, the debate sparked by Tracht, Goetting and Sanger did not go unreported. The headline of the article in *El Continental* on February 28, 1937 read: “Los Mexicanos No Aceptan El Control De Nacimientos (The Mexicans Do Not Accept Birth Control).”⁹⁶ The article’s title was deceptive as no Mexicans or Mexican-Americans were quoted, yet they asserted Mexicans were not interested in contraception. The main voices in the text belonged to Tracht and Sanger. It continued: “la señora Tracht

⁹⁵ Tobin, 16.

⁹⁶ “Los Mexicanos No Aceptan El Control De Nacimientos.” *El Continental* (El Paso, Texas) February 28, 1937. Translation: “Mexicans do not accept birth control.”

manifesto que los residentes de sur El Paso no necesitaban consejos para limitar el número de sus hijos, sino buenos salarios para atender a sus familias por numerosas que sean (translation: Mrs. Tracht declared that the residents of South El Paso do not need advice on ways to limit their family size, but do need better salaries in order to better assist their families, no matter the size.).⁹⁷ *El Continental* described Tracht's central concern about low-wage salaries and their connection to poverty in South El Paso, while it also quoted Sanger's response which used strong eugenic language to defend the creation of a birth control clinic in that part of town. Sanger countered Tracht's concern by explaining that "los padres no tienen el derecho moral de tener más hijos que los que puedan sostener...pues la miseria es la que engendra a los criminales y llena las cárceles de delincuentes (translation: Parents do not have the moral authority to have more children than they can economically care for because poverty creates criminals and fills jails with delinquents.)."⁹⁸ Again, Sanger, like Goetting, refused to directly answer questions about socio-economic inequality in El Paso and declared that the major cause of poverty in the Mexican community was Mexican women's uncontrolled fertility. Sanger went further than Goetting to argue that because of unrestrained fertility among poor women, criminals would roam the streets and delinquents would fill the jails. This argument became a classic refrain of post-Depression era discourse in discussions connecting overpopulation and poverty. For these neo-Progressives, immigration and uncurbed pregnancy disrupted social and moral order.

Birth control activists used the tensions created by birth control opponents, predominantly the Catholic Church, in order to gain greater insights in confronting the controversy. Goetting recalled how "the Hilton episode with the Roman Catholics was a sample of what we could expect" and what was to come. These hostilities helped them to better anticipate further clashes with the

⁹⁷ Ibid.

⁹⁸ Ibid.

Catholic Church.⁹⁹ Sanger advised them to, “Fight Roman Catholic influence and power with influence and power. Get your most important citizens back of you—doctors first, because birth control is medical; ministers to answer the Roman Catholic priests; as well as professional men and women—all groups of people.”¹⁰⁰ Historian Linda Gordon explains that by the 1930s Sanger was trying to make birth control a more reputable option for women by bringing in professionals, like doctors and scientists, to help reinforce the validity of the movement.¹⁰¹ Additionally, Sanger was a fierce organizer and knew exactly who was needed to combat the opposition. The women on the committee immediately put into practice Sanger’s instructions. Activists harnessed their political power in the city in order to assure money and positive press for the new clinic.

One of the greatest maneuvers achieved by the birth control activists was their ability to influence public perception of their campaign. Although Catholics had used newspapers to convey their concerns about birth control clinics in the city, Goetting and the other activists easily overwhelmed their voices. Goetting explained that “to be sure of good publicity, we again followed Mrs. Sanger’s advice in using power to attain what we were asking for.”¹⁰² Another member on their committee, Mrs. Maurice Schwartz, the wife of the President of the Popular Dry Goods Company, the largest retail store in the city, along with Mrs. Harvey were asked to deliver a personal message to the editors of the *El Paso Herald Post* and the *El Paso Times*. The women reminded the editors that the Popular Dry Goods Company was the largest advertiser in both newspapers and “quietly, but most forcibly, they asked that the Mothers’ Health Center (our official name) continue to be given good coverage and publicity...the editors were most agreeable.”¹⁰³ With excellent press coverage in

⁹⁹ Goetting, *Our Margaret Sanger*, 86.

¹⁰⁰ Margaret Sanger as quoted by Goetting, *Our Margaret Sanger*, 85.

¹⁰¹ Gordon, Chapter 9.

¹⁰² Goetting, *Our Margaret Sanger*, 86.

¹⁰³ Ibid.

tow and financial donations beginning to stream in, the women of the Mothers' Health Center committee gained ground in the fight for a clinic.

That some of the elite families of El Paso were concerned with issues of uncontrolled fertility among the poor is evidenced by the list of those who sat on the board of the birth control clinic the year after it opened. The clinic's board was made up of some of the most influential people in the community: Mrs. Betty Mary Goetting, chairman, wife of architect and general contractor Charles A. Goetting; Mrs. Katherine McAlmon, first vice chairman, wife of Mr. George G. McAlmon, owner of SW Surgical Supply Company; Mrs. Beatrice P. Rathbun, second vice chairman, wife of Mr. Donald Rathbun, owner and general manager of Rathbun Company, Inc.(a large chemical company); Mrs. Jane Perrenot, secretary wife of Mr. Preston Perrenot, partner in Perront and Broaddus (real estate company); Mrs. Romain Howell, corresponding secretary, wife of Mr. Ben R. Howell, partner in Jones, Hardie, Grandbing, and Howell (lawyer); and finally (the only male on the board) Mr. George Matkin, treasure, Vice President of State National Bank.¹⁰⁴ In addition to the officers of the board, there were members like Mrs. Schwartz and Mrs. C.M. Harvey who helped to establish control over the narrative of the clinics with the newspapers. From the list one can glean that this was a white women's movement from its inception. Other than a few Jewish members, there were no women on the board or workers in the clinic from any other ethnic or racial community in the city until well into the late 1960s. The lack of women from different social classes and from different racial and ethnic groups not only plagued the movement locally, but nationally as well. As Gordon contends of the early days "Nationally, the leadership was all white."¹⁰⁵ In many ways this supported claims that eugenics and racial theories were not only part of the movement's

¹⁰⁴ "Birth Control Clinic on Southside Urged," *El Paso-Herald Post* (El Paso, Texas) February 21, 1938.

¹⁰⁵ Gordon, 139.

doctrine, but part of its internal make-up.¹⁰⁶ The El Paso branch of the movement was no different and in many ways the racial and class composition of the organization complicated the position of the clinic for many in the community.

While committee leaders sought to access powerful allies and bring in money to support their efforts, the newspapers published various opinions from El Pasoans ready to comment on the cause. Mrs. E.N. Oliver wrote to the editor of the *El Paso Times* stating her unpreserved approval of Sanger's campaign for birth control in El Paso. She wrote passionately "the sooner we have eugenic laws for every state, and birth control operated by states or the government, the better the future generation, and more chance for a healthier, happier nation." Oliver concluded with "Here's to Margaret Sanger, and long may she live to continue the great work she has started, 'til we have really established national birth control!"¹⁰⁷ The *El Paso Herald-Post* published the opinion of Alfred D. Heininger in reference to the incident that had nearly derailed Sanger's first speech. Heininger stated fiercely that "in a matter of social welfare as significant as this birth control movement it [sic], it is a serious matter to have permission for the holding of a public event withdrawn...on the instigation of any *minority* [my emphasis] group—a group who in this case must be quite mis-informed [sic] or uninformed as to the real significance of the birth control movement." Alluding to the anti-progressive "minority group" and their lack of social awareness, Heininger ended his note with "we are living in the second quarter of the twentieth century—not in the sixteenth!"¹⁰⁸ Sanger's brilliant oratory managed to encourage support for many of El Paso's residents.

However, some in the ethnic Mexican community were not swayed by Sanger's word. Manuel López, in the *Herald-Post's* "Thinking Out Loud" column, noted the racial and ethnic undercurrents that saturated the demand for birth control in El Paso. He critiqued Sanger's assumption that birth

¹⁰⁶ Angela Y. Davis, *Women, Race and Class* (New York: Vintage Books, 1983), Chapter 9.

¹⁰⁷ "Favors Birth Control," *El Paso Times* (El Paso, Texas) March, 1937.

¹⁰⁸ "It's 1937: Thinking Out Loud" *El Paso-Herald Post* (El Paso, Texas) March 1, 1937.

control would alleviate tax burdens on the rich so they could “assume their duty of establishing a virile race...” López accused the “Sangsters” (as he called them) of breeding those in South El Paso “like cattle in proportion to the demands of our menial labor.” He too affirmed the meager wages paid ethnic Mexicans for their work as domestic servants, farm workers, and in the mining industries of the city decrying the “...\$3 or \$4 per week or whatever pittance the Sangsters will pay.” For López, the campaign for natal control mirrored earlier attempts at population control, such as the city’s move to change the racial designation of ethnic Mexicans on birth and death certificates from white to “colored” in order to obscure the infant mortality rates in the barrio. On the tails of forced deportations in the early 1930s and the racially motivated actions to mitigate infant mortality records, this latest call for reproductive control was too much. López declared: “We are to be supervised in our most intimate relations and are to stand before worldly authorities and beg for our God given rights?”¹⁰⁹ Although there was a dearth of published dissent from the Mexican community in El Paso, it is evident that some believed that the creation of a birth control clinic was not about women’s access to reproductive health entirely, but about controlling the quantity and quality of their population.

Although dissent was strong against the clinic, Goetting and the other activists continued their work in order to promote their socially progressive agenda in the city. Once established, the clinic hoped to accomplish ten major goals in four categories. “For the Mother”, “For the Child” “For the Family” and “For the Community” outlined the categories specific to each area of the social chain. The mother’s aims included “better health due to proper spacing of children,” an “end to abortion” and of course fewer children leading to “happy, useful lives.” The child would be given a chance to have a “healthy body and normal mind” since “parents of feeble-minded children produce almost twice as many children as normal parents” and of course this child would grow in an “environment

¹⁰⁹ “Thinking Out Loud: Fears Birth Control,” *El Paso Herald-Post*, (El Paso, Texas), March 3, 1937.

which will include the necessities of life and lessen delinquency.” For the family, knowledge of birth control would bring an opportunity of “maintaining its dependence and self-respect, when an addition to the family may mean the beginning of public charity” as well as “an opportunity to take adequate care of the children already born.” Yet, perhaps the most significant accomplishment the Mother’s Health Center could achieve would be its relief of “abnormal children born to diseased and unfit parents,” “less delinquency and crime,” and most importantly an “elimination of the tax burden of caring for the unwanted children of families, dependent on the community” for the city as a whole.¹¹⁰ The eugenic and feminist rhetoric dispersed throughout the document reveals the degree to which they could be woven together to promote a progressive vision of motherhood in the border city. Through these documents the clinic, even before it had officially opened to the public, began its systematic racialization of the poorest people in the city.

Sanger and Goetting’s activism in the community was made manifest in the material space of the clinic from which contraception would be prescribed and apportioned. The grand opening of the Mothers’ Health Center of El Paso in April 1937 signaled the merging of national and local efforts for the proliferation of birth control. Ironically, the first clinic opened just five blocks *north* of the train tracks on 1820 East Rio Grande Street. Early efforts to reach the ethnic Mexican community south of the tracks were thwarted by its first location. Articles in the Spanish-language press nonetheless did their best to guide potential patients to the location. *El Continental* ran a small blurb about the clinic giving explicit information to patients about the services of the clinic as well as background information about the person who would be there to care for them. “La señora Emma Hensley está a cargo de la nueva clinica, habiendo llegado de la ciudad de México, donde hizo sus

¹¹⁰ “Annual Report 1938-1939: El Paso Mother’s Health Center” *Betty Mary Goetting Papers*, 1910-1979, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

cursos de preparación y por lo tanta habla correctamente el español.”¹¹¹ Mrs. Hensley was the nurse on duty and the only paid employee of the clinic. Doctors, receptionists, and all others were there on a volunteer basis only. A great significance was paid to Mrs. Hensley speaking Spanish “correctamente;” perhaps this was used to foment a stronger sense of trust in the clinic from the ethnic Mexican community in El Paso.

Even as the Catholic Church and others in the community continued to oppose the clinic, it seems that advertising for birth control in the newspapers was successful as women began to attend the clinic in large numbers. By July 1937 the Mothers’ Health Center boasted 250 patients on their roster and Goetting was “jubilant over its financial stability and the response given to it[s] purpose and aim.” Patients and donations were pouring into the clinic and Goetting expressed to the *El Paso Herald-Post* that “raising the money for the clinic has been the easiest part of its establishment.”¹¹² On their sixth month anniversary, the clinic had almost doubled its patient intake to 407 women. However, in the early days of the clinic, data was sparse and not always accurate. The figures in these reports were more often used to publicize the clinic’s success and not necessarily to keep strict medical records about their patients. A quarterly report from 27 April to 27 July, 1937 showed that out of 190 patients, 127 were considered new patients, 121 were advised (perhaps patients that had come more than once), 6 were not advised due to sickness or pregnancy. Of these patients, 78 were Catholic, 43 Protestant, 4 non-professing, 1 Mormon, and 1 Hebrew. Under the category of “Nationality” 80 were registered as Mexican, 41 as American, 3 as Colored, and there was one patient for each of the final three categories of Italian, French-Canadian, and French. The overwhelming demographic of women using the clinic were Mexican and Catholic.¹¹³

¹¹¹ “Se Inauguro Hoy Nueva Clinica,” *El Continental* (El Paso, Texas) April 27, 1937; (Mrs. Emma Hensley is in charge of the clinic, having arrived from Mexico City where she took nursing courses and therefore speaks Spanish correctly.)

¹¹² “250 El Paso Wives Get Family Planning Advice at E.P. Clinic,” *El Paso Herald-Post* (El Paso, Texas) July 26, 1937.

¹¹³ “El Paso Mothers’ Health Center: Quarterly Report, July 27, 1938,” *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

While the words of poor women and women of color were not abundant in clinic documents or in newspaper articles, the reproductive lives of the women who visited the clinic can be gleaned from the quarterly report. The document described six case histories as examples of the patients the clinic had seen up to that date: four out of the six cases were Mexican patients. Lettered A-F, the list of case histories helped to describe the socioeconomic backgrounds of the patients and reaffirm the need for birth control among some city residents. The first on the list reads: "Patient age 28, married 13 years, 6 living children, 4 spontaneous abortions, 12 pregnancies. Husband laborer, works part time. Referred by City-County clinic." Other notable histories included: "C. Patient Mexican, 29 years, blind, married 14 years, 4 living children; several abortions. Husband 60 years, drinks and does not care to work. Was also taken to office of one of our clinic doctors, as she could not follow instructions, and he took care of her." While some of the cases mention ethnicity and perhaps nationality others cases remained unknown. Case D is also noteworthy: "Patient Mexican, 34 years, married 10 years, 4 living children, 9 pregnancies, 1 still-born child, 3 children died before reaching 3 months of age, 1 spontaneous miscarriage. Husband laborer, earns \$7.00 weekly. Woman walked part way from Smelter to the Center. Case referred to the Center by physician."¹¹⁴ The intentions of the clinic were to educate women on the importance of family limitation as a means to control fertility, all the while ignoring the detrimental conditions emphasized by the case studies in the report. Nonetheless poor women, mostly Mexican and Catholic, found their way to receive assistance. Although their words were not documented, their deeds helped to fill the silence as hundreds of women addressed their own reproductive concerns at the clinic. Women from some of the most marginalized areas of the city, like Smeltertown, sought out the services of the Mothers' Health Center. Although the preparer of the clinic report brusquely laid out the reproductive

¹¹⁴ "Report #2: Report from April 27 to October 27, 1937," *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

tragedies of some of the women, their miscarriages, infant deaths, still-born children, and even abortions, the report revealed the desire of poor women to receive reproductive health services in El Paso.

Although, the services of the clinic expanded with each passing year as advancements in technology helped to bring greater variety of contraception to women, in 1937 there were few options available. Documents regarding devices and techniques are scarce for the early days of the clinic, but instructions that explain the proper way to wash, douche, and use spermicidal jelly with a cervical cap and pamphlets describing the “rhythm method” show that these techniques were prescribed.¹¹⁵ These birth control information pamphlets were available in English and Spanish to their patients. The most permanent form of birth control, sterilization, was never championed in El Paso, and the Mothers’ Health Clinic stayed clear of promoting sterilizations. However, the Mothers’ Health Center board meeting minutes reveal a linkage between the organization and sterilizations. Meeting minutes for March, April and May 1938, were “lost,” but according to one slip of paper, were filled with “complaints against Mrs. Hensley [nurse].”¹¹⁶ The women on the board did not broach the topic again until December 1938, when it was “moved, seconded, and carried that no mention of sterilization cases be made in Mrs. Hensley’s report or ever be discussed by Board outside of Board meetings.”¹¹⁷ Although, documents do not show to what extent the clinic was involved in performing or even suggesting sterilizations for their patients, discussions were quickly silenced by Board members and all traces removed.

As women continued to attend the clinic, the El Paso press continued to generate support for the Mothers’ Health Center and to acknowledge the hard work of Goetting and the other white

¹¹⁵ “Directions for Patients/Instrucciones a los Pacientes,” *Betty Mary Goetting Papers*, 1910-1979, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

¹¹⁶ “March, April, May 1938,” *Planned Parenthood of El Paso Papers*, MS286, Box 11, Old Minutes, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

¹¹⁷ “Meeting Minutes December 1, 1938,” *Planned Parenthood of El Paso Papers*, MS286, Box 11, Old Minutes, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

women dedicated to curbing the fertility of the problematic demographic in the city. The description of a “poorly-clad illiterate Mexican woman [who] suddenly kissed the hand of a doctor at the El Paso Mother’s Health Center” underscored the visions constructed about poor Mexicans in the imaginations of white El Pasoans. “Just 33 years old, the mother of eight children, two of them dead, was expressing her thanks for the help she had received.” The *Times* stated “there will be no more babies for the ailing mother to bear or care for. The clinic has shown her a way to a little future happiness and a less burdened life. She has been taught birth control. Her husband is a tailor, and can’t feed so many mouths.” The news article was the aggrandizement of the missionary work performed by white women in El Paso. Appeasing elite El Pasoans’ concern for the reproduction of the “unfit” and “undesired,” the article affirms the stereotypical images of the “destitute”, “illiterate”, and “ignorant” ethnic Mexican community of El Paso; precisely the group Sanger warned elite El Pasoans about in her speech during her first visit in the city seven months prior.¹¹⁸

Other news reports suggested the great societal benefits birth control would bring to the city. During another spectacle performed during a tea at the Mothers’ Health Center, the *El Paso Herald-Post* broadcast a clear message to the city that the white women of El Paso involved in the clinic were very much dedicated to heeding Sanger’s warning. A poor mother, 28 years of age, “stood before a group of prominent women...and in limited English told them what the birth control clinic had meant to her and her family.” She continued that it had been “11 months since I have a baby. This baby”—she held up a round-faced black-eyed infant—“is the first baby I have nursed. I am so happy...” The presence of the mother, her broken English, and her “black-eyed infant” served as testimony of the missionary efforts by some of the wealthiest women in the community. Goetting

¹¹⁸ “Mother Kisses Hand of Doctor Instructing In Birth Control,” *El Paso Times*, (El Paso, Texas), August 11, 1937.

proudly affirmed ““we are getting results.””¹¹⁹ Her work and that of her dear friend Margaret Sanger was finally coming to fruition. Those interested in turning El Paso into a beacon of modernity saw birth control as a progressive tool that would improve infant mortality rates and control a burgeoning population.

While the birth control clinic became the physical space for reproductive regulation, the attendance of hundreds of women reveals the desire of many to take control of their own bodies. Clinic reports from April 27, 1937 to January 27, 1938 document the large groups of women who attended the clinic during the nine months after it opened. With a total number of 604 patients, over 265 were considered revisits (women who had attended the clinic more than once), demonstrating their concern not only with birth control, but perhaps their reproductive health overall. The overwhelming number of women who arrived at the clinic were Catholic and Mexican, 205 and 211 respectively.¹²⁰ Amidst the campaigns for and against the clinic, amidst harassment from both camps, poor women were steadfast in their desire to take their health into their own hands. Although birth control activists were bent on forcing birth control on women in the barrio and from the pulpit Catholic leaders expounded its immorality, mostly Mexican and Catholic women sought out means to determine their reproductive health.

The determination of the many women to use the services at the clinic should in no way discount the crusade developed by Sanger and Goetting. From January 1938 to January 1939 the Mothers’ Health Center of El Paso had seen over 1170 patients, showing the material effect Sanger and Goetting’s efforts had produced in the border city since they began corresponding in 1919.¹²¹ On November 26, 1939 Sanger wrote Goetting, expressing her joy over the “progressive work”

¹¹⁹ “Woman with Seven Babies Thankful for Birth Control” *El Paso Herald-Post* (El Paso, Texas) February 23, 1938.

¹²⁰ “Every Child a Wanted Child,” February 23, 1938, El Paso Vertical File, Border Heritage Center, Main Branch, El Paso Public Library, El Paso, Texas.

¹²¹ “1170 Patients at Birth Clinic in 12 Months” *El Paso Herald-Post*, (El Paso, Texas), February 22, 1939.

being done under Goetting's guidance. Stressing the importance El Paso's clinic played on the border, Sanger stated "I think you are the only clinic that takes care of two countries."¹²²

The clinic continued to design new ways to draw Mexican-origin women from El Paso and from Mexico to their services. In 1939 they created a bus route that would pick women up every Tuesday at noon from the Centro Comunal Mexicano in order to take them to the clinic and would return them to the Centro in the late afternoon. A small advertisement ran in *El Continental* describing the service with the headline "¡Muchos Niños!"¹²³ Even Sanger's *Birth Control Review* acknowledged the hard work Goetting and her fellow activists had accomplished by having pamphlets in both English and Spanish to better reach the patients that came from Juárez and the Mexican interior.¹²⁴

Eugenic discourse continued to cloak the good works performed by the volunteers at the Mothers' Health Center. Mrs. L.O. Dutton, clinic chairman of the education committee, explained to the *Herald-Post* that the recent slaying of a white mother and her daughter was "an argument for the dissemination of birth control information among the mentally unfit and undesirables." Dutton emphatically proclaimed that the Mothers' Health Center had "taught its birth control method to many mothers unfit for reproducing." She described one of the many patients who they had so generously saved as a mother with "the mind of a seven-year-old child."¹²⁵ Dutton's patronizing tone and unabashedly eugenic suggestions for El Paso's "unfit" and "undesired" mothers did nothing to hide the underlying vision of the clinic. Since other newspaper articles along with resident concerns had already identified Mexican origin women's fertility as the greatest threat in

¹²² Letter, Margaret Sanger to Betty Mary Goetting. *Betty Mary Goetting Papers, 1910-1979*, MS 316, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library

¹²³ "¡Muchos Niños!" *El Continental*, (El Paso, Texas), June 18, 1939.

¹²⁴ *Birth Control Review* (New York, New York), December, 1939.

¹²⁵ "Murders Show Necessity for Birth Control" *The El Paso Herald-Post*, (El Paso, Texas), April 7, 1938.

need of control in the city, the clinic and those involved continued openly to diffuse this idea as the decade came to a close.

Although the Catholic Church remained a staunch enemy of the movement, other religious leaders in the city sought to defend the work of the birth control clinic in the years that followed its opening. Reverend W.H. Mansfield, a Methodist minister, congratulated the volunteers of the Mothers' Health Center who strived to protect society from those unfit to reproduce. "If you multiply a class of people that cannot afford to have children, you breed criminals. I refer to the mass of people living in dire poverty and sickness." For Mansfield contraception was a means to shield both the imagined societal body and the physical body from racial degradation. He asked if "...a child [could] be adopted into a home where there is tuberculosis and cancer?" Mansfield affirmed his position and explained that "We have no right to bring a child into a home without the right kind of body to live in."¹²⁶ The next month the board of directors from the Mothers' Health Center motioned to send a letter of thanks to Rev. Mansfield for his unwavering support.¹²⁷

As more civic leaders began to laud birth control in the city, the location of the first clinic nevertheless fomented anxieties for residents, particularly because it was positioned north of the tracks. Committee members worked diligently to find clinic space where it was most "needed," on the Southside, but this was not to come about until years later. Indeed, during their campaign for funds on their one year anniversary, the clinic dedicated the fund drive to opening a clinic in Segundo Barrio or Chihuahuita. The *El Paso Herald-Post* described the mood of some residents stating in a headline "Birth Control Clinic on Southside Urged."¹²⁸ Meeting minutes describe the frustration of clinic board members as they tried to find ways to help Southside women reach their

¹²⁶ "Mansfield Hits Drawing of E.P. Publication," *El Paso-Herald Post*, (El Paso, Texas), February 13, 1939.

¹²⁷ "March 1939 Minutes," *Planned Parenthood of El Paso Papers*, MS286, Box 11, Old Minutes, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

¹²⁸ "Birth Control Clinic on Southside Urged," *El Paso Herald-Post*, (El Paso, Texas) February 21, 1938.

clinic on Rio Grande Street. By May 1939 some members determined that it would be “cheaper to transport the patients to the clinic than to establish a South side [sic] clinic.” They worked with other charitable organizations, like the Mexican Community House located on South Kansas Street, in order to facilitate the transportation of mothers, who could wait to be picked up by board members at the building.¹²⁹ However, in February 1940, the activists of the clinic finally forged enough support and collected enough money to open a Southside clinic in the heart of Segundo Barrio at 519 South Ochoa Street.¹³⁰ At a time when other cities across the nation struggled to create one clinic, El Paso had two. By 1947 the Mothers’ Health Center of El Paso was an affiliate of Planned Parenthood Federation of America and El Paso was the only city in Texas with three clinics, two in El Paso’s Southside.¹³¹

The movement to create a birth control clinic on the U.S.-Mexico border in 1937 was mired by eugenic ideas, feminist claims, and religious persecution. Activists sought to foreground the significance of overpopulation and offered birth control as a tool for social engineering. Elites in El Paso were deeply concerned with an ethnic Mexican population they viewed as diseased because their population was out of *control*. After several failed attempts at regulating the Mexican community in the 1930s, from repatriation edicts to attempts at changing the racial designation of its Mexican citizens from white to “colored” in a Jim Crow city, white El Pasoans found some recourse in birth control.

White feminists in El Paso used eugenic, progressive and, thus, scientific arguments to explain the need for birth control on the Southside. Conflating race and poverty, these activists continued to stigmatize and racialize the ethnic Mexican community in city and further ignore the

¹²⁹ “May 1939 Minutes,” *Planned Parenthood of El Paso Papers*, MS286, Box 11, Old Minutes, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

¹³⁰ “Southside’s Birth Control Clinic Opened,” *El Paso Herald-Post*, (El Paso, Texas) February 26, 1940.

¹³¹ “Directory of Planned Parenthood Clinic Services,” (New York: Planned Parenthood Federation of America, Inc., March 1947) 12.

underlying causes of poverty and disease in the area. However, their intentions obscured neglect of those most in need of the services: poor ethnic Mexican women. While Mexican-origin women used the clinic in order to address their reproductive care, birth control activists insisted they were helping many women “unfit” for reproduction. While the Catholic Church vehemently fought the arrival of Sanger and her birth control message, mostly Catholic and Mexican women, in astounding numbers, used the services of the clinic. Their overwhelming numbers reveal the lack of resources and the need for reproductive care for the poor. As one woman stated during a visit at the clinic, “I feel like it [birth control] is a very good thing, and I am grateful to the mothers of El Paso who started this clinic.”¹³² Greater access to birth control and reproductive health was a much needed service in the barrio, but the overarching discourse that sought to racialize Mexican-origin women’s fertility has had long lasting effects of the ethnic Mexican community to this day. The forced sterilizations of hundreds of Mexicana/Chicana women during the late 1960s and 1970s in Los Angeles is evidence of this disturbing legacy.¹³³

While the history of the first birth control clinic along the U.S.-Mexico border may seem benign in the face of forced sterilizations in states like California, these interconnected projects nonetheless devalued the reproductive lives of Mexican-origin women and deemed their fertility a national threat to the body politic. In the end the clinic became an important resource for poor women in El Paso, and regardless of the discourse professing population control, the ethnic Mexican community continued to grow and in the late twentieth century surpassed whites in the city. However, the clinic would continue to be a site for the racialization of ethnic Mexican women as cries of overpopulation would arise again in the 1970s. The tension between women’s

¹³² “Nurse Directs Birth Control Clinic,” *El Paso Times* (El Paso, Texas) October 9, 1938.

¹³³ Gutiérrez, *Fertile Matters*.

reproductive care and rights and population control would continue to dominate various moments of the history of the movement on the border.

Chapter 2: Race, Gender and Overpopulation: Establishing Planned Parenthood of El Paso 1937-1960

The Mothers' Health Center of El Paso quickly realized it needed to change its name, when many mothers with children in ill health began arriving at the clinic expecting medical attention. Board members were concerned about these confused mothers and in 1939 requested the words "birth control" be placed under the clinic's name plate.¹ As one Board member explained, "Many people thought we took care of mothers after their babies were born. Some thought we took care of babies."² Attempts to firmly plant its identity as a birth control clinic specializing in family limitation among the very poor was difficult at first. However, the activists were tenacious and used the influence, money, and connections at their disposal to make El Paso a well-known international cite for family planning. From 1937 to 1960, the border clinic became a hub for national and international figures to profess the gospel of family limitation and to defend ideas about population control. By 1946, after the organization became an affiliate of the Planned Parenthood Federation of America, it once again changed its name to Planned Parenthood Center of El Paso and fully embraced its membership in the growing international movement.

The early years in the clinic were difficult and stress-filled as birth control activists—a group of mostly wealthy white women—strove to create an organization out of nothing. In the first decades of the twentieth century women of their social and economic backgrounds had firmly defined themselves as social reformers in America, but by the 1940s major social reform movements had all but disappeared.³ Birth control was the major exception. No longer just activists, these

¹ They requested the change in the telephone directory first in 1938. "Letter to Mr. W.T. Gifford, President, American Telephone and Telegraph Co." Betty Mary Smith Goetting Papers, Box 5, Folder 18. But by 1939 they had made the official change on their first building located on 1820 East Rio Grande St. "'Birth Control' In Name of Clinic," *El Paso Herald-Post*, December 5, 1939.

² "'Birth Control' In Name of Clinic," *El Paso Herald-Post*, December 5, 1939.

³ Nineteenth century women's activism had comprised a large part of the abolitionist movement and is most visible in the campaigns for women's suffrage well into the twentieth century. Women's political activism secured the right to vote

women reformers began the process of professionalizing themselves and creating a formal bureaucracy for their growing institution. They managed staff (volunteers, field workers, nurses, and doctors) and constructed the infrastructure for a clinic; this included developing services, bringing in patients, and securing financial support. These actions spawned a bureaucratic machine that would help propel Planned Parenthood of El Paso for decades to come. Of course, the everyday functions of the organization were made exponentially more difficult, since promoting birth control was still very much taboo. Despite these challenges, the birth control activists of Planned Parenthood Center of El Paso created one of the most important institutions for reproductive care in the Lone Star State. Alongside its sister-clinics in Dallas and Houston, El Paso Planned Parenthood became part of the Texas Birth Control League and secured its seat at the expanding table of family planning clinics across the country and the world. Joining forces with leading scientist and doctors in the community and across the United States committed to the proliferation of family planning and emerging contraceptive technologies, Planned Parenthood of El Paso quickly found a prominent place within the burgeoning movement.

While in chapter one I described the population control controversies that characterized the creation of the first birth control clinic on the border, chapter two focuses on the ways in which Planned Parenthood of El Paso became part of the larger population control movement and how relationships with national and international advocates shaped decisions and goals in the border clinics. Studying the years between the inauguration of the first birth control clinic in El Paso and the distribution of the contraceptive pill there, reveals a forceful borderlands organization that endured economic pitfalls and moral debates, all the while making population control through birth control its central tenant. As the United States entered World War II and Nazi crimes were exposed,

with the passing of the 19th amendment in August 1920 as well as being staunch supporters of Prohibition, which made liquor an illegal substance

the American birth control movement attempted to distance itself from eugenics even as it continued to highlight the issue of overpopulation, albeit with a softer touch. Although movement leaders like Sanger avoided promoting social engineering during these years, population control discourse was reignited in the post war era. El Paso's Planned Parenthood was no different as it sought to encourage individual reproductive responsibility for those it believed were a drain on social institutions and the economy.

This chapter will chart the various events that marked the growth of the institution in the borderlands during the mid-twentieth century. In the process of battling the Catholic Church, experiencing various relocations, networking with institutions across the city, state, and country, hosting prominent nationwide movement figures, and educating local doctors, nurses, and clinical staff on proper contraceptive use, Planned Parenthood of El Paso became an important outpost for the national and international birth control movement. Using the Planned Parenthood of El Paso records and the Betty Mary Smith Goetting collection to trace the various volunteer committees that ran the organization, this chapter reveals the various people and organizations that supported Planned Parenthood at the start, albeit in the shadows, as some wanted to remain anonymous in the face of controversies between the clinic and the Catholic Church.⁴ Furthermore, Planned Parenthood in El Paso welcomed the advocacy of nationally and internationally recognized activists such as Margaret Sanger, Lady Rama Rau (from India), and Clarence J. Gamble, who helped to shape the image of Planned Parenthood in the region. Additionally, I suggest that while the clinic board looked to outside influences in order to promote contraception, they ignored the ethnic Mexican women who might have been interested in advancing the cause for reproductive autonomy. Thus, in the decades to come, El Paso's Planned Parenthood was a major cog in the larger birth

⁴ It is important to note, that for the first decades of the clinic, very few personnel were paid staff. The organization was run with volunteers from the Board of Directors and other women's organizations in the city.

control machine across the Southwest and Mexican north, and the nation in general (as shown in chapters 4 and 5). As birth control advocates championed the restraint of populations, ethnic Mexican women sought to join the movement, not merely as patients, but as activists in their own right.

In order to understand the structural beginnings of the Mothers' Health Center in 1937, we must first pull back the lens and understand how Margaret Sanger came to create a network of clinics across the country and the reasons why birth control activists became entangled with those promoting population control. Sanger's first clinic opened in Brownsville, Brooklyn, New York on October 15, 1915. Soon local police raided and shuttered the facility and arrested Sanger and her sister Ethel Byrne. Sanger and Byrne were charged with violating the Comstock Law (discussed in chapter 1), which prohibited the distribution and sale of birth control information.⁵ By this time Sanger was becoming a celebrity, denouncing the rigidity of state and federal laws that did not allow women the freedom to seek contraceptive information. While her former colleague Mary Ware Dennett believed that by pushing legislation through Congress they could open the doors for women to demand contraception as a human right, Sanger was more pragmatic suggesting that first you "agitate, educate, organize, and [then] legislate."⁶ As Dennett leaned on Congressmen to pass bills that would amend the Comstock Laws, Sanger led the movement in order to change the overarching ideas about birth control through the media, public speaking engagements and by flouting the laws that kept birth control illegal. More importantly, as historian James Reed concludes, "by breaking the law Sanger was able to provide thousands of women with contraceptive services without waiting for legislative action."⁷

⁵ James Reed, *From Private Vice to Public Virtue: The Birth Control Movement and American Society Since 1830* (New York: Basic Books, Inc., Publishers, 1978) 107.

⁶ Margaret Sanger quoted in Reed, *From Private Vice to Public Virtue*, 103.

⁷ Reed, 105.

In this manner Sanger engaged in a public campaign to “out” birth control and after various speaking tours across the country she returned in 1921 to establish an organization that would help create clinics all over the United States.⁸ Sanger united scientists and doctors interested in the cause for a birth control conference under the banner of her new organization, the American Birth Control League (ABCL) in New York City. The meeting ended in turmoil as Sanger was arrested and the convention venue was closed due to protests orchestrated by Monsignor Joseph P. Dineen, Roman Catholic, Archbishop Patrick Hayes’s secretary.⁹ Sanger, the daughter of Irish immigrants, further exacerbated tensions as she suggested that the Catholic Church’s adherence to “medieval doctrines” against contraception fell on deaf ears because its women members had already been enlightened to birth control’s lifesaving aspects.¹⁰ No longer was Sanger merely fighting the Comstockery that kept birth control in the shadows, she now had religious institutions taking aim at her cause. Connecting birth control to civil liberties, Sanger discussed the forced closure of her conference as pure censorship. Needless to say, Sanger relished the antagonism as they only brought further visibility to the movement.

With the formation of the ABCL, Sanger believed it was time to try for another clinic. Wealthy backers provided funds for the initial venture and Sanger found women doctors, Dorothy Bocker and Hannah Stone, who agreed to lend their licenses to create a “private practice” for birth control.¹¹ Sanger opened the Birth Control Clinical Research Bureau (BCCRB) in January 1923, with the offices of the ABCL just down the hall.¹² These two organizations were the precursors to Planned Parenthood Federation of American and the Margaret Sanger Research Bureau in the 1940s

⁸ Reed, 110.

⁹ Reed, 110.

¹⁰ Reed, 111.

¹¹ After Sanger’s first arrest, the New York Court of Appeals ruled that only doctors in the state on New York could administer birth control. See David Kennedy, *Birth Control in America: The Career of Margaret Sanger* (New Haven: Yale University Press, 1970) 174.

¹² Reed, 114-115.

and 1950s. Sanger used the research collected from the patients at the BCCRB in order to create and test new contraceptive technologies. Since the importation of birth control devices was still illegal, Sanger successfully arranged the production of diaphragms and spermicidal jelly with the help of her millionaire second husband J. Noah Slee.¹³ Utilizing data collected from the clinic, Slee contracted with plastic manufacturers in order to create effective contraceptive devices. Reed explained that, “the availability of reliable contraceptives in the United States by the late 1920s was made possible by J. Noah Slee and Herbert Simons [plastics manufacturer], two staunch capitalists who sought the favor of Sanger more than profit.”¹⁴

However, Sanger was at a crossroads in developing further support for her organization, as she desired to expand this clinical model across the country. She lacked support from the established medical profession, who believed that contraception should be used only in the strictest medical circumstances. Those few doctors that began to join her cause in 1925 seemed hell-bent on wresting medical research of contraceptives from Sanger’s grip.¹⁵ Always the pragmatist, Sanger understood that in order to proceed with the movement she must make concessions and began the formal transfer of the BCCRB to a group of well-known doctors in New York, including prominent gynecologist Robert Latou Dickinson.¹⁶ However, Sanger’s initial attempts at creating support among academics produced a board membership at the ABCL focused on eugenics and genetics, rather than women’s sexual autonomy or medical justifications for contraception. Prominent among its members were Clarence C. Little, eugenicist and geneticist; Edward M. East a biologist and

¹³ Kennedy, 183.

¹⁴ Reed, 115.

¹⁵ Kennedy, 190-198.

¹⁶ Kennedy, 184.

established “prophet of overpopulation” theory; and Leon J. Cole, a zoologist and professor of genetics at the University of Wisconsin.¹⁷

Convinced by the sociological and eugenic arguments of board members that the clinic was best kept out of the hands of doctors in order to preserve its societal aims, Sanger continued to resist incorporation of the BCCRB with medical professionals. By 1928 Sanger resigned from the ABCL in order to focus on the creation of more clinics and advancing contraceptive technologies through the BCCRB.¹⁸ In the early 1930s men like Dickinson had given up working with Sanger and derided her movement because it was not based on medically sanctioned practices. Conversely, Sanger’s “propagandist” campaigns were coming to fruition as the public’s interest in birth control grew. By the mid-1930s medical organizations were being forced to take positions on birth control and Sanger’s clinics. When in 1936 the Second Circuit Court of Appeals affirmed a lower court’s decision to strike down a part of the Comstock law that banned the distribution of birth control, the medical community was given further justification to ease its perception of contraception.¹⁹ These legal changes reduced doctors’ concerns about prescribing and administering birth control free from medical reasons, such as the prevention of disease.²⁰ Even as the medical and scientific communities vied for influence over Sanger’s BCCRB, she nonetheless managed to turn that clinic into a viable model for others across the country. By 1938 more than 300 birth control clinics had cropped up throughout the nation²¹

¹⁷ Kennedy, 198.

¹⁸ Beryl Suitters, *Be Brave and Angry: Chronicles of the International Planned Parenthood Federation* (London: International Planned Parenthood Federation, 1973) 7.

¹⁹ Suitters, 8. The initial decision was brought by U.S. District Court, Southern District of New York on January 6, 1936, where the Court ruled against the Government suggesting that the use of pessaries shipped from Japan to the BCCRB were for experimental purposes and to conduct new studies, and thus, were outside the preview of the Comstock Law.

²⁰ Kennedy, 216.

²¹ Reed, 117.

The Mothers' Health Center of El Paso was a prime example of the hard fought battle over the direction of the national birth control movement and Sanger's desire to export her clinic model across the country and the world. By this time Sanger had managed to tame all interested parties and had fashioned an organization that sought to balance the concerns of doctors and scientists, as well as influence moneyed donors to support her work. The structure of local clinics mirrored in many ways the national organization with committees that addressed the medical and social aspects of contraception. Wealthy women were recruited precisely because they had the financial wherewithal not only to fund the clinic, but make strategic connections with potential donors. Some have suggested that after Sanger retired from formal work with Planned Parenthood, local clinics and affiliates began to take different directions in their services and community outreach.²² However, Betty Mary Smith Goetting's connections to Sanger were strong and they remained friends until Sanger's death in 1966. As Goetting recalled years later, "She [Sanger] started us out on a firm, good basis. Because of her years of experience in setting up clinics, fighting Roman [Catholic] opposition, she seemed to know the answer for every obstacle that arose and anticipated many for us."²³ Goetting relied for years on Sanger's recommendations and the organization followed the national organization's lead on issues related to services, new technologies, and the overall mission of Planned Parenthood Federation of America.

Sanger and Goetting's progressive ideas about population control and racial fitness were continually reflected in public discussions about El Paso's "unique" location on the national border. As a 1939 article in the *Los Angeles Times* explained, "The population of this city is undergoing a racial and social experiment that is sure to have an important effect in the West, if not the whole

²² Hajo, *Birth Control on Main Street*.

²³ Betty Mary Goetting, "My Association and Friendship with Margaret Sanger," in *Our Margaret Sanger by Many of Her Friends, Relatives and Colleagues*, Vol. 1., ed. Erma Brown, Dorothy Brush, Masake Ledward, and Ellen Watumull, 1st edition. (Copyright applied for 1959), unpublished manuscript, Sophia Smith Collection, Smith College, Northampton, Mass. 85.

United States. It is a fusion of Anglo-Saxon American and Indo-Spanish Mexican races and cultures to a hitherto unknown extent.” This mysterious experiment was made possible due to the city’s isolation, which harbored in its vast desert, a monstrously expanding ethnic Mexican population. This notion was evident in Timothy Turner, the Los Angeles *Times* Staff Representative words: “conservative citizens predict a future struggle, even race riots, and ‘wars’ of an unprecedented bitterness.” Further, Turner suggested that “if and when a politician, whether American or Mexican, sets himself up as a candidate of the Mexican element—then El Pasoans shudder to think what will happen.” Turner skillfully summarized the anxieties of El Paso’s racial experiment in 1939, and compared this racial deluge of ethnic Mexicans with life in Los Angeles, also encumbered with a growing Mexican origin population. He reassured his readers that although, “there is a biologically inferior Mexican stock, no doubt...many of the newcomers here [El Paso] are of good Northern Mexican ranch stock, light mestizos (that is Spanish for Indian blood) and here [El Paso] they have had a break.”²⁴ Although reproduction is absent from Turner’s narrative, the specter of generations of ethnic Mexicans becoming part and parcel of the American body politic is ever present. Turner aptly outlined the fears of Anglo-Saxon American citizens and attempted to assuage fright over racial degeneration through miscegenation, as he wrote of “ranch stock” Northern Mexicans, whose proximity to the United States border afforded them greater racial leniency. Even still, these fears lay at the heart of the birth control movement in El Paso, and provided the needed justification to calm moralistic concerns about bringing contraception to the borderlands.

El Paso’s Planned Parenthood was deeply committed to creating an institution that would successfully spread the gospel of family limitation across the city and promote what Betty Mary

²⁴ Timothy G. Turner, “Unique Fusion of Races Taking Place in El Paso: Anglo-Saxons, Americans and Indo-Spanish Mexicans Double Population in 25 Years,” *Los Angeles Times*, October 15, 1939. Thanks to Heather Sinclair for sharing this fascinating source with me.

Goetting hailed as, “intelligent family planning.” Reproductive discipline was based on “the consideration of the [family’s] income, the mother’s health, the right of the children to be wanted, well cared for, physically vigorous.” It also took into consideration the “child’s possible heritage” and “the living standards to be maintained.”²⁵ EPPP believed that the most obvious way to begin this work was by establishing strategic locations for its clinics. As mentioned in chapter one, city leaders were concerned that the clinic’s first location, which was north of the train tracks, would attract all the wrong people, but the activists at the facility worked diligently for months and quickly opened two new branches on the “proper sides” of town—in the mostly ethnic Mexican barrios south of the railroad track.



Figure 1. Ms. Maude Gillespie standing outside the first Southside clinic, clipped from El Continental. Betty Mary Smith Goetting Papers, MS 316, Box 5; the second photograph was taken by the author on August 6, 2016 outside the same door.

It was not easy securing a space for birth control clinics in El Paso, as many continued to view the movement with disdain. Yet, nearly three years after the first facility opened at 1820 East Rio Grande Avenue, in a residential neighborhood just north of the railroad track and one block

²⁵ “Speeches Circa 1940,” Betty Mary Smith Goetting Papers, MS 316, Box 11, folder 4.

west of Cotton Street, the activists of the Mothers' Health Center celebrated the inauguration of its second clinic on 519 South Ochoa Street in Segundo Barrio, *El Continental* lauded the virtues and experience of its second nurse, Maude Gillespie, highlighting her residency at Hotel Dieu (the local Catholic run hospital) and her work with the Red Cross in New Mexico.²⁶ Moreover, the newspaper assured women that Gillespie spoke impeccable Spanish and that she would discuss birth control with curious mothers in their homes or at either treatment center location.²⁷ The clinic was nestled in the basement of the Iglesia "El Divino Salvador" established by the Presbyterian community in 1920. The church declared that it had no direct connection to the clinic, but was merely renting the space to the organization.²⁸

Planned Parenthood of El Paso continued to expand as the years went on and always tried to maintain its clinics near or close to the Southside. In 1942 it opened a third clinic on 3213 Rivera Street, in what was then considered east El Paso.²⁹ A tiny square building sitting on a sliver of street between residential homes, the Eastside birth control clinic was located two blocks from the disputed Chamizal territory, created when the Rio Grande changed course in the 19th century. In 1947, tired of renting, the organization culled its resources to buy a lot at 1926 Arizona Avenue and built a clinic from the ground up.³⁰ Goetting's husband, Charles, an architect, provided the plans for the new building.³¹ By 1950, the Southside clinic was moved out of its Presbyterian headquarters to 1009 E. Second Avenue. The following decade Planned Parenthood closed its smaller clinics in order to open a larger one in the heart of downtown. Across from today's El Paso History Museum and diagonal to the monstrous Chihuahua baseball diamond, the robust red-bricked building at 214

²⁶ "Sra. Maude Gillespie," *El Continental*, March 3, 1940, Betty Mary Smith Goetting Papers, MS 316, box 5.

²⁷ "Sra. Maude Gillespie," *El Continental*, March 3, 1940, Betty Mary Smith Goetting Papers, MS 316, box 5.

²⁸ It is unclear to what degree the church supported the work of Planned Parenthood.

²⁹ "Organization timeline," Planned Parenthood of El Paso records, MS 286, Box 11.

³⁰ "Organization timeline," Planned Parenthood of El Paso records, MS 286, Box 11.

³¹ "Meeting Minutes December 1946," Planned Parenthood of El Paso records, MS286, Box 1.

West Franklin Avenue still stands and was the last main headquarters for Planned Parenthood in 1960.³²

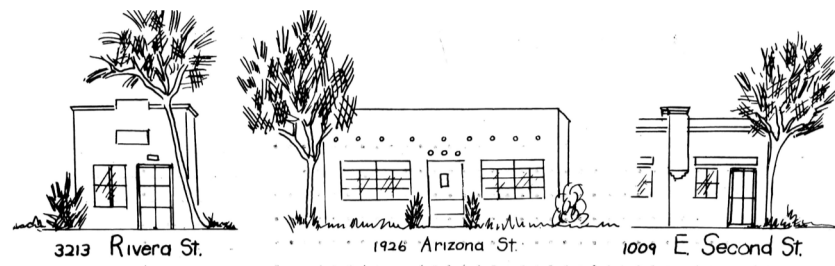


Figure 2. Clinic Letterhead Depicting Locations Circa 1954, Planned Parenthood of El Paso Records, MS286, Box 1.

While the location of clinics was paramount in serving the neediest populations in the city, ensuring that those women who PPEP believed needed birth control most could access it, acquiring funds for these clinics was also high on its list of priorities. Perhaps the most difficult aspect of running the clinic was its constant need for money. Very little was collected from patient fees in the early days, as the clinic was setup specifically to assist the poor with family planning. Donor support was never guaranteed, as minutes from a February 1941 board meeting suggest. In 1940 the clinic counted nearly 396 donors, but by early the next year only about 194 had given monetary support.³³ The House Committee suggested closing part of the clinic in order to cut expenses during that month and other board members suggested having a lunch for the “wives of men who [were] interested and [would] donate to the clinic.”³⁴ Of course acquiring donations and performing donor outreach were made more difficult because the Catholic Church sought to stifle any type of support—monetary or otherwise—for the clinic.

³² “Organization timeline,” Planned Parenthood of El Paso records, MS 286, Box 11.

³³ “Meeting Minutes February 1941,” Planned Parenthood of El Paso records, MS 286, Box 11.

³⁴ “Meeting Minutes February 1941,” Planned Parenthood of El Paso records, MS 286, Box 11.

After attempts to ban Sanger from her speaking engagements in 1937, the Catholic Church continued to put pressure on the birth control movement in late 1940 by attempting to curtail its economic support. The clinic received notice that the El Paso Central Council of Social Agencies (EPCCSA) was approached by a representative of the Catholic Welfare Association who stated that if the clinic did not leave the Council of Social Agencies it would be forced to withdraw twenty Catholic agencies from its roster.³⁵ In what the birth control activists believed to be a calculated move by the Roman Catholics, the Church withdrew all twenty organizations from the EPCCSA during a meeting between the EPCCSA and the Community Chest—the precursor to the United Fund in El Paso. During this meeting the Community Chest was sanctioning financial support for the EPCCSA and all of its member agencies including those controlled by Catholic organizations and the Mothers' Health Center. Clinic Board members suggested that the church wanted “the group to capitulate to the Catholics and resign [from EPCCSA].”³⁶ The Executive Committee for the EPCCSA did not ask the birth control clinic to resign, but instead accepted its membership into the Community Chest and postponed the acceptance of the resignation letter from the Catholic Welfare Association.³⁷

By September, word from New York, presumably from Sanger herself, came to help the activists spin this dramatic event in order to solidify the objectives of the movement in El Paso. The clinic should release a statement “defining Birth Control” she recommended.³⁸ They should describe the movement as a “legal and honorable institution,” and Sanger suggested that this

³⁵ “Summary of Attempt of Roman Catholics to force El Paso Mothers' Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

³⁶ “Summary of Attempt of Roman Catholics to force El Paso Mothers' Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

³⁷ “Summary of Attempt of Roman Catholics to force El Paso Mothers' Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

³⁸ “Meeting Minutes September 1940,” Planned Parenthood of El Paso records, MS 286, box 11.

declaration “be placed in the hands of influential citizens to be signed showing their approval of the objectives of the movement.”³⁹ Sanger went further to stress that if the situation became dire between the Catholic Church and the clinic, the birth control activist should not hesitate to deliver the statement and signatures to the newspapers. The endorsement draft read as follows:

Believing that knowledge of planned parenthood should be available to all mothers regardless of their economic circumstances and recognizing that the most urgent need for child spacing occurs in the most indigent families, I am glad to endorse the objectives of the Birth Control Clinic of El Paso and to become a member of the El Paso Committee of Planned Parenthood.⁴⁰

The activists began their work rounding up names of affluent and influential residents in the city and suggested they would save this signed statement for “any use that might arise” in the future.⁴¹ Yet, by December Bishop Anthony J. Schuler was unmoved by the show of support to the clinic and insisted the Mothers’ Health Center resign from the Council of Social Agencies.⁴² “Three highly respected, outstanding business men called on Bishop Shuler [sic] to try to reconcile him to all agencies working in harmony for the community, pointing out that Council of Social Agencies [sic] Constitution was specific in stating that group was nonsectarian,” and still the Bishop insisted they leave.⁴³

As clinic board members attempted to start their January 1941 meeting, Sheriff Fox, who was sent by the Council of Social Agencies to try to mitigate the situation, interrupted them. He presented the board members with another letter from the Bishop stating the official withdrawal of the Catholic Welfare Agencies from the Council. Fox explained that the Council of Social Agencies

³⁹ “Meeting Minutes September 1940,” Planned Parenthood of El Paso records, MS 286, box 11.

⁴⁰ “Meeting Minutes September 1940,” Planned Parenthood of El Paso records, MS 286, box 11.

⁴¹ “Meeting Minutes September 1940,” Planned Parenthood of El Paso records, MS 286, box 11.

⁴² “Summary of Attempt of Roman Catholics to force El Paso Mothers’ Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

⁴³ “Summary of Attempt of Roman Catholics to force El Paso Mothers’ Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

would not pressure the Mothers' Health Center to leave, instead the women on the clinic board asked themselves: "Will the public be better served if we withdraw?" According, to the board minutes, the answer was an unequivocal "no!" The clinic leaders believed "that if [they] withdrew it would be an admission of failure. "They reasoned that staying would help their cause and give them a sense that the clinic was "a worthwhile organization."⁴⁴ With this affirmation, the tensions between the Catholic Church and the clinic went on for years. By the end of 1942, Bishop Schuler was ready to retire and pass on the fight to his successor Sidney M. Metzger who continued to battle the birth control movement, specifically Planned Parenthood, well into the 1970s (see Chapter 5).⁴⁵

The final confrontation between the Catholic Welfare Agencies, the Council of Social Agencies, and the Mothers' Health Center took place in 1944 after the Catholic Church exhausted all but one possible avenue in order to force the clinic out. Representatives from the Roman church asked to have the constitution of the Council of Social Agencies amended in order to require compulsory registration of agency clients with the Social Services exchange. If adopted into the constitution this would require Planned Parenthood to make available to the Social Services exchange, and by extension the Catholic Welfare Agencies, all of the names, addresses, and possible telephones numbers of patients at the clinic.⁴⁶ The Church hoped that if member agencies of the Council, like the Mothers' Health Center, refused to comply with this new constitutional regulation they would be forced to resign from the council. The clinic leaders called upon Jewish and Protestant agencies as well as businessmen in the community to alert them of the plan and to try to persuade voting members against the proposed constitutional change. The vote took place 1 May

⁴⁴ "Meeting Minutes January 1941," Planned Parenthood of El Paso Records, MS 286, Box 11.

⁴⁵ "Bishop Schuler's Farewell Letter Read in Churches: Expresses Gratitude For Co-operation in 27 Years' Service," *El Paso Herald-Post*, November 23, 1942.

⁴⁶ "Summary of Attempt of Roman Catholics to force El Paso Mothers' Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944," Planned Parenthood of El Paso records, MS 286, Box 1.

1944 before a packed house in the El Paso Chamber of Commerce offices. The Catholic representative made his case and insisted they needed patient information in order to save souls. According to newspaper accounts, Mr. A.W. Norcop presented the viewpoint of the Catholic Welfare Agencies and stated that Bishop Meztger and other local priests wished to address clinic patients who were members of their flock and advise them that “they are violating church law and committing a moral sin.”⁴⁷ Norcop maintained: “if the individual chooses to continue the practice, the bishop and the priests have done their duty and are not charged with the responsibility for the soul of that parishioner before the Bar of God.”⁴⁸ Fortunately, the Catholics were outnumbered and the vote was fifty eight to four against amending the constitution.⁴⁹ Judge David Mulcahy, the president of the Council of Social Agencies and a Catholic, vowed to resign if the amendment lost.⁵⁰ He stepped down as soon as the vote was tabulated.⁵¹ Planned Parenthood was triumphant, and as Catholic agencies and representatives stepped off the council, new members like Mrs. J. Mott Rawlings and Mrs. C.M. Harvey, ardent supporters of the birth control clinic, took their place.⁵²

At the same time that El Paso Planned Parenthood leaders thwarted attempts by the Roman Catholics to end financial support for the clinics, the activists joined the Texas Birth Control League and sought to place the Lone Star State at the center of the fight for birth control. Texas, like other states without specific legislation prohibiting the use of contraceptives, allowed birth control

⁴⁷ “Amendment to Council of Social Agencies Constitution Defeated Following Debate,” *El Paso Herald Post*, May 2, 1944.

⁴⁸ “Amendment to Council of Social Agencies Constitution Defeated Following Debate,” *El Paso Herald Post*, May 2, 1944.

⁴⁹ “Summary of Attempt of Roman Catholics to force El Paso Mothers’ Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

⁵⁰ “Summary of Attempt of Roman Catholics to force El Paso Mothers’ Health Center to resign from membership in El Paso Central Council of Social Agencies, August 1940-May 1944,” Planned Parenthood of El Paso records, MS 286, Box 1.

⁵¹ “Amendment to Council of Social Agencies Constitution Defeated Following Debate,” *El Paso Herald Post*, May 2, 1944.

⁵² “Amendment to Council of Social Agencies Constitution Defeated Following Debate,” *El Paso Herald Post*, May 2, 1944.

reformers to open clinics with no legal ramifications. The movement in states like Texas was further encouraged when the ruling in 1936 *U.S. v. One Package* struck down federal laws prohibiting the dissemination of birth control information and devices.⁵³ Consequently, Katie Ripley founded the first Texas clinic in Dallas in 1935 and Agnese Nelms opened the second such facility in Houston a year later.⁵⁴ Nelms was an adept organizer and created the Texas Birth Control League that same year—only months before El Paso opened its own clinic.⁵⁵ Between 1935 and 1950 about twelve states created birth control leagues, and these organizations soon became vehicles for communication with clinics within their state and created links with government and public health agencies. They became educational sites for doctors and public health workers interested in contraception and population control and later these organizations became important brokers for accessing state and federal funding for family planning.⁵⁶ By the end of the 1930s clinics had sprouted across the Lone Star State in cities like Houston, Austin, Waco, Fort Worth, San Angelo, San Antonio, and El Paso.⁵⁷ However, El Paso would remain the only state affiliate with more than one clinic well into the 1940s.⁵⁸

Although scholars of the birth control movement in Texas rightly suggest that the impetus for the creation of clinics across the state began as a response to damning infant and maternal health statistics, as well as a call for smaller families in the aftermath of the Great Depression, few have discussed the problematic connections between population control and the dissemination of contraceptives in poor communities across Texas.⁵⁹ At a time when the birth rate for middle-class

⁵³ Maria Harris Anderson, *Sixty Years of Choice 1936-1996: Planned Parenthood of Houston and Southeast Texas, Inc.* (Houston: Planned Parenthood of Houston and South Texas, 2001) 20 and 25.

⁵⁴ Judith N. McArthur and Harold L. Smith, *Texas Through Women's Eyes: The Twentieth Century Experience* (University of Texas Press, 2010) 90-91.

⁵⁵ Anderson, 12; McArthur and Smith, 90-91.

⁵⁶ Anderson, 34.

⁵⁷ McArthur and Smith, 91.

⁵⁸ "1942 Directory of Planned Parenthood Services: Conception Control, Fertility Promotion (Sterility Clinics)," (New York: Planned Parenthood Federation of America, 1942), 7.

⁵⁹ McArthur and Smith 91; Anderson 32-33.

families was in sharp decline, the movement gained support as it suggested the use of birth control for the poor and those considered unfit to reproduce.⁶⁰ In 1935 a Dallas sterilization proponent explained the necessity for birth control in the state: “foreigners coming into this country between 1900-1924 were mostly Southern European which rate a point lower in sociological-biological values than the Southern Negro, and which are multiplying at twice as fast as the Nordic stock.” Birth control and compulsory sterilization could mitigate “rapid increase in foreigners...the differential birth rate, the biological effects of war upon the next generation, and the growing mixture of races...”⁶¹ While Southern Europeans were flooding the American northeast, in the southwest ethnic Mexicans were fleeing poverty and their country’s revolution entering the United States through major border cities like El Paso. Newspapers made sure to stress fears of “racial mixing” and the dilution of the so-called Nordic stock, which signaled to many in the movement the lack of control amongst new immigrants.

The relationships established by birth control activists in Texas with population control proponents like Clarence Gamble reveal the myriad ways the movement for contraception stifled the demand for women’s sexual liberation in favor of curtailing birth rates among “habitual criminals and those families continually dependent upon the State...” as well as those who threatened to pollute the white racial stock.⁶² From the very start women like Katie Ripley sought Gamble’s approval in their intentions. Ripley wrote Gamble early on in the movement in Texas stating:

I thought you might be interested in the item published in our Dallas Sunday paper in regard to the birth rate. As a matter of fact, our work is wholly with the indigents. We make no charge for any services or supplies...I am told that a perceptible decrease in the birth rate

⁶⁰ Reed, 211.

⁶¹ “Improving Human Stock Advocated By Sterilization: Teaching Birth Control Among Financially Dependent Also Favored,” Luce’s Press Clipping Bureau, New York, New York, Clipping from Dallas News, Texas, April 24, 1935. The Margaret Sanger Papers (microfilmed), Sophia Smith Collection, Smith College, Northampton, Mass.

⁶² “Improving Human Stock Advocated By Sterilization: Teaching Birth Control Among Financially Dependent Also Favored,” Luce’s Press Clipping Bureau, New York, New York, Clipping from Dallas News, Texas, April 24, 1935. The Margaret Sanger Papers (microfilmed), Sophia Smith Collection, Smith College, Northampton, Mass.

among indigents is now taking place, which I feel is an indorsement [sic] of the Clinic [in Dallas] and proof of the effectiveness of the methods prescribed.⁶³

As the young Texas league took root, Gamble maintained tight communication with many of the main leaders in the movement including Katie Ripley and Agnes Nelms, but little connection with those in the far west were noted. El Paso's geographic obscurity, in the far western Texas desert, made it less than an ideal travel destination for the activists in Dallas and Houston, so they collaborated with Mrs. Charles H. Prather of Arizona, former president of the Arizona Federation of Women's Clubs, to bring El Paso into the fold. Prather accompanied Sanger in her 1937 visit to the border city as they laid the groundwork for the first border clinic.⁶⁴ This information was attentively conferred to Gamble as he monitored the creation of clinics in Texas.



Figure 3. "Race Building in an Empire, Pamphlet from Texas Birth Control League," Clarence Gamble Papers, Box 42, Folder 685.

⁶³ "Katie Ripley to Clarence Gamble, May 26, 1936," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 680, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁶⁴ "Katie Ripley to Clarence Gamble, December 7, 1936," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 680, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

While little correspondence exists between Gamble and the clinics in El Paso, he made sure to take careful stock of their clinical methods, offered regular monetary contributions to Planned Parenthood of El Paso well into the 1950s, and documented the expansion of its work along the border. Though Goetting relied almost exclusively on Sanger's guidance, Gamble's files suggest an interest in the Mothers' Health Center of El Paso as the movement spread across Texas. Dr. Clarence Gamble was a dedicated philanthropist and clinical researcher committed to the dissemination of birth control, the promotion of compulsory sterilization, and control of populations. He was the heir to the Gamble fortune obtained through the Proctor and Gamble Company—producers of Ivory Soap among other products—and devoted “his considerable wealth, energy, and intelligence to search for better contraceptives.” More importantly, according to Reed, Gamble participated “in almost every important experiment in population control, and he initiated, organized, or financed a considerable number of them.”⁶⁵

By the 1930s and 1940s, Sanger had much stronger ties to scientists championing birth control as a tool for population control than any other social cause; Gamble was her steadfast collaborator in this campaign as they pushed an agenda that would make birth control part of public health departments across the nation. Correspondence between Gamble and the director of the Texas Department of Health, Dr. George W. Cox, suggests Gamble's desire to test these ideas in the Lone Star State. Offering Dr. Cox nearly \$1,750 for supplies and a nurse in order to distribute birth control in the state, Gamble hoped to make Texas into “an experiment in the field of public health and preventative medicine.”⁶⁶ Sanger recommended a Southwestern Birth Control Conference in order to bring Ripley, Nelms, and Goetting together, as well as other birth controllers in New

⁶⁵ Reed, 226.

⁶⁶ “Clarence Gamble to Dr. George W. Cox, October 23, 1937,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 682, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

Mexico and Arizona in order to draw the region closer “to our major objective—the inclusion of Birth Control in the public health programs of the various states.”⁶⁷ While Sanger addressed Goetting, Gamble wrote to Nelms in Houston: “I am hoping Dr. Cox may install the work under the State Board of Health. If there is any way in which you could give this a push, won’t you do so?”⁶⁸ Gamble made sure to use North Carolina, one of his most prized experiments, as a constant example of the possibilities available to Texas if only activists in the state could push to have the medical community and the state support birth control. According to Gamble, North Carolina had a “marvelous program” where the “County Nurse, working under direction of the County Health Officer, is now equipped to give contraceptive advice in thirty of their one hundred counties.”⁶⁹ As historian Johanna Schoen explains, North Carolina’s public health and reproductive access history is complicated and mired in eugenic laws that enforced compulsory sterilizations from 1929 to 1975 as well as welcoming men like Gamble to support experimental birth control technologies for poor women in the state.⁷⁰ Furthermore, Gamble viewed these communities of color as well as poor rural areas as spaces in need of birth control. His focus on places like North Carolina, Puerto Rico, (which he traveled to in 1938 in order to survey the birth control movement there) and Texas suggest attempts to capture the attention of regions where birth control could be sold as a proper solution for overpopulation.⁷¹

Gamble’s Texas field representative, Martha Mumford, referred to El Paso as a “lone-wolf operation” and unlike the other clinics in Texas. The Mothers’ Health Center had little to do with

⁶⁷ “Margaret Sanger to Mary Betty Goetting, July 6, 1937,” Margaret Sanger Papers, Collected Documents, Series III, Subseries 1. The Margaret Sanger Papers (microfilmed), Sophia Smith Collection, Smith College, Northampton, Mass.

⁶⁸ “Clarence Gamble to Agnes Nelms, October 29, 1937,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 682, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁶⁹ “Clarence Gamble to Agnes Nelms, March 28, 1938,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 682, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁷⁰ Schoen, *Choice and Coercion*, 76 and 4.

⁷¹ “Clarence Gamble to Agnes Nelms, March 28, 1938,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 682, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard; Laura Briggs, *Reproducing Empire*.

Gamble directly.⁷² There was squabbling among the founders of the original two clinics in Houston and Dallas, but as Mumford explained to Gamble, “Texas has great possibilities, the people are interested, the need is great, and the state is not as poverty stricken as most of the south. In fact, it is the only state I have seen, north, east, south or west, which seems pretty much untouched by depression or recession.”⁷³ Indeed, Houston had seen oil booms in the 1930s and 1940s that had largely insulated it from the Great Depression, and El Paso’s wealth was growing as trade and refining became prominent staples of the economy, but affluence was concentrated at the top.⁷⁴ In cities like El Paso, economic woes became inextricably linked to the ethnic Mexican community, as de facto racism excluded them from access to education and better paying jobs well into the 1960s.⁷⁵ This made the “need” for birth control all the more justified as progressives in these developing cities refused to acknowledge the structural inequality in poor communities, instead advocating for individual responsibility, through contraception, as the means to climb out of poverty.

Although, Gamble was asked to step down as the Director for the Southern Region by 1939, he nonetheless continued his interest in Texas.⁷⁶ Mumford made it to El Paso in late spring of that year in order to inspect the progress of this rogue border clinic and report to Gamble and the federation.⁷⁷ Mumford listed twelve goals accomplished during her trip to the border, among them were that she contacted public health officials in the city to reassert the movement’s interest in their collaboration; a meeting with Sheriff Fox in which she made him promise to refer all “transients and

⁷² “Martha Mumford to Clarence Gamble, 1939, Houston, Texas,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 684, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁷³ “Martha Mumford letter to Clarence Gamble, May 6, 1939,” Clarence Gamble letter to Martha Mumford, May 18, 1939,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 684, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁷⁴ Anderson, 8; Perales, 237.

⁷⁵ Mario Garcia, *The Making of a Mexican American Mayor: Raymond L. Telles of El Paso*.

⁷⁶ “Clarence Gamble letter to Martha Mumford, May 18, 1939,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 684, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁷⁷ “Field Report: Mumford, May 14, 1939,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 684, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

wives of lawbreakers to the clinic;" and the extension of referrals to T.B. service and venereal clinics to send all infected mothers to the clinic.⁷⁸ Perhaps owing to his recent trip to Puerto Rico and Mumford's report, Gamble's interest in the El Paso clinics grew. In early 1940 Gamble wrote the Mothers' Health Center to ask for their Spanish-language pamphlets and it replied sending various advertisements for the clinic, including discussions about the importance of birth control for poor families, particularly those on relief, as well as advice promoting the health of the mother and child. Moreover, the clinic attached instructions on the use and cleaning of diaphragms. Surely Gamble marveled at the detail of all of the documents neatly translated into Spanish and at his disposal.⁷⁹

⁷⁸ "Field Report: Mumford, May 14, 1939," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 684, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁷⁹ "Clarence Gamble to El Paso's Mothers' Health Center," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 685, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard; "¡Muchos Niños! Pamphlet," "Clarence Gamble to El Paso's Mothers' Health Center," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 685, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard; "Instrucciones as Los Pacientes," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 685, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard. Translation of last document, figure 2: [Birth Control] is also a benefit for children when you do not have them so close together and intervals between each birth. You have seen, for yourself, newborn babies die in homes that need food for already growing families, where the mother, herself, has no proper nutrients to eat. BIRTH CONTROL is not an operation. BIRTH CONTROL is no abortion. BIRTH CONTROL is just a method to avoid conception, postponing the birth of a child until you acquire the necessary means to welcome it. The BIRTH CONTROL METHOD only requires a bit of common sense, but in reality is simple to use and with patience and care anyone interested in learning to use it can. Using BIRTH CONTROL is ultimately moral, when the goal is to lengthen the time between births in order to assume the health of the mother and happiness in the home. The truly religious woman is bold and moral when she declares, "I want to have only as many children as I can maintain and educate, but no more." Be certain that BIRTH CONTROL does not impede women from having more children. It allows her to have them when she wants them. The use of this BIRTH CONTROL METHOD is STRICTLY VOLUNTARY.



Figure 4. "Instrucciones a Los Pacientes," this is the cover page to a two page pamphlet giving women directions on how to clean and use their diaphragm;" ¡Muchos Niños!" Pamphlet asks parents to visit the clinic if they want to limit their children.

Sanger was vindicated as the war escalated across Europe, the Pacific and the United States, since Sanger had practically predicted the spread of war, citing overpopulation as a cause as early as 1937.⁸⁰ The United States entrance into the Second World War in 1941 only helped justify the cause for those in the borderlands. Gamble, for his part, did not cease to monitor the clinics in Texas, specifically in El Paso, and continued to receive "progress reports" about the movement across the state. A 1942 communiqué described El Paso's Planned Parenthood as, "an excellent clinic" and informed Gamble that the "work [was] chiefly among Mexicans."⁸¹ Furthermore, it noted that there were slight deviations from the standard clinical practice of fitting the diaphragm in this border clinic. "Due to the fact that all clinicians are male, no instruct by clinician is done," the report explained. Unlike other Texas clinics, no female doctors assisted in the El Paso branches, and because, "the traditional shyness of the Mexican woman would not allow her to be taught the method by a man." Thus, doctors would leave the fitting ring in its place and then have a nurse

⁸⁰ Betty Mary Goetting, *Our Margaret Sanger*, 84.

⁸¹ Author unknown, "Progress Report on El Paso Clinic, circa 1942," Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 686, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

come in and instruct the patient in placing and removing the diaphragm.⁸² Additionally, Gamble was notified that “tuberculosis is rife...and venereal disease among Mexicans is nearly forty percent.” The population of the city was roughly 90,000, but the report noted, nearly 60,000 were “Mexicans of the poorest class.”⁸³ The document remarked on the overwhelming antagonism of the Catholic Church toward the movement and regarded the religious leaders as those parts of the “fanatical variety.”⁸⁴ These observations helped create a clearer picture of the borderlands for eugenicists like Gamble and other activists in the federation. Disease and poverty produced by what the birth controllers believed was uncontrolled fertility, was exactly the cause that inspired Sanger and Gamble. The latter’s interests in developing and promoting new technologies took him to other areas of the world, but he maintained a loose connection with the movement in Texas.

After several attempts to hold a state conference, Sanger finally managed to unite the affiliates in Houston in 1945 so they could share experiences and continue to flesh out new avenues for contacting potential patients and raising funds. Delegates reported that compared to the other state clinics, El Paso was the only center with a steadily rising patient rate.⁸⁵ They discussed the outreach of clinics in San Angelo, Houston, Dallas, Waco and San Antonio. Sanger of course was there to facilitate the gathering and recommend El Paso have a large fundraising gala. They should pay, according to a Planned Parenthood report, a “good speaker (Mrs. Sanger suggests a population expert) and invite influential people socially [sic], and members of the P.T.A, the School Board.”⁸⁶ Moreover if the clinic was to continue expanding they needed to secure board members with

⁸² “Progress Report on El Paso Clinic, circa 1942,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 686, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁸³ “Progress Report on El Paso Clinic, circa 1942,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 686, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁸⁴ “Progress Report on El Paso Clinic, circa 1942,” Clarence James Gamble, Papers, 1920-1970s, H MS C23, Box 42, Folder 686, Center for the History of Medicine, Francis A. Countway Library of Medicine, Harvard.

⁸⁵ “Meeting Minutes April 1945,” Planned Parenthood of El Paso records, MS286, Box 1.

⁸⁶ “Report of State Meeting of Planned Parenthood, 1945” Planned Parenthood of El Paso records, MS286, Box 1.

connections to “the press, the Health Unit and the Council of Social Agencies.”⁸⁷ Even as the birth control clinic received advice from Sanger herself and created strong bonds between the state, national and international public health communities, complications from rising rental costs, and difficulty accessing funds overwhelmed the clinic.

After the end of the war, there were tough times for the organization as they continued to search for donations from the public in order to prolong their services at the clinic, and by 1947 they were nearly \$2500 in the red. With endorsements from the American Medical Association, the U.S. Public Health Service, Texas Medical Association, the State Health Department of Texas, the El Paso Medical Society, and the El Paso Ministerial Alliance, PPEP started a donation drive to reach approximately \$6000 in order to cover the cost of their new building on Arizona Street and to obtain more funds for the coming year.⁸⁸ This time they stressed the importance of family planning because the clinic’s “work helps to keep down maternal and infant death rates from child birth to illegal abortions.”⁸⁹ Toning down the overpopulation rhetoric was prudent in the midst of revelations about the Nazis Holocaust, and could help to bring much needed funds to the clinic.

This pause in overpopulation discourse was short lived, as international figures in the movement showed interested in the work of the clinic in El Paso, and board members, facilitated the meetings between various important figures such as Lady Dhanvanthi Rama Rau from India. Rama Rau’s arrival in El Paso helped to further connect the international movement for population and contraception to the borderlands. Lady Rama Rau was born in 1893 in Hubli, India. Her parents were Kashmiri Brahmins from Northern India, and her father was an official for the Southern Maratha Railway, moved south to be at the company’s headquarters in Hubli.⁹⁰ Well

⁸⁷ “Report of State Meeting of Planned Parenthood, 1945” Planned Parenthood of El Paso records, MS286, Box 1.

⁸⁸ “Parenthood Group in Drive for \$6000,” *El Paso Herald-Post*, January 30, 1948.

⁸⁹ “Parenthood Group in Drive for \$6000,” *El Paso Herald-Post*, January 30, 1948.

⁹⁰ Dhanvanthi Rama Rau, *An Inheritance: The Memoirs of Dhanvanthi Rama Rau* (New York: Harper and Row, Publishers, 1977) 1-2.

educated and professing herself unmoved by any particular religion, Lady Rama Rau married Bengal Rama Rau, a decorated economist, in a civil ceremony. After years of working with women's organizations in India, after their country's independence, the couple moved to Bombay where her husband became the Governor of the Reserve Bank of India. In 1950 she was motivated by conditions similar to those resembling El Paso's Southside, in the poverty stricken areas of Bombay.⁹¹ Lady Rama Rau recalled the decisive moment that led her to start a national campaign for population control through birth control education in India:

A fellow welfare worker took me to visit a tenement family; the man was a mill worker who lived with his wife and three children in one dark, poorly ventilated room. The woman was a TB patient, lying in one corner of the room, coughing painfully, spitting blood on the floor. Her three children, aged five, three, and one, sat around her. The five-year-old was trying to help her mother. The three-and one-year-olds were rickety and unable to move around much. The woman herself was pregnant again. I asked her why she did not go to the municipal hospital in that area. She replied that she was too weak to take three children with her, two of whom would have to be carried, to seek medical aid. She still had to cook for her family...It was when I thought over these glimpses of slum life that it became perfectly clear to me that, however much our social workers tried to improve conditions, nothing could be accomplished while unlimited numbers of children continued to be born in crowded houses when expansion was impossible.⁹²

Similar to the conditions that came to represent the need for birth control in South El Paso, overcrowded tenements, the spread of disease due to unsanitary conditions, and poverty, Rama Rau viewed postcolonial India's population problem as a call to action. Thus, in 1951 she convened the first All-India Family Planning Conference, which was well attended by national academics and doctors interested in addressing India's "population problem" with birth control.⁹³ To their astonishment, the success of the conference spread quickly and soon Margaret Sanger herself was

⁹¹ Rama Rau, 251.

⁹² Rama Rau, 242-243.

⁹³ Rama Rau, 250.

calling to arrange that the following year's International Planned Parenthood conference be held in India.⁹⁴

Rama Rau welcomed a crowd of over 500 delegates at the conference in Bombay on November 24, 1952, where statesmen, scientists, doctors, military men, internationally-known population and birth control activists joined Sanger and others in her organization to discuss the importance of birth control for the burgeoning population in India. In many ways the conference served to ease international fears that “population control was just a way for wealthy, insecure Americans to keep down poor, dark-skinned people.”⁹⁵ However, Sanger saw the opportunity to formalize her newest organization, the International Planned Parenthood Federation (IPPF), and met secretly with Rama Rau, William Vogt, the national director of Planned Parenthood in the United States, Elise Ottesen-Jensen, a Norwegian-Swedish sex educator activist, and C.P. Blacker, the secretary of the Eugenics Society, in order to hash out specifics about the IPPF and to make Blacker its first director.⁹⁶ Although, discussions about making birth control a “cornerstone of the welfare state” and fundamental to the struggle for women's rights in India and around the world, Sanger secured Blacker, who, according to Ottesen-Jensen, was potentially a racist, to be the head of this international movement for birth control.⁹⁷

In early 1953, just months after the success of the Bombay conference, William Vogt, the director of Planned Parenthood Federation of America, arrived in El Paso, Texas praising the gains made in India and its effects on the rest of the world. He spoke at various meetings and luncheons around the city, declaring that, “The meeting in Bombay clearly established India's leadership in that

⁹⁴ Rama Rau, 255.

⁹⁵ Mathew Connelly, *Fatal Misconceptions*, 167.

⁹⁶ Connelly, 168.

⁹⁷ Connelly, 168.

field [family planning].”⁹⁸ For Vogt, the conference was a call to arms for all those interested in arresting war and famine. Addressing members of the Kiwanis Club and at a public meeting at the Southern Union Gas Company, Vogt stated “it is when we come to the larger problem of how to provide food and the other necessities of life for a hundred million people in the next 15 or 20 years that we see the momentous importance of Planned Parenthood.”⁹⁹ His celebration of the Bombay conference set the groundwork for Rama Rau’s visit later that year. Sanger, of course, sent word to Goetting suggesting Rama Rau’s lecture “will be a wonderful boost to our cause” in El Paso.¹⁰⁰

Rama Rau’s visit, as one of the honorary presidents of the International Planned Parenthood Federation—Sanger was the other—would be a huge coup for the organization in El Paso, but it would not be an easy welcome. Goetting had stated interest about Rama Rau’s visit to Mrs. W.W. Schuessler, Chairman Director of the Woman’s Division of the Chamber of Commerce after Vogt’s endorsement of India’s program and Sanger’s recommendation. Schuessler called Goetting “in great indignation, relative to a reported statement made by Mrs. Goetting of the possible sponsorship by the Woman’s Division of the Chamber of Commerce.”¹⁰¹ Goetting quickly retracted her request and by the following month Mrs. Owen, the head of the Education Committee, announced that Lady Rama Rau would be hosted at the Magoffin Auditorium, thanks to support from Texas Western College. They received additional sponsorship from YWCA, Professional and Business Women’s Club, and the Council of Church Women.¹⁰² But even as they received backing for Rama Rau’s lecture, conservative doctors on PPEP’s medical board urged that it would be best for Rama Rau not to mention Planned Parenthood in her speech and that the organization should keep its

⁹⁸ “India’s Program Gives Big Lift to Planned Parenthood,” *El Paso Herald-Post*, February 4, 1953.

⁹⁹ “India’s Program Gives Big Lift to Planned Parenthood,” *El Paso Herald-Post*, February 4, 1953.

¹⁰⁰ “Letter from Margaret Sanger to Betty Mary Goetting, April 10, 1952,” *The Margaret Sanger Papers* (microfilmed), Sophia Smith Collection, Smith College, Northampton, Mass.

¹⁰¹ “Meeting Minutes August 1953,” *Planned Parenthood of El Paso Records*, MS 286, Box 1.

¹⁰² “Meeting Minutes September 1953,” *Planned Parenthood of El Paso Records*, MS 286, Box 1.

distance when she arrived.¹⁰³ After nearly 1,300 tickets were printed and countless hours spent finding sponsorship for her visit, other organizations would get the credit for this work as Lady Rama Rau would make no mention of birth control or Planned Parenthood. Newspapers cited Rama Rau's leading role in India's "Social Revolution" which for Rama Rau focused on the "emancipation and social betterment" of her countrywomen.¹⁰⁴ This attempt to connect the borderlands to the international movement for Planned Parenthood had not gone well. Rama Rau did, however, give a talk on Planned Parenthood the following month during the Texas Welfare Association conference in Mineral Wells, Texas where the theme was aptly titled: "Operation Welfare: At home and Abroad."¹⁰⁵ Although their initial effort to link PPEP to global calls for family limitation went array, they found different and perhaps more obvious ways to sanction their role in the worldwide campaign.

As the Planned Parenthood Federation reinforced its global reach with the creation of the International Planned Parenthood organization, PPEP sought to capitalize on its border location in order to stake its claim on the international stage. As early as 1945 Goetting and other activists from the board were invited to attend the Pan American Public Health Conference as informal delegates. While attending this conference they managed to arrange meetings with Dr. Martinez, the head of the Public Health department in Mexico, as well as Miss Valencia, the Public Health Nurse in Juárez, and several doctors in El Paso's sister-city.¹⁰⁶ In 1947, clinic staff received letters from Mexico

¹⁰³ "Meeting Minutes October 1953," Planned Parenthood of El Paso Records, MS 286, Box 1.

¹⁰⁴ "Five Organizations Will Sponsor Lecture of Lady Dhavanvanthi Rama Rau from India," *El Paso Herald-Post*, October 14, 1953; "India Topic of Speaker at TWC," *El Paso Herald-Post*, October 21, 1953.

¹⁰⁵ "Texas Welfare Conference on November 16-18 at Mineral Wells Will be Open to the Public," *Brownwood Bulletin* (Brownwood, Texas), November 11, 1953.

¹⁰⁶ "Meeting Minutes June 1945," Planned Parenthood of El Paso records, MS 286, Box 1. It is unclear where this conference took place, however I suspect it was in El Paso—board meeting minutes usually stated conference locations when they were outside of the city. The Pan American Public Health Organization is perhaps the precursor to the Pan American Health Organization (P.A.H.O) established in 1902, however they did not establish a field office in this region until 1942. For more information see Citation: Pan American Health Organization (PAHO) U.S.-Mexico Border Field

discussing badly fitted diaphragms. Board members suggested that perhaps they could offer doctors in Mexico instruction on properly fitting these contraceptive devices in El Paso clinics.¹⁰⁷ Like the Birth Control Research Bureau in New York, which served as a site for training doctors and medical staff in the newest and most technologically advanced birth control methods, so too could the El Paso affiliate serve Mexico and the border region in this capacity.

However, it was not until Sanger endeavored to make official her international movement for planned parenthood that PPEP announced similar intentions. In 1953 clinic representatives stated clearly that, “El Paso is an international center for planned parenthood.”¹⁰⁸ They went on to explain:

Not only do patients come from the surrounding territories of Texas and New Mexico [sic] we have a heavy case load from Mexico. In the year Sept. 1952-1953 we have had 134 patients from Mexico. These are patients not visits. They represent an interesting study. They are on the whole older than the patients living on this side of the Rio Grande, although I have one patient of 16...Most of the group had finished the primary school...Income was very low...They had been married from 1 to 20 years...115 of the group had been referred by other patients. 6 by their employers and 7 by other sources.[sic] They came from Zaragosa, Chihuahua, Parral and smaller towns and ranches in the state of Chihuahua. 2 were from Mexico City and 1 each from Durango and Mexicali. The majority lived in Juarez.¹⁰⁹

It is unclear why this document was commissioned by PPEP, but it did come on the heels of the creation of the International Planned Parenthood organization in Bombay the previous year. While the clinic had been tending to patients from Mexico almost since its inception, perhaps it was emboldened by the surge of global support for the movement to acknowledge its own international efforts.¹¹⁰

Office records, 1942-2014, MS 603, C.L. Sonnichsen Special Collections Department, the University of Texas at El Paso Library.

¹⁰⁷ “Meeting Minutes July 2, 1947,” Planned Parenthood of El Paso records, MS 286, Box 1.

¹⁰⁸ “Press Release/Statement 1953,” Planned Parenthood of El Paso records, MS 286.

¹⁰⁹ “Press Release/Statement 1953,” Planned Parenthood of El Paso records, MS 286.

¹¹⁰ “Meeting Minutes May 1937, El Paso Planned Parenthood of El Paso records, MS 286, Box 11.

In addition, for years before emerging as an international center for planned parenthood, Mothers' Health Center activists in El Paso sought to create links between important institutions and wealthy donors throughout the state and across the border, while simultaneously extolling the virtues of contraceptives for population control. In attempts to reach women in the Southside, they hoped to establish relationships with other medical organizations and individuals, including, hospitals and doctors, in order to bring greater credibility to the movement in the borderlands. As early as 1938 the birth control advocates sought to bring education materials to the Newark Maternity hospital, but were denied access a few months later.¹¹¹ In 1939, with the aid of Gillespie, the clinic nurse, they started a satellite clinic in Ysleta, South of El Paso, serviced by Dr. Malloy.¹¹² The Mothers' Health Center's education committee was consistently on the lecture circuit, promoting its views on the blessings of birth control at the Freeman clinic, venereal clinic, the tuberculosis sanatorium, and at its own facility.¹¹³

Goetting's speeches to donors seem to reveal the tensions in the organization as they vacillated between eugenic calls for social engineering and feminist cries for liberation from excessive childbirth. Goetting suggested that, "Every community should be spared: children born of diseased parents; excessive birth rate among the least fit; tax burden of unwanted babies." She also declared, "Every day we see the mother of the poorer classes caught in the toils of unwilling maternity, enslaved not only by the great forces of human nature, hunger and sex, but hopelessly enmeshed in this trap by poverty, heredity, ignorance, domination of or indifference of the husband and the ever increasing complications of child bearing."¹¹⁴ In the same speech Goetting hailed birth control as a societal savior from the burdens of populations unfit to reproduce, while also arguing

¹¹¹ "Meeting Minutes December 1, 1938;" "Meeting Minutes February 1, 1939," Planned Parenthood of El Paso Records, MS 286, Box 11.

¹¹² "Meeting Minutes September 1939," Planned Parenthood of El Paso records, MS286, Box 11.

¹¹³ "Meeting Minutes December 1939," Planned Parenthood of El Paso records, MS286, Box 11.

¹¹⁴ "Drafts of Speeches," Betty Mary Smith Goetting Papers.

that contraceptive saved poor women from unmanageable families. Goetting's discourse was persuasive in that it wrapped population control and contraception in the cloak of science and medicine in order to validate and justify its use in El Paso. In another excerpt from a drafted speech she stated:

Birth control is common sense. It is simply doing away with ignorance and superstition. It is a part of a sane preventative medical program vitally associated with the problems of social hygiene and marital adjustments. The problem of human fertility has gone beyond the solution of a charity aid which has been palliative and not preventative, which has bandaged wounds and scarcely touched [sic] the fringe of the problem. Our prenatal clinics, postnatal clinics, baby clinics, milk depots are all necessary but it is in the long run patchwork. What a sham, what wasted effort to send the mother just delivered of her baby back to married life in constant fear and danger of becoming pregnant, back to a home already overcrowded with undernourished children. Preventive [sic] medicine has always been the cheapest. Much of our charity work has been wasteful, it has been ineffective in efforts to relieve distress rather than scientifically prevent it.¹¹⁵

Birth control as "common sense" was perhaps the simplest declaration against any person seeking to oppose it. Contraception along with family limitation, and by extension population control was relegated to the realm of the rational, logical, modern and progressive. These statements were not devoid of racial undertones, as any El Pasoan listening to her speech would easily conjure images of the poor and destitute masses south of the train tracks, and just across the Rio Grande. An article in the *Saturday Evening Post*—at the time the most popular magazine in the U.S.—alerted the nation of El Paso's ongoing population issues. The Texas author, George Sessions Perry, exclaimed, "Time was when one of this border city's headaches was a free-shooting Mexican bandit named Pancho Villa. Today there is another kind of invasion, nonmilitary but still illegal, to worry about: the 'Wetbacks' who come wading across the Rio Grande at night."¹¹⁶ As Perry described the scores of so-called "wetbacks" who easily navigated the river Goetting touted the tools necessary to control this onslaught at its inception. However, even as the overpopulation message was hammered in

¹¹⁵ Drafts of Speeches," Betty Mary Smith Goetting Papers.

¹¹⁶ George Sessions Perry, "The Cities of America: El Paso," *Saturday Evening Post*, February 4, 1950.

throughout the 1940s and 1950s and justification for birth control was consistently reinforced through media campaigns and illustrious international visitors, the organization never gained a solid economic footing.

Though PPEP gained support from institutions around the city, state, and country, it always struggled to stay financially afloat and in order to prevent potential economic setbacks, the clinic insisted on demonstrating the need for birth control in the community through its roster of patients. After a small dip in the number of those serviced in 1940 and 1941, perhaps due to pressure from the Catholic Church, board members were convinced that hiring a social worker would help bring in more clients and help professionalize their movement in the city.¹¹⁷ Throughout the 1940s, the clinic honed the job description of these new advocates for birth control resulting in a quick turnover of social workers. By 1949 the clinic developed a hiring criteria in order to stabilize personnel and ensure that those offered jobs would engage the community. As the memo stated, “Planned Parenthood Center of El Paso has only one real reason for existing; to give child spacing information to the poor mother (very poor mother), the sick mother and the mother who already has many children.”¹¹⁸ It went on to say, that the “primary object of a social worker is to increase the number of new patients. Emphasis must be put on the women from the lowest income bracket.”¹¹⁹ The person hired for this position would be in charge of referrals to the clinic, answering the countless letters that arrived, and would refer “cases of infertility and marriage counseling” to doctors and clergymen.¹²⁰ Clearly the clinic envisioned that this social worker would be a woman, since the document used “she,” to refer to the person it hoped to hire. The new employee would need to visit 15-20 potential patients a week at local hospitals or clinics and “search various parts of

¹¹⁷ “Meeting Minutes March 1941,” Planned Parenthood of El Paso records, MS286, Box 11.

¹¹⁸ “Directive to the Social Worker,” Planned Parenthood of El Paso records, MS286, Box 1.

¹¹⁹ “Directive to the Social Worker,” Planned Parenthood of El Paso records, MS286, Box 1.

¹²⁰ “Directive to the Social Worker,” Planned Parenthood of El Paso records, MS286, Box 1.

the city for perspective patients” including social agencies, settlement houses, as well as local schools like Bowie and Aoy.¹²¹ The board was assured that these were “sources of great value for new patients.”¹²² The job requirements also comprised of keeping strict accounting of the patients referred to the organization as well as the ability to give speeches and lectures at local events in regards to birth control. This position would become increasingly important as the organization sought to extend its reach throughout the city and bring in new patients. The social worker not only needed to scour all possible publication agencies and schools for patients, but they would need to be adept public speakers and advertise the importance of birth control to the public at large.

Given the top down nature of Planned Parenthood in El Paso’s organizing and outreach, it took nearly 22 years for the organization to hire a social worker that reflected the racial and ethnic background of its targeted community, however Spanish-surnamed clinic staff did not appear in its records until 1949. In that year Manuela Gómez was hired as an “office girl” in charge of cleaning the facilities and later asked to care for the children of clinic patients.¹²³ Gómez did not figure prominently in the documents, but she was mentioned a handful of times when she asked for appropriate remunerations when her workload increased.¹²⁴ By November 1953, after nearly four years with the organization, Gómez resigned because she received greater compensation from another business. She was promptly replaced by Concepción Labrado to carry on the work at the clinic.¹²⁵ Moving away from their Junior League volunteers, PPEP hired Maria Tapia in May 1958 to tend to weekly clinic sessions and Cristina Nevarez began her position as receptionist.¹²⁶

¹²¹ “Directive to the Social Worker,” Planned Parenthood of El Paso records, MS286, Box 1.

¹²² “Directive to the Social Worker,” Planned Parenthood of El Paso records, MS286, Box 1.

¹²³ “Meeting Minutes September 1949;” “Meeting Minutes February 1950,” Planned Parenthood of El Paso records, MS 286, Box 1.

¹²⁴ “Meeting Minutes December 1950;” “Meeting Minutes February 1953;” “October 1953,” Planned Parenthood of El Paso records, MS 286 box 1.

¹²⁵ “Meeting Minutes November 1953,” Planned Parenthood of El Paso records, MS 286, Box 1.

¹²⁶ “Meeting Minutes May 1958,” Planned Parenthood of El Paso records, MS 286, Box 1; Board minutes are missing for the ensuing years (parts of 1954 through mid-1958).

The following year, after board members and the national office insisted that greater personal contact would bring patients to the clinic failed, and the social worker, Elizabeth Patterson resigned in protest, Nevarez led a new outreach program.¹²⁷ Patterson's resignation letter revealed the continued lack of understanding the birth control activists had about the ethnic Mexican community they wanted to uplift.

I have been asked to handle the distribution of literature and house to house visits to families in lower income groups for discussion of this literature. As you know I am unwilling to go into the homes of strangers, unsolicited, and initiate a discussion of such a personal matter as the use of contraceptives. Moreover, while I am strongly opposed to efforts by the Roman Catholic Church to have birth control information withheld from women who need and ask for it. I can see no value, and perhaps some harm, in canvassing a Roman Catholic neighborhood with the purpose of inducing persons of this faith to go counter to their religious training and to what they themselves may believe to be wrong.¹²⁸

After Patterson's condemnation of the program, surveying potential patients door-to-door was suspended, and board members took a different approach. At this point, the board was willing to give Cristina Nevarez a try and a few months later she was asked to take on the role of field worker.¹²⁹ Nevarez did a magnificent job, attracting an avalanche of new patients to the clinic and becoming personally involved in the movement. By September 1959, Nevarez had interviewed over 137 new patients, made over 71 home visits (to established patients), and had even "held a PP [Planned Parenthood] party in her home with 6 ladies present."¹³⁰ Her work was so remarkable that as the decade came to a close, board members hired other women from the community including Irene Robledo and later Maria Elena Hernández to help Nevarez with her fieldwork.¹³¹ The inclusion of ethnic Mexican women as part of the clinic staff would become a hallmark of the work in El Paso and would ease the transition into the turbulent 1960s.

¹²⁷ "Meeting Minutes May 6, 1959," Planned Parenthood of El Paso records, MS 286, Box 1.

¹²⁸ "Letter, Elizabeth Patterson to Mrs. Driver, April 12, 1959," Planned Parenthood of El Paso, MS 286, Box 1.

¹²⁹ "Meeting Minutes July 1959," Planned Parenthood of El Paso records, MS 286, Box 1.

¹³⁰ "Meeting Minutes October 1959," Planned Parenthood of El Paso Records, MS 286, Box 1.

¹³¹ "Meeting Minutes December 1959," "September 1960," Planned Parenthood of El Paso records, MS 286, Box 1.

PPEP's ability to organize and rally institutions and people who extolled contraceptives and a means for population control helped it stay on track well into mid-century. Even as there was a moderate drop in its population control rhetoric after World War II, there was a swift revival in the early 1950s as Sanger and Rama Rau continued to influence those ideas in the borderlands. Securing clinic space, building facilities, fighting the Catholic Church, working alongside other Texas affiliates, while welcoming relationships between national and international population control advocates, characterized the movement's professionalization in El Paso from the 1930s into the 1960s. In 1951 Betty Mary Goetting would gain recognition for her work when she was elected as a national director of Planned Parenthood Federation of America.¹³² By 1960, after almost 23 years of birth control advocacy in the borderlands, the organization was ready to further its work and continued to push for family limitation as a public health need. Moreover, as more ethnic Mexican women were hired as field workers, PREP's garnered support from the community whose fertility it so desperately sought to discipline. The organization now found new footing from which to extoll the virtues of birth control as the contraceptive revolution began to unfold with the invention and distribution of the Pill in 1960.

¹³² "Named National Parenthood Director," *El Paso Herald-Post*, November 15, 1951.

Chapter 3: Overpopulation and Reproductive Choice: Ethnic Mexican Women and Birth Control, 1945-1960

1960 was an explosive year for contraception; an array of new technologies including the Pill, spermicidal foams, and I.U.Ds (intrauterine devices) emerged and augmented older tools like the diaphragm. Women had never seen such diverse birth control options in their lifetimes.¹ The mid-century also marked a dynamic moment for Planned Parenthood of El Paso (PPEP) as it developed different methods for reaching new patients. PPEP focused its advertising squarely on women in the poorest areas of El Paso, specifically the Mexican-origin, mostly working-class sections south of the train tracks. However, as the decade progressed it was able to reach women across the county. The organization launched educational campaigns that not only sought to underscore the importance of contraception by sharing new birth control technologies with women in door-to-door campaigns that advertised new pharmaceuticals, but continued to actively promote ideology about the importance of population control. Women across the city saw a revved up drive to address what birth control activists insisted was an overpopulation problem in the barrio and the direct cause of poverty in these communities. While chapter one and two focused on the creation of the first birth control clinic and the significance of El Paso within the national and international movements for planned parenthood, respectively, this chapter highlights the use of PPEP clinics by mostly Mexican-origin women. Furthermore, it underscores how pharmaceutical companies and population control advocates utilized these women as test subjects for emerging contraceptive technologies and abused the desire of many women to have control over their reproduction.

¹ See Andrea Tone, *Devices and Desires: A History of Contraceptives in America*. (New York: Hill and Wang, 2001) for a history of contraceptive devices.

Even as women confronted the stigma of reproductive care, some believed contraceptive use was a mark of lasciviousness, while others, like those at the clinic, deemed it was necessary to curb supposed over fertile populations around the city. Although women from all over El Paso attended the Planned Parenthood clinics from the instant the first one opened in 1937, scant information exists about their lives, desires, concerns, and what they thought about the clinic and contraception. While newspaper articles, meeting minutes, letters, telegrams, scrapbooks, and pamphlets document the history of the women who founded Planned Parenthood of El Paso, few sources are available that vividly describe the patients themselves. What little we know about the thousands of women who risked social and cultural stigmas in order to receive care is gleaned from clinic data. Thus, patients' actions rather than words – as clinic figures omitted personal testimony—will be examined here.² Hundreds of pages of PPEP records were analyzed for this chapter. In attempts to understand why women attended the clinics, how the procedures changed, the advancement of contraceptive technologies, and to become acquainted with the doctors, nurses, staffers, and field workers who informed patient's experiences with birth control. Although information was not always available for each year, statistical analysis of the existing files reveals the

² It is important to complicate the sources, and think about the notions of privacy and agency, as it is possible that some women did not feel comfortable championing their use of contraceptives as birth control continued to be stigmatized well into the 1970s. It is possible to view the lack of women's voices in the archives, not necessarily as an act of erasure, but, perhaps, as a call for privacy to keep secret their intimate reproductive choices. Additionally, notions of privacy further complicate the role of Planned Parenthood of El Paso's programs to reach more women in the barrio. The "Knock-on-every-Door" campaign, for instance, hired field workers to comb neighborhoods south of the train tracks, engage potential patients, and leave pertinent information regardless of their interest in the clinic. This program certainly did little to protect the privacy of potential patients to the clinic as neighbors and others in the community could easily bear witness to those women who allowed Planned Parenthood social workers into their homes. It is equally important to note that allowing Planned Parenthood volunteers into their homes could also connote a subversive act against those in the barrio that stigmatized the use of birth control. As one woman, who I interviewed explained, "Nostotras nomas calladitas, we used birth control, but it was private." While the "silence" of ethnic Mexican women in the history of the birth control movement has long been understood as a cultural admonition toward contraception, this chapter suggests that ethnic Mexican women nonetheless participated in the movement as active seekers of reproductive care. Moreover, women's abilities to make choices about their bodies outside of the dominion of the Catholic Church and others in their community, who did not agree with their use of contraception, would be worth protecting by keeping their connections to the clinic and birth control to themselves. Dolores Briones Interview, July 13, 2015.

choices, decisions, and concerns that confronted women, mostly ethnic Mexicans in some of the poorest areas of the city, as they talked to mostly white doctors and nurses about family planning.

Poor women and those of color have typically been depicted as victims of sterilization campaigns and eugenic inspired policies in twentieth century. However, this chapter adds to the small, but growing body of literature that recognizes this group's attempts to be active participants in their reproductive care in the midst of racist rhetoric that deemed their procreation a danger to the nation-state.³ While acknowledging the limits of poor women's autonomy within a movement that subjected them to experimental tests in places like Puerto Rico, this study also seeks to unearth the engagement, however restricted, of ethnic Mexican women in the borderlands in planning and limiting the size of their families.

Examining the number of everyday women who visited Planned Parenthood of El Paso year after year makes clear their strong desire to use birth control. Despite tensions between the Catholic Church and birth control activists, the clinic reported rising numbers annually. As interest in the clinic grew, the women on the board of Planned Parenthood of El Paso (PPEP) discussed building a second and third clinic, while most cities in Texas only had one.⁴ Condemnation came from some in the community when the first clinic opened in 1937 just a few blocks north of the train tracks. The

³ Some studies do complicate the role of poor women and women of color within reproductive health and rights history see Natalie Lira, "'Of Low Grade Mexican Parentage': Race, Gender, and Eugenic Sterilization in California, 1928-1952," (dissertation: University of Michigan, 2015); Rebecca Kluchin, *Fit to Be Tied: Sterilization and Reproductive Rights in America, 1950-1980* (New Brunswick: Rutgers University Press, 2009); Elena Gutiérrez, *Fertile Matters: The Politics of Mexican-Origin Women's Reproduction* (Austin: University of Texas Press, 2008); Iris Lopez, *Puerto Rican Women's Struggle for Reproductive Freedom* (New Brunswick: Rutgers University Press, 2008) Alexandra Stern, *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America* (Berkeley: University of California Press, 2005) Joanne Schoen, *Choice and Coercion, Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005); Jennifer Nelson, *Women of Color and the Reproductive Rights Movement* (New York: New York University Press, 2003); Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2002);.

⁴ "Southside's Birth Control Clinic Opened," *El Paso Herald-Post*, (El Paso, Texas) February 26, 1940; "Mother's Health Center Opened in East El Paso: Clinic Established by Sponsors of Planned Parenthood," *El Paso Herald-Post*, (El Paso, Texas) June 20, 1942; "1942 Directory of Planned Parenthood Services: Conception Control, Fertility Promotion (Sterility Clinics)," (New York: Planned Parenthood Federation of America, 1942), 7; See Harold L. Smith, "'All Good Things Start with the Women': The Origin of the Texas Birth Control Movement, 1933-1945" *The Southwestern Historical Quarterly* 114 (3): 260. <http://0-www.jstor.org.lib.utep.edu/stable/23059166>.

birth control clinics intended to address the supposed rampant fertility of the “Spanish speaking population of El Paso.”⁵ Thus by 1942 two new clinics were opened in the heart of the barrio.⁶ The birth control clinic in its first decade collected little patient information. Patients’ choices and decisions of remained sparse in the PPEP meeting minutes. However, what little facts are known about the patients during this time can be understood through the numbers of women who attended the various clinic locations. For instance, from 1945 through 1950 the average number of new patients that attended the facilities annually totaled roughly 1,115 and the average number of returning patients was approximately 1,603.⁷ Although these numbers may seem relatively small, Catholic Church officials and others community members put constant pressure on women to avoid the PPEP clinics. Moreover, social ideas about the sexual undertones of birth control—that it would cause greater promiscuity among its users and general immorality—caused many to stay away. PPEP worked diligently over the years to educate the community about the significance of birth control in their city. So nearly fifteen years later, after the invention of the Pill and a focus on new

⁵ “South El Paso Birth Control Clinic Given Endorsement of Club Women,” *El Paso Herald Post*, (El Paso, Texas), February 6, 1937, 1.

⁶ “Southside’s Birth Control Clinic Opened,” *El Paso Herald-Post*, (El Paso, Texas) February 26, 1940; “Mother’s Health Center Opened in East El Paso: Clinic Established by Sponsors of Planned Parenthood,” *El Paso Herald-Post*, (El Paso, Texas) June 20, 1942

⁷ The data available for these years was annualized from the following documents. Not all months were available, therefore, averages were taken for each year based on the numbers that existed in Board Meeting minutes. “Meeting Minutes from February 1945-January 1946,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso. These are averages based on the months available, in this case March meeting minutes are missing for old and new patient information and September is missing data for old patients; “Meeting Minutes February 1946-January 1947,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso. These are accurate figures as all months were available; “Meeting minutes for January 8, 1947,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso; “Meeting minutes for December 31, 1947,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso; “Meeting minutes for January 1, 1949,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso; “Meeting Minutes from April 1949-December 1949,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso. These are averages based on the months available, in this analysis January, February and December numbers are missing for old and new patients, and October is missing numbers for old patients; “Meeting Minutes from February 1950-December 1950,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The University of Texas at El Paso. There are four months missing data for this year: April, September, October, and December.

technologies, clinic records boasted that in the 27 years since it opened, PPEP clinics had served a total of 14,440 patients.⁸ It was in response to huge leaps in contraceptive science in the late 1950s and 1960s that clinics began to keep more detailed records of patients and birth control methods.

As hundreds of women descended on the clinic each year, documents describe patients making decisions based on advice from caring doctors and nurses at the clinic; however, further scrutiny of board minutes and meeting notes reveal that not all doctors complied with clinic rules, leaving some women without proper care. One such doctor, who neither gave women pelvic exams, “nor [was] he using a fitter for deciding the size of diaphragm to prescribe,” was mentioned during the July 18, 1960 meeting of the Planned Parenthood Medical Committee. Women in his care would endure, “rush[ed]...examination[s] so that he is very rough—at one clinic [session] he saw 15 patients and was through and ready to leave in 15 minutes!”⁹ Additionally, he would “not examine old patients who have missed one or [more] periods.”¹⁰ A memorandum was written to address proper care of all patients, but given the notes made at the medical committee meeting, patients may have discussed this doctor’s brusque disposition amongst themselves. Some women arrived at the clinic refusing to have pelvic exams, but still requested birth control, prompting the committee to address “the situation.”¹¹ In the end, the committee decided it best to comply with national and local rules that made a proper pelvic exam part of the basic care offered to patients. Although patients were not directly quoted in the organization’s missives, their objection to painful, invasive procedures, and inappropriate care emerge as faint whispers expressing their wish to protect themselves.

⁸ “Meeting Minutes September 1, 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁹ “Agenda: Medical Meeting, July 1960,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

¹⁰ Ibid.

¹¹ Ibid.

It was important that women coming into the center for contraception or other reproductive health concerns could anticipate the various procedures and services offered at the clinic and perhaps explain the process to others interested in birth control. As one Board member noted in 1961, “word of mouth [is] still our best source of patients.”¹² Indeed, by 1961 the clinics sought to streamline their services in order to provide the same care even as doctors and technologies changed. Women could expect that at an initial visit they would receive a thorough explanation of all contraceptives available, and 30-40 minute lecture on the purpose of the clinic. Three clinic sessions were offered every week, with a different attending clinician at each session, and volunteers from the Planned Parenthood Board or from other women’s organizations in the city, administering the duties at the front desk. The clinic also offered marriage counseling and managed infertility cases on a referral basis only. Although, the national policy was to offer birth control to married women exclusively, Planned Parenthood of El Paso made contraception and reproductive care available to anyone referred to by a doctor, clergy, or agency “no questions asked.”¹³ Women, mostly those hailing from the poorer areas of the city, learned to maneuver the system created by the Board members at the clinic and their actions could either bolster patient numbers through word of mouth or, if given improper care, could put a strain on the number new patients entering the clinic.

The creation of a less physically intrusive contraceptive and its arrival in El Paso was welcomed by thousands of women who rushed to Planned Parenthood clinics to receive the miracle pill. Enovid was the first pill used at PPEP birth control clinics. During one of the organization’s medical committee meetings, “new and simpler methods of contraception” were discussed, among

¹² “Meeting Minutes March 1961,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

¹³ “Meeting Minutes March 1961,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

them Emco [sic], a spermicidal foam, Enovid, the Pill, and Koromex A, a contraceptive jelly.¹⁴ Low-income patients now had a greater choice in birth control methods. Some opted not to use the invasive diaphragm, and instead choose contraceptives that they could administer themselves. What had been a constant flow of women accessing the clinic soon turned into a flood as these easier, and less intrusive contraceptives became available. By the end of 1960, documents reveal that over 836 new patients had registered for some form of birth control and 757 women were returning patients. The clinic prescribed a total of 2,363 contraceptive aids, including diaphragms, pills, jellies and foams.¹⁵ In the following year, the number of new patients in the PPEP records jumped to approximately 1,335 with about 943 returning patients, and there was a 115 percent uptick in supplies with approximately 5,082 apportioned in 1961.¹⁶

Perhaps the rise in the numbers stemmed from that fact that Planned Parenthood Federation of America, which PPEP was affiliated with, was on the vanguard in securing new contraceptive technologies. A 1961 clinic dispatch noted that, “ethnic data shows a remarkable change...for the year [up] to July 1960 the center had 18 Anglo patients,” but for the following year up to the same month there was a radical increase of “194 Anglo patients.”¹⁷ Clinic personnel were accustomed to serving mostly ethnic Mexican women with a smaller number of Black patients, but as files reveal, Anglo patients continued to attend the clinic as the years progressed. By 1962, after an article reviewing the history of the Pill appeared in the *Saturday Evening Post*, special mention was

¹⁴ “Agenda: Medical Meeting, July 1960,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department; Rose Holtz, *The Birth Control Clinic in a Market Place World*, 103.

¹⁵ “Meeting Minutes February 1960-January 1961,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. All numbers are available for this year.

¹⁶ “Meeting Minutes February 1961-January 1962,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department. The data is not complete for 1961 with the months of February and November missing from the data set, however the numbers available were annualized to give an approximation of the number of new and returning patients to the clinic. The number of supplies were also annualized as only 9 months were available with this information.

¹⁷ “Meeting Minutes August 1961,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

made of the ten new Anglo patients accepted to the clinic.¹⁸ A month after these women became clinic patients, the Board of Directors discussed whether dispensing Enovid to financially-stable women conflicted with the clinic's mission to service the poor. Among the solutions proposed was instituting a sliding scale whereby women would pay "Ten percent of the 'take home pay', minus 50 cents for each child."¹⁹ However, by summer Board members stated that, "if a patient desires Enovid, regardless of income, she must be permitted to have it."²⁰ The contraceptive revolution quickly began to challenge the early intentions of birth control activists in El Paso, whose motto was the "Charity to end all charity." Records do not expressly mention the ethnicity of all of the facility's patients during these years, but the specific reference to Anglos receiving treatment suggests EPPP's concern, or at least its surprise, of this slight racial shift. Despite initial intentions and overt moves to force birth control on a particular population, especially those with specific financial limitations, PPEP offered birth control to all women who wanted it, despite their ethnicity or resources.

Although greater contraceptive "choices" during these years existed, those options did not always translate into safer alternatives for women; thus, women in El Paso visiting PPEP clinics had to make birth control decisions that were already filtered through the national and local organization's need to control the type of contraception offered. Historian Rose Holz contends that by the late 1950s pharmaceutical companies were eager to engage in the search for the perfect contraceptive, and Planned Parenthood Federation of America (PPFA), with the help of Margaret Sanger, enthusiastically accepted their assistance. While Enovid emerged as the first birth control pill on the market, side effects and other health concerns pressured scientists to continue their

¹⁸ Steven M. Spencer, "New Case-History Facts on Birth Control Pills," *Saturday Evening Post*, June 30, 1962; "Meeting Minutes July 1962," Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

¹⁹ "Meeting Minutes March 1962," Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

²⁰ "Meeting Minutes August 1962," Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

research for a better option.²¹ PPFA and the Margaret Sanger Research Bureau funded and supported the study of contraceptive devices and pharmaceuticals in their clinics.²² According to Holz, PPFA national medical director Mary Calderone wrote to a potential drug company explaining that the clinics nationally “have a total of 10,000 new patients yearly” which would undoubtedly excite executives yearning to produce more clinical research.²³

Women who attended PPEP clinics in the early 1960s served as case studies for Enovid. Calderone made several trips to El Paso to ensure that the use of these new technologies were well accounted for and that proper records were maintained. According to El Paso clinic archives, Calderone first visited in November 1961, nearly a year after the Pill was introduced there, and she made sure to tell clinic staff and Board members of the importance of keeping proper documents on the use of Enovid. “Numbers will become important” as a “surge” of patients would begin to clamor for oral contraceptives. She called for properly trained staff at the clinics in preparation for new patients.²⁴ The following year Calderone sent a letter to the PPEP board recommending they employ a pharmacist in order to accurately dispense the medication and to ensure that women could only receive the Pill with a prescription. Board members and doctors suggested that perhaps their clinic would be free from inspection from authorities since they sought to make no profit on the drugs.²⁵ The matter was tabled, and as official papers suggest, the clinics continued to provide Enovid to all those who desired it. Later that year the Pharmaceutical Association reassured PPEP

²¹ For early experiments of the Pill see Annette B. Ramírez de Arellano and Conrad Seipp, *Colonialism, Catholicism, and Contraception: A History of Birth Control in Puerto Rico* (Chapel Hill: University of North Carolina Press, 1983); Elizabeth Siegel Watkins, *On the Pill: A Social History of Oral Contraceptives, 1950-1970* (Baltimore: John Hopkins University Press, 1998); Laura Briggs, *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2002).

²² Elizabeth Siegel Watkins, *On the Pill: A Social History of Oral Contraceptives, 1950-1970* (Baltimore: John Hopkins University Press, 1998), 19; Linda Gordon, *The Moral Property of Women: A History of Birth Control Politics in America* (Urbana: University of Illinois Press, 2007), 181-182; Ramírez de Arellano, 128.

²³ Mary Calderone as quoted in Rose Holtz's *The Birth Control Clinic in the Market Place World*, 102.

²⁴ “Mary Calderone remarks November 1960,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

²⁵ “Meeting Minutes May 1962,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

that they could continue dispensing Enovid without professional pharmacists, expressing that they “could no longer open the vials, and dispense single pills, and the patient’s name, case number, etc. will now have to be noted on the vial.” Although no pharmacist was needed, restrictions were placed on the distribution of the Pill.²⁶

Calderone was right; PPEP saw the number of patients skyrocket in the following years. From January to July 1962, 6,935 women visited PPEP’s clinic, far exceeding the total numbers for 1960 and 1961 combined; this increase is perhaps due to the popularity of and diversity in birth control technologies that had emerged. In a period of six months there was an increase of more than 52 percent as women inundated the clinic.²⁷ By January 1962, data from the clinic revealed that Planned Parenthood of El Paso had more women using Enovid than any other such facility in Texas.²⁸ End of the year numbers for PPEP disclosed a total of 12,841 clinic visits for 1962.²⁹ However, issues with the more popular oral contraceptive had surfaced. In June 1961 a small, non-descript blurb appeared in the *El Paso Herald-Post* describing Food and Drug Administration’s (FDA) ambiguity toward Enovid. The FDA was not “worried about undesirable effects; [it] just says it doesn’t have sufficient evidence to be sure.”³⁰ Although the FDA made it clear that women were to use Enovid for no more than 2 consecutive years, El Paso’s Planned Parenthood was slow to follow orders. It was not until February 1963 that clinics in El Paso began to comply with these research guidelines.³¹ At this point they had a “52% delinquency rate of Enovid patients,” (patients who had

²⁶“Meeting Minutes October 1962,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

²⁷ “Meeting Minutes July 1962,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

²⁸ “Meeting Minutes January 1962,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

²⁹ “Meeting Minutes December 1962,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

³⁰ *El Paso Herald-Post*, (El Paso, Texas), June 3, 1961.

³¹ “Meeting Minutes February 1963,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

failed to return to fill their prescriptions), but they had nearly 309 patients “waiting to go on the [new] study.”³² Furthermore, the Searle Corporation, the pharmaceutical company that developed Enovid, offered to help pay for the new study in El Paso.³³ As Board members meandered through research guidelines, checked patient files, and considered side effects, nearly half of the recorded Enovid patients had, seemingly of their own accord, stopped taking the Pill and more than 300 new patients were eager to begin.

Mainly poor and ethnic Mexican women made reproductive health decisions regardless of the direction of clinic doctors, nurses, or El Paso Planned Parenthood staff and perhaps even without adequate information as to the possible side effects of particular drugs. Planned Parenthood of El Paso’s Medical Committee glossed over Enovid’s potential side effects until May 1963. These doctors discussed the 1961 deaths from thromboembolisms of two women who had been taking Enovid and explained that “if after a patient uses the drug Enovid for a full two years and reports ill health, she may [their emphasis] have a case against the drug. Therefore the patient has a choice when she begins [their emphasis] taking Enovid, as she is aware of the two year limit.”³⁴ Although patients may have had a choice about when they started the medication, little is known about what patients were told concerning complications with the Pill prior to this date and afterwards. The drop-off in the use of Enovid could highlight complications encountered by some women. As the number of women willing to use Enovid began to wane, Board members suggested that “a more intensive program of education for patients regarding the Enovid pills” was needed.³⁵

³² Ibid.

³³ Ibid.

³⁴ “Planned Parenthood of El Paso Medical Advisory Committee May 1963,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

³⁵ “Meeting Minutes October 1963,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

Doctors on the committee acknowledged the need for a diversity of pills and introduced Ortho Novum, a new oral contraceptive pill, which became available to the clinic in November 1963.³⁶

However, it was not until April 1964 that clinic records described women complaining of side effects from Enovid. Despite the FDA suggesting a two-year limit to the use of Enovid, doctors on the Medical Committee of Planned Parenthood of El Paso urged a “long term study of enovid [sic]” be completed in late 1963.³⁷ The clinic nurse Mrs. Clare Nowers reported this study was well under way in 1964. She reported that “137 two-year exam, 30 two-and-a-half-year, and 25 three year exams” were being monitored. Nowers explained that many left the research study due to side effects, some of which caused pigmentation on the face. She also noted that nearly 117 patients were now using Ortho-Novum [sic] “with a low percentage of side effects.”³⁸ Although clinic records do not specifically discuss the concerns of individual patients, many did suffer side effects, and perhaps clinic staff—doctors and nurses—attempted to minimize issues in order to continue providing clinical studies to pharmaceutical companies. As Nowers acknowledged “a certain number of case studies were promised this year” to the Searle Company in order to have them continue to fund the program.³⁹ However, it is equally possible that patients minimized concerns in order to keep receiving birth control. Again the issue of a greater variety of oral contraceptives was brought to the board’s attention. In the spring of 1964, the Medical Committee suggested that, “the center must stock all kinds of pills.” Parke-Davis a pharmaceutical company located in Detroit, Michigan was “anxious to bring a new pill on the market” and the head of the Medical Committee, Dr. Avner, arranged for Parke-Davis to deliver ten or twenty thousand pills to

³⁶ “Meeting Minutes November 1963,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

³⁷ “Meeting Minutes December 1963,” Planned Parenthood of El Paso records, 1907-2000s, Box 1, MS 286, C.L. Sonnichsen Special Collection Department.

³⁸ “Meeting Minutes April 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

³⁹ Meeting Minutes April 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

the clinic.⁴⁰ As side effects raised red flags about the safety of medication like Enovid, Planned Parenthood of El Paso continued to add new and seemingly untested pharmaceuticals to their swelling inventory.

As the studies on oral contraceptives continued, women in El Paso experienced a new onslaught of information about the services offered at the clinics. As a means to draw more patients, Board members devised different programs both through traditional forms of advertising and new outreach projects that would “educate” the community about the importance of birth control. Earlier in the year, members from the Public Relations Committee suggested placing clip out forms in local papers like the *El Paso Herald-Post* and *El Paso Times* as well as Spanish language newspapers, *El Fronterizo* and *El Continental*.

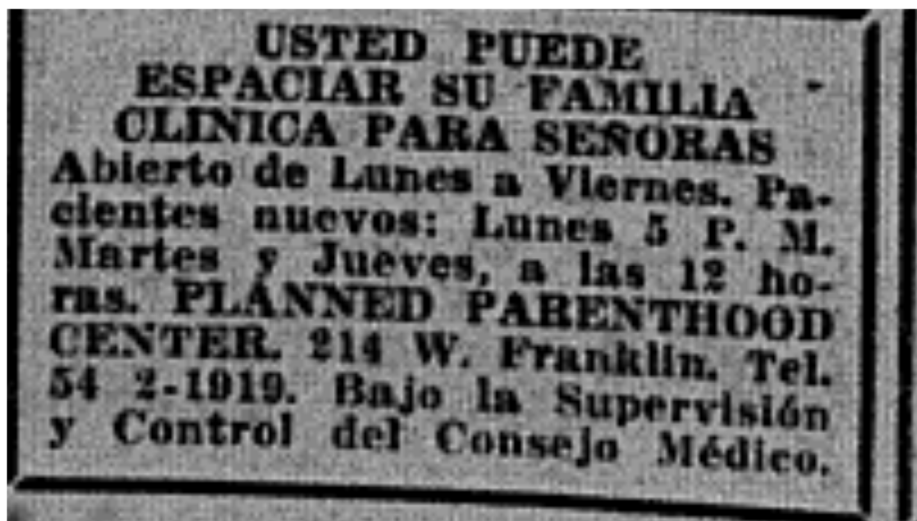


Figure 5. Advertisement for Planned Parenthood, *El Continental*, May 26, 1964.

By July 1964, the clinic received a total of 104 replies, with 34 requests from the Spanish-language newspapers exclusively interested in birth control. The English-language papers, on the other hand,

⁴⁰ “Meeting Minutes April 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

inquired about contraception, but also asked about marriage counseling, and infertility.⁴¹ Another committee member suggested that perhaps sending letters to “mothers of girls about to be married, the names of the girls to be gotten from the society pages,” would also translate into more patients for the clinic. Women also received coupons for 50 cents off of tubes of spermicidal cream and jelly, as well as a reduced price for contraceptive pills. These money saving strategies resulted in 105 new patients by the end of the year.⁴² As clinical studies became increasingly important for the creation and distribution of various forms of contraceptives, more bodies were needed to fill clinic space and help add much needed numbers to dwindling new patient rosters.

Women in El Paso, most of whom were predominately poor and working class, were being barraged by Planned Parenthood information not only through newspapers, but also at their places of work. In November 1964 the Public Relations Committee conferred with private businesses in order to distribute information about birth control to women employees. The “Industrial Campaign,” as it was called, sent letters to executives of local industries and factories, “especially those employing large numbers of women, suggesting that a way of reducing employee turn-over is to lower the number of unwanted pregnancies among employees through a program of education.”⁴³ Women from the committee began working with Safeway (the grocery chain) management and other supermarkets to place birth control pamphlets in women employee bathrooms.⁴⁴ Committee members suggested employers could place clinic information in

⁴¹ “Meeting Minutes July 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁴² “Meeting Minutes September 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department; “Meeting Minutes December 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁴³ “Meeting Minutes December 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁴⁴ “Meeting Minutes November 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

paychecks, as well.⁴⁵ As Planned Parenthood sought to market its services to everyone in the community, reproductive-aged women in the city found themselves bombarded by requests to control their reproduction. Not only were women needed as a means to secure further studies on reproductive technologies, but, in this case, also in order to preserve a blue collar workforce.

Alongside newspapers and print media, in 1964 the clinic hired Alice Aguilar to head a “special project,” it called “Knock-on-every-door” to get El Paso women to use the services of the clinic. As clinic documents stated, Aguilar would “get leaders in neighborhoods not easily accessible and set up meetings in homes to dispense Emko foam and show our slides.”⁴⁶ However, Aguilar was initially unable to fulfill her duties because of “prejudice of neighbors, husbands, and priests.”⁴⁷ Although that project was put on hold, others in the organization continued the push for the dissemination of information and contraceptive distribution outside of clinic walls. In September, clinic records show that a San Elizario woman was contacted, who “would distribute samples in the [public health] clinic and in her home.” This unknown person already had six people visiting her home for information.⁴⁸ Moreover, Planned Parenthood staff worked with farmworkers in the Lower Valley distributing birth control information and the spermicidal foam Emko. However, by December 1964, the Project Committee began to outline the purpose of the “Knock on Every Door” campaign and received funding exclusively for this new program. The program’s aim was to:

Go to women of the lowest income groups and give them our literature and a reply card on the first call; on the second call the reply card will be picked up and free Emko Vaginal Foam will be given to those desiring it. The field worker can also make an appointment at the Center if the client is interested in another method of birth control. At the end of the month each housewife who accepted the Emko will be contacted again with an offer of additional free supplies. All this will be done by home visiting, block by block, by part-time

⁴⁵ “Meeting Minutes December 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁴⁶ “Meeting Minutes June 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁴⁷ “Meeting Minutes June 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁴⁸ “Meeting Minutes September 1964,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

field workers hired and trained for this project. A large map of the city will be used to chart the field workers' progress.⁴⁹

In just that final month of the year the "Knock on Every Door" pilot program reached a total of 609 women, 366 of them were interested in birth control, and 25 made the trip to the clinic.⁵⁰

Women received over 168 bottles of Emko, and 154 household members came home to find birth control notices on their doors.⁵¹ Given the success of the first month, Board members decided to expand the program and submit it to the city's local War on Poverty Program, started nationally by Lyndon B. Johnson earlier that year, in order to access federal funds for their cause.⁵²

"Knock on Every Door" became a central campaign for Planned Parenthood and engendered a contraception revolution for barrio women. With spermicidal foam brought straight to them, women would come face to face with birth control in their own homes. In March 1965 alone, Planned Parenthood delivered 650 letters to women who consented to a visit, while 457 found the organization's mailing attached to their front door, and over 192 potential patients were given Emko bottles. Five part-time field workers interviewed 552 women 19 of whom immediately became patients. However, another 260 decided they were not interested in the services of the clinic. This massive project resulted in roughly 3% of those contacted actually using the clinic's facilities, yet over 44% of women visited turned Planned Parenthood field workers away.⁵³ Although the rate of new patients was dismal, women in the poorest neighborhoods were subjected to an intense contraceptive campaign that sought to expose even the most marginalized people to birth control,

⁴⁹ "Meeting Minutes December 1964," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁵⁰ "Planned Parenthood Center of El Paso Annual Report 1964," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁵¹ "Planned Parenthood Minutes January 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁵² "Planned Parenthood Center of El Paso Annual Report 1964," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁵³ "Meeting Minutes April 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

whether they wanted it or not. By the summer of that same year, Planned Parenthood of El Paso had contacted the Sunnen Foundation, a nonprofit organization whose founder had connections to Puerto Rico's birth control movement, in order to secure a large supply of Emko spermicidal foam for their project over the next two years.⁵⁴ Only six months into the pilot program, Board members had already hoped to secure funding and products to extend "Knock on Every Door" for the next two years.

Experiments with the Pill and other contraceptives like Emko, as well as the campaigns invented to distribute these new reproductive technologies, did not begin in the Southwestern fringes of the nation, but rather in the colonial periphery of Puerto Rico. The border city and the small Caribbean island were part of a much larger conversation on the significance of population control during the 1950s and 1960s. The "Knock on Every Door" program was a perfect example of the ways in which ideas and strategies about overpopulation were transitioned from the Caribbean colonial experience onto the U.S.-Mexico border, which also had a colonial existence of sorts. When Mrs. Joyce Compton, the head of the pilot program in El Paso, contacted the Sunnen Foundation for material support for their contraceptive distribution program, she was tapping into the vestiges of a project created nearly eight years before in Puerto Rico. Joseph Sunnen was an industrialist and self-made millionaire from St. Louis, Missouri who after traveling the world, and visiting some of the globe's poorest regions, decided to make it his life's work to reduce the planet's population. During a vacation in Puerto Rico he encountered like-minded population control promoters, most notably Clarence Gamble (see chapter 2 for more on Clarence Gamble in El Paso), and in 1956 he set forth the "Sunnen Project."⁵⁵ Among the project's main objectives were:

⁵⁴ "Meeting Minutes June 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁵⁵ Laura Briggs, *Reproducing Empire*, 123.

advancing Puerto Rico's welfare by reducing its birthrate and, most importantly for El Paso, "furthering planned parenthood objectives elsewhere by demonstrating effective action in Puerto Rico."⁵⁶ After donating large sums of money to various family planning organizations in Puerto Rico, Sunnen returned home to create the ultimate contraceptive for those "lower-income persons not familiar with the idea of birth control."⁵⁷ First labeled the "Sanafoam," Sunnen enlisted the help of the Margaret Sanger Research Bureau for quick clinical tests. By the end of 1958 Sunnen was manufacturing and shipping the newly named "Emko" foam to the Family Planning Association in Puerto Rico.⁵⁸

In order to fully exploit this new contraceptive technology, a special program was created that would help distribute it free of charge to people across the island. This same campaign would later find its way to El Paso. Area supervisors were hired to enlist hundreds of volunteers interested in promoting the use of birth control. Well-known and respected neighborhood community leaders, after a brief training session, were entrusted to distribute the product and explain its purpose and use. As historians Annette Ramírez de Arellano and Conrad Seipp explain, "volunteers were free to choose their own ways of getting people to use Emko; these included making house calls, holding group meetings, showing films, setting up storefront clinics..."⁵⁹ Although, the Sunnen Foundation began to reduce its efforts in Puerto Rico by 1963, other areas of the continental United States sought out the easily dispensed spermicidal foam for use in areas deemed overpopulated by local residents. Thus, these strategies were transported to the Southwest and expanded in El Paso. Included in the six-month report offered to the board members of Planned Parenthood in July 1965, field workers detailed new changes that would better integrate the program in low-income

⁵⁶ Ramírez de Arellano and Seipp, 125.

⁵⁷ Ramírez de Arellano and Seipp, 128.

⁵⁸ Ramírez de Arellano and Seipp, 128-129.

⁵⁹ Ramírez de Arellano and Seipp, 130.

neighborhoods. Newly hired field workers would have to be bilingual, between the ages of 30-45 years old, and they would need to “have a suitable personality that will enable them to go from door to door offering Birth Control information; the services of the Planned Parenthood Clinic; and mainly to offer and demonstrate the use of the contraceptive foam EMKO.”⁶⁰ Additionally, they would recruit volunteers who, like many had done in Puerto Rico, would help to spread the good word of birth control and the proper use of Emko at eleven stations that dotted South El Paso.⁶¹ The Sunnen Foundation sent hundreds of free bottles of Emko to Planned Parenthood for the program and along with those, they shipped a pamphlet titled *Population Dilemma, Too Many Americans*, and *Planning Your Family*, designed to help those engaged in the project.⁶²

By the end of the year, after “trials and errors, consultations, changes almost weekly, financial snags, frustrations trying to hire the right Field Workers, endless hours of work given by the Committee,...rejection of the Project by some individuals” the “Knock on Every Door” team was happy to announce their program was a huge success.⁶³ They had interviewed approximately 6,548 “housewives” and distributed nearly 3,288 bottles of Emko and delivered over 16,484 pieces of literature discussing the importance of birth control. However, about 539 women had decided against birth control, the report preparer observed that their lack of interest was “partly due to their age, religious beliefs, or just plain negativism.”⁶⁴ Rita Taylor, the chairman of the pilot program committee and the report preparer, did not cite tactical strategies on the part of field workers as a possible reason for women’s rejection of birth control. Field workers covered a vast terrain as they

⁶⁰ “Knock on Every Door Project: Report July 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁶¹ “Knock on Every Door Project: Report July 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁶² “Meeting Minutes August 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁶³ “Knock on Every Door: Report for the Year 1965,”

⁶⁴ “Knock on Every Door: Report for the Year 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

traveled into areas beyond Segundo Barrio and Chihuahuita in South El Paso. Planned Parenthood field workers visited women as far south as Ysleta and Socorro and the city's western edge in Smeltertown. Poor women in the areas around Ft. Bliss and Concordia Cemetery, along with those living in what was then considered "East El Paso" were brought Emko foam and information about the services at the clinic.⁶⁵ When field workers were unable to reach women in their homes, they added 10 "neighborhood stations" across El Paso and one in Ciudad Juárez where volunteers could help distribute Emko to interested women.⁶⁶ Along with their designated assignments, field workers contended with unexpected and at times harrowing experiences as they walked the paved (and unpaved) streets to encourage the use of birth control. One field worker "had to help a midwife deliver a baby in a home," while another had her path "sprinkled with Holy water" for it was believed that "the devil had been to her home and tried to sell his works." During these visits "angered husbands" usually shouted: "None of your business, señorita, I run this household" when their wives were queried about birth control.⁶⁷ Yet, in her report's final words Taylor assured the Planned Parenthood board that "there is also the grateful volunteer and the patient that assures the Field Worker that this [birth control] is the answer to her prayers."⁶⁸

As the "Knock on Every Door" pilot project gained speed because spermicidal foams could be delivered to women in their homes with little medical intervention, other more invasive technologies required the assistance of a physician. Early in 1965 doctors on the El Paso's Planned Parenthood Medical Advisory Committee discussed the use of intrauterine devices. Dr. S.L. Avner, who eagerly solicited various contraceptive pills for use in the clinic in prior years, suggested that

⁶⁵ "Knock on Every Door: Report for the Year 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁶⁶ "Knock on Every Door: Report for the Year 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁶⁷ "Knock on Every Door Project: Report July 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁶⁸ "Knock on Every Door Project: Report July 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

I.U.C.D.s (intrauterine contraceptive device) be used only for the “indigent patient.” He stipulated that, “both husband and wife should sign the papers, and that caution should be exercised.” Other doctors on the committee discussed the issue, some fearing the possibility of infection, and others noting the importance that “no device be inserted without the consent of the husband.” Dr. Paul Huchton formed the consensus among the all male medical committee to favor the use of I.U.C.D.s. Huchton favored this new technology for “the poverty group,” which would be “properly controlled,” and with “consent from the husband.”⁶⁹

While consent forms were recommended for the procedure, giving women the opportunity to agree to the insertion of a tiny contraceptive device, the husband’s permission was needed to complete the request. Greater attention was placed on obtaining the husband’s permission to insert an I.U.C.D. in his wife than getting her consent or concerns over the risk of infection.⁷⁰ Additionally, the use of I.U.C.D.s on poor women, as opposed to some of the affluent women who went to the clinic to purchase the Pill, would later be justified by suggesting that I.U.C.D.s were easier to use as they required little to no patient intervention. The use of I.U.C.D.s was slow to catch on in the clinic, however, and in September 1965 only about 6 women had used the new contraceptive as compared to over 90 patients taking the Pill.⁷¹ Physicians from Chihuahua, on the other hand, grew interested in the technology and visited Planned Parenthood the following month in order gain greater insight for some of their military hospitals across the border.⁷²

⁶⁹ “Medical Advisory Committee Meeting February 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁷⁰ It is unclear to what degree coverture, which stipulates that by marriage, a man and woman are considered “one legal person,” the man being the head of said person, was considered during this time. Before *Griswold v. Connecticut*, the Supreme Court case that legalized contraception for married couples in the summer of 1965, birth control clinics operated in a legal gray zone where board members and doctors set parameters for the distribution of birth control, specifically as states set different legal barriers.

⁷¹ “Meeting Minutes October 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁷² “Meeting Minutes November 1965,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

While doctors discussed the practicality of I.U.C.D.s, poor women's bodies were utilized by pharmaceutical companies and doctors to perfect new technologies and produce new knowledge about the safety and efficacy of these emerging contraceptives. The decrease in the number of women using the clinic seems to indicate that they were not happy with these new practices. By October 1965 the number of new clinic patients began to decline, but the Board was reassured that women in the barrio still needed birth control. Mrs. Wade from the Educational Committee explained that while "new patients have fallen off, our clinics have been quite large because of [the] large number of old patients."⁷³ Even with the introduction of intrauterine devices earlier in the year, PPEP had hoped to increase the number of women coming to its clinics, but perhaps some felt uncomfortable with issues related to new technologies like the Pill and the uncertainty of the potential infections that could be caused I.U.C.Ds. Yet figures were nonetheless impressive by the end of 1965; the El Paso clinics had 24,069 visitors, almost 4,000 more than in the previous year.⁷⁴

Moreover, it seems that services and the availability of contraceptives were mostly subject to decisions made by pharmaceutical companies, the Federation, the Medical Committee of the local clinic, and Board members. Notably, patients' desires or interests were rarely mentioned in clinic assessment of birth control. For instance, by 1966 the Federation and the Searle Company, Enovid's distributors, decided to drop what they called the "Twenty-Five Month Club Enovid program." Clinic staff was given less than four months to complete the final examinations and reports on patients participating in the program.⁷⁵ It is unclear how women on the program may have interpreted this rushed move. It could have been promoted by complications with the Pill or perhaps the side effects experienced by clinic patients were getting worse. Nothing was mentioned

⁷³ "Meeting Minutes October 1965," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁷⁴ "Meeting Minutes January 1966," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁷⁵ "Meeting Minutes December 1966," Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

or discussed in regards to patient perceptions of the Pill at the time the clinical trial ended in El Paso. That same month the Medical Committee advised the clinic to suspend pap smears for women from Ciudad Juárez because of “financial hardship to the center” since they generally provided this service for free, and “Medical treatment for the indigent Cd. Juarez [sic] resident is very difficult.”⁷⁶ The doctors elected to serve on the Medical Committee were recommending that Juárez women coming to the clinic for reproductive care, be left without recourse. Luckily, clinic board members felt it was a “moral obligation to inform any patient about a positive Pap Smear” even if the “medical follow-up and treatment was not necessarily our problem.”⁷⁷ Making their decision in opposition to the Medical Committee, the board decided that pap smears would be given to all patients, regardless of their ability to pay. While in the latter case board members sought to protect vital patient services from “money saving” strategies by the Medical Committee, the abrupt end to the Searle trial might have left an unknown amount of women without their contraceptive of choice.

Perhaps the best example of the top-down approach to reproductive care and direct attempts at population control was Planned Parenthood of El Paso’s “Knock on Every Door” campaign that helped to close out the technologically turbulent 1960s. The campaign continued well into the early 1970s and became a huge clinical achievement for the Sunnen Foundation and a landmark program for PPEP. In 1966 almost 1,050 bottles of Emko foam were given to women across El Paso. A small survey was conducted of 100 women, all ethnic *Mexicanas* from South El Paso, who averaged about 5 or more children and were taking part in the “Knock on Every Door” project. Of this small sample, 12 continued to use Emko and 22 became clients of the clinic. With nearly a quarter success rate, Planned Parenthood of El Paso recommended that “home visiting

⁷⁶ “Meeting Minutes December 1966,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁷⁷ “Meeting Minutes December 1966,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

should continue to be stressed as an effective method, both for education and service to the women in the low income areas.”⁷⁸

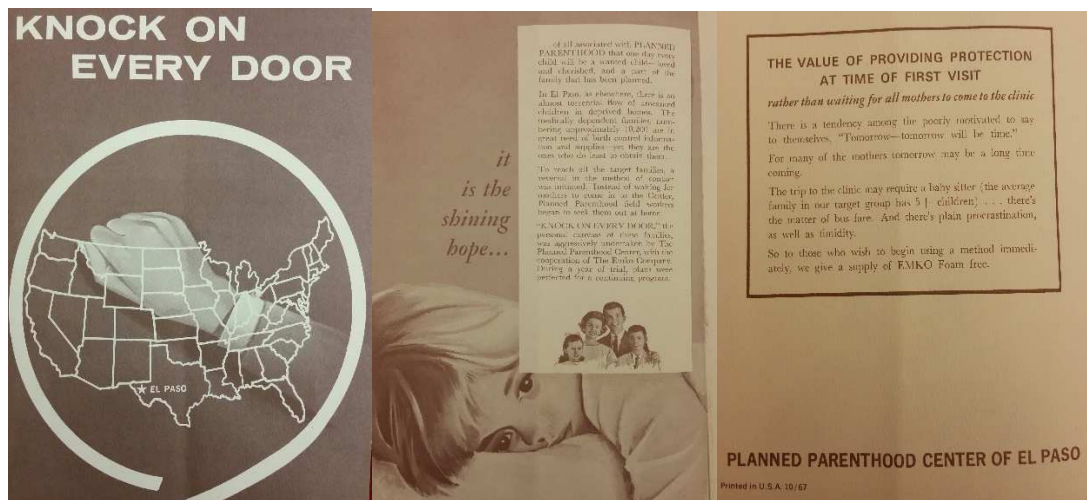


Figure 6. “Knock on Every Door Pamphlet,” Betty Mary Smith Goetting Papers, Box 1, MS316, C.L. Sonnichsen Special Collection Department. The cover of the pamphlet places El Paso symbolically at the center of the American nation with a disconnected hand gently wrapping on the doors of countless women needing birth control. Page one of the pamphlet shows a sad, listless, blonde haired child juxtaposed behind a panel describing the “torrential flow of unwanted children in deprived” in El Paso and in the world. The perfect nuclear family, two children, one to replace each parent, is pictured in order to reinforce mid-century concerns with overpopulation. The last page of the pamphlet explains that this door-to-door campaign confronts those women that have avoided the clinic because of “plain procrastination, as well as timidity.”

In 1967, a financially strapped Planned Parenthood sought the Sunnen foundation’s help in order to continue its work.⁷⁹ Sunnen funded a special “Emko Survey,” in order to support the “Knock on Every Door” campaign, paying Planned Parenthood of El Paso \$15 for each patient they retained as user of its product.⁸⁰ Committee members announced that by the end of that same year 1,816 women were registered users of Emko, meaning nearly \$27, 240 of funds for the clinic through this project.⁸¹ After a year, the Emko survey raised the amount per patient to \$25, as field workers

⁷⁸ “Statistical Analysis of A Sampling of 100 Interviews in South El Paso, 1966,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁷⁹ “Planned Parenthood Center of El Paso, May 1968 Report,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁸⁰ “Meeting Minutes June 1967,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁸¹ “Meeting Minutes December 1967,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

continued to canvas low-income neighborhoods for women willing to join the study.⁸² As 1968 came to a close Board members decided they would end the survey project with Emko in January and reinvest all the monies collected in a similar program.⁸³ Just as Planned Parenthood of El Paso wrapped up the year, the Emko Company came to the border city in order to film and document the progress of their impressive project.⁸⁴

As hundreds of women were recruited for the special Emko survey, doctors and the Emko Company quickly capitalized on these clinical subjects. Dr. Gray Carpenter, Chairman of the Planned Parenthood of El Paso Medical Committee, and Dr. John Barlow Martin, Assistant Professor of OB/GYN, Washington University School of Medicine, St. Louis Missouri, wrote a short, but incisive summary of the Emko survey in El Paso published by the American Association of Planned Parenthood Physicians in April 1969. The doctors explained that the “noteworthiness of this program lies in its unique approach in recognizing the characteristics of the population, i.e., an unusually low motivated and disadvantaged group.”⁸⁵ Ethnic Mexican women from the poorest areas in El Paso were overwhelmingly represented in the study. Furthermore, the doctors surmised that five major factors—including that the field worker was of the same ethnic background as those surveyed, and that a non-prescription contraceptive [Emko] was left with the patient-- “played a vital role in motivating the El Paso subjects to an unusually high degree for such an ethnic population and cannot be overemphasized.”⁸⁶ These physicians found the study’s findings remarkable because

⁸² “Meeting Minutes March 1968,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁸³ “Meeting Minutes October 1968,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁸⁴ “Meeting Minutes December 1968,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁸⁵ “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 1.

⁸⁶ “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 2.

of its ability to engage an “ethnic population” of women deemed incapable of using contraceptives, in part due to their general disinterest and, perhaps, even apathy toward family planning. However, as the data in this chapter reveals, the hundreds of women who attended clinic sessions were not apathetic toward contraception, but instead sought birth control even as controversy about the safety of new technologies like the Pill loomed overhead.

Still the report’s data served to support the notion that this ethnic group lacked motivation and that without the driving force of field workers, who established “personal relationships” with them, their use of Emko would have been doubtful. The doctors first compared the “previous pregnancies” of those surveyed to those they identified as a “normal population,” using 1960 U.S. Census data. The doctors determined that “the child bearing incidence of the subject population is greater than that of the general population.”⁸⁷ Women in the study with over 5 previous pregnancies represented about 11.2 percent in the study while among the so-called normal population women pregnant over 5 times only represented 4.8.⁸⁸ Although doctors Carpenter and Martin used these numbers to establish the hyper-fertility of the women in the study group, the doctors did not account for the overall health and well-being of this poverty stricken group nor if the women in the study group were even able to carry their pregnancies to term. The doctors concluded that 45 out of the 1,778 women in the study discontinued the use of Emko “because of undesired pregnancy.” Thus, using the Pearl Formula (Index), roughly 3.14 per 100 women who were on the study for a year became unintentionally pregnant. This low number showed, at least superficially, that Emko foam was performing better than creams and jellies, which had a success rate of 6.33 per 100 births

⁸⁷ “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 5.

⁸⁸ Of course, these numbers did not account for still births, miscarriages, abortions, and those children surviving their first birthday as high infant mortality had been a long standing issue in South El Paso for decades. “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 5.

per women versus the rhythm (the least effective method) method which they tabulated 16.13 per 100 women rate of undesired pregnancies over a year on the contraceptive.⁸⁹ However, more recent discussion by doctors and scientists have described problems with the use of the Pearl Index to measure the effectiveness of contraceptives in clinical trials because “contraceptive failure rates decline with duration of use...women most prone to fail become pregnant early after starting use, so over time the group of continuing users becomes increasingly composed of those least likely to fail.”⁹⁰ Moreover, over time women became better at using the contraceptive foam and the study performed by Martin and Carpenter did not account for proper or improper use.

Still the two physicians marveled at the success rate of their study, given its location along the U.S-Mexico border. They underscored the importance of the “Knock on Every Door” program in El Paso “and its ability to elevate the desire of a poorly motivated group of women to accept a birth control concept.” Martin and Carpenter revealed that

The Pearl Formula ratings one finds in the literature for a population not practicing birth control runs from 70 to 115. Using these numbers, we can see that there was a significant reduction of approximately 1,000 to 1,600 births among the 1,778 women during the period of time while they were enrolled on the study.⁹¹

They insisted that a better Pearl Formula rating would emerge among a group of women “more highly motivated to use a method.”⁹² And, the doctors suggested that while not “statistically significant,” the data showed that of the 60 women with more than 12 years education, none became pregnant.⁹³ Martin and Carpenter’s constant mention of this factor in the analysis of their data

⁸⁹ “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 5-7.

⁹⁰ Robert A. Hatcher, MD, MPH and James Trussell, et al., *Contraceptive Technologies* (New York: Ardent Media, Inc. 1998) 769-770.

⁹¹ “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 10.

⁹² “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department.

⁹³ “Clinical Evaluation of a New Application For of Vaginal Contraceptive Foam, 1969,” Betty Mary Goetting Papers, Box 5, MS 316, C.L. Sonnichsen Special Collection Department. 10.

suggests a troubling fixation with women they considered disinterested in their own reproductive control. However, it is unclear how the doctors came to understand or assess the “low motivation” of the women in the study. Board meeting minutes indicated that the committee decided to suspend “seeking new patients” in July 1968 as many women continued to ask for the product, because field workers did not have the resources to revisit such a tremendously high number of patients.⁹⁴ As doctors suggested that field workers’ strategies seemed to engender a higher rate of positive outcomes with the use of Emko, they simultaneously denied the eagerness of women in the barrio who sought out reproductive information and technologies.

After a triumphant study, Emko debuted the documentary film, “Knock on Every Door” during the annual Planned Parenthood board meeting in 1970 in order to showcase the success of the person-to-person program. The *El Paso Times* discussed the film and program at length explaining that the “target of the project were [sic] the 10,200 medically dependent families in El Paso.” Indeed, the film would put El Paso on the map for clinical studies in reproductive technologies as the Emko Company sought to show the film around the country.⁹⁵ Although historians suggest that Sunnen’s invention did not succeed in curbing the population of Puerto Rico’s poor, it did become a financial success. Sunnen established the Emko Company and began turning a profit just a few years later. Historians Arellano and Seipp contend that by 1968 the company was grossing roughly \$4.5 million in sales worldwide.⁹⁶ In her book, *Race, Sex, Science and U.S. Imperialism in Puerto Rico*, Women Studies Scholar Laura Briggs suggested that in Puerto Rico, “neither [Clarence] Gamble nor Sunnen was the benefactor of birth control on the island; that role was taken up by the pharmaceutical companies.”⁹⁷ Yet, by 1970 the role of a border city like El Paso

⁹⁴ “Meeting Minutes July 1968,” Planned Parenthood of El Paso records, 1907-2000s, Box 2, MS 286, C.L. Sonnichsen Special Collection Department.

⁹⁵ “Planned Parenthood Showing of ‘Knock on Every Door’ Slated,” *El Paso Times*, February 1, 1970, El Paso, Texas.

⁹⁶ Arellano and Seipp, 131.

⁹⁷ Briggs, 124.

added to the complex relationship between population control activists like Sunnen and the pharmaceutical companies they helped to establish. As profits for the company went up, so did their desire to fund organizations dedicated to curbing overpopulation. Indeed, Planned Parenthood never missed an opportunity to show the Emko film to community members and link it to concerns about overpopulation, as it did at their September 1970 meeting with the El Paso chapter of the Junior League. Their program that day included “the population film, the Emko film” and a brief talk about the clinic.⁹⁸

Although a similar “Knock on Every Door” project was not as successful in Puerto Rico, the film’s El Paso focus made clear that “enthusiasm” for contraception shaped victory for Emko and the door-to-door campaign in the borderlands. The local paper reinforced doctors Carpenter and Martin’s assessment that the success of the program relied on the “personal canvass [that] was aggressively undertaken, with volunteer workers doing the footwork.”⁹⁹ The *El Paso Times* maintained that, “the film stresses the effectiveness of the program and its ability to motivate a heretofore unmotivated group of women.”¹⁰⁰ Perhaps one of the most understudied aspects of the program were the dozens of ethnic Mexican women, who, over the course of six years, helped canvas some of the poorest neighborhoods in El Paso. As the *Times* underscored, “the field workers were highly dedicated and motivated and had the same ethnic background as those they were serving.”¹⁰¹ As doctors and Planned Parenthood board members decried the lack of interest in birth control from the mostly ethnic Mexican community they sought to serve, they simultaneously elided the enthusiasm, “dedication and motivation” from the ethnic Mexican women directly engaged in the program.

⁹⁸ “Meeting Minutes September 1970,” Planned Parenthood of El Paso records, 1907-2000s, Box 3, MS 286, C.L. Sonnichsen Special Collection Department.

⁹⁹ “Planned Parenthood Showing of ‘Knock on Every Door’ Slated,” *El Paso Times*, February 1, 1970, El Paso, Texas.

¹⁰⁰ “Planned Parenthood Showing of ‘Knock on Every Door’ Slated,” *El Paso Times*, February 1, 1970, El Paso, Texas.

¹⁰¹ “Planned Parenthood Showing of ‘Knock on Every Door’ Slated,” *El Paso Times*, February 1, 1970, El Paso, Texas.

Poor and mostly ethnic Mexican women in El Paso were caught between the desire to control their own reproduction and the outside forces that sought to stigmatize and dominate this process. Given the numerical data available and the lack of testimonials, it is difficult to ascertain exactly why certain women continued to attend the Planned Parenthood clinics, while others did not return, and many never even stepped inside. Some women were concerned with their ability to determine the growth of their families and have greater autonomy over their propagation. Those that chose not to return were perhaps disenchanted with the level of care at the clinic, while growing concerns over long lasting side effects of the Pill may have frightened others away.¹⁰² Women who attended the clinics, but then failed to continue with the program, may have felt caught between wanting to limit their fertility and Planned Parenthood of El Paso's calls to focus on population control. As doctors touted the success of the "Knock on Every Door" campaign, and hundreds of women joined the project both as clinical subjects and field workers, it is still unclear to what degree this invasive project was welcomed into the community. The "aggressive" canvassing of poor areas in El Paso gives the program a distasteful tinge of coercion that perhaps kept some women away, while others may have felt forced to comply. Lack of personal testimonies in clinic files suggest a striking disinterest on the part of Planned Parenthood staff and board members to document the desires, cares, and concerns of women receiving birth control. Furthermore, the dearth of information about the ethnic Mexican field workers, and their enthusiasm for the growing birth control movement in El Paso, reveals the prejudice that continued to plague PPEP, as they dismissed ethnic Mexican women's motivations to control their fertility.¹⁰³

¹⁰² Watkins, 74.

¹⁰³ I borrow this observation from Loretta Ross: "If a decline in African-American birth rates occurs, the population experts usually ascribe it to poverty, coercive family planning, or other external factors, ignoring the possibility that we Black women were in any way responsible for the change." "African-American Women and Abortion: 1800-1970," in *Theorizing Black Feminisms: The Visionary Pragmatism of Black Women*, 141.

Although, analyzing women's autonomy in regards to their use of birth control and services provided by Planned Parenthood in El Paso is filtered through the institution's documents, this chapter provides at least the foundation for rethinking the ways in which ethnic Mexican women engaged with reproductive care services and contraception. In 1970 alone, approximately 1,308 new patients were admitted, nearly 3,936 medical exams were performed, (including 3,312 pap smears) and over 696 vials of various forms of the Pill were apportioned through Planned Parenthood in El Paso. Almost 300 I.U.Ds were inserted and roughly 300 other forms of birth control (like Emko, the diaphragm, and other creams and jellies) were dispensed to the hundreds of new and returning patients to the clinic.¹⁰⁴ These astounding figures in El Paso reveal that while ethnic Mexican women and Latinas were targeted for natal control in various parts of the United States—the history of forced sterilizations in California from the 1930s until the 1970s (and then again in the twenty-first century), concerns about overpopulation in Puerto Rico and the subsequent testing of various forms of contraceptives like the Pill and spermicidal foams, and the further clinical trials of contraceptives in places like El Paso—women still managed to carve out small spaces for autonomy in their reproductive care.¹⁰⁵ As PPEP formulated innovative ways to bring women to the clinic in order to address concerns about overpopulation, Southside women and other parts of the city used the clinics for their own reproductive health needs, regardless of the broader socioeconomic implications associated with reproductive services. In spite of social pressures, changes in

¹⁰⁴ The numbers represented in the totals for 1970 are approximations since the figures for the months of February, April, and May are missing, as well as the month of November for the data on pap smears. Using the average of the data collected for the existing months, I have calculated the approximate figures discussed above. "Meeting Minutes March 1970;" "Meeting Minutes April 1970;" "Meeting Minutes July 1970;" "Meeting Minutes August, 1970;" "Meeting Minutes September 1970;" "Meeting Minutes October 1970;" "Meeting Minutes November 1970;" "Meeting Minutes December 1970;" and "Meeting Minutes January 1971," Planned Parenthood of El Paso records, 1907-2000s, Box 3, MS 286, C.L. Sonnichsen Special Collection Department.

¹⁰⁵ See Natalie Lira, "'Of Low Grade Mexican Parentage': Race, Gender, and Eugenic Sterilization in California, 1928-1952," (dissertation: University of Michigan, 2015); Elena Gutiérrez, *Fertile Matters* (Austin: University of Texas Press, 2008); Alexandra Minna Stern, "Sterilization Abuse in State Prisons: Time to Break With California's Long Eugenic Patterns," *The Huffington Post*, September 22, 2013. (Last accessed July 26, 2016: http://www.huffingtonpost.com/alex-stern/sterilization-california-prisons_b_3631287.html); Laura Briggs, 107.

contraceptive technologies and health concerns, and local and national movements focusing on overpopulation, statistical analysis shows that hundreds of mainly ethnic Mexican women from some of the poorest barrios in El Paso made decisions about birth control, were active participants in the clinics, and sought to attain self-determination through their reproductive care.

Chapter 4: Illegal Methods: Abortion in the Borderlands 1950-1970

In 1967 Sarah Ragle and her boyfriend Ron Weddington traveled from Austin, Texas to Piedras Negras, Coahuila, Mexico—across the border from Eagle Pass—in order to obtain an abortion. This was no time for children. Ragle was preparing to graduate from the prestigious law school program at the University of Texas at Austin. Still students, not yet married, and unprepared for parenthood, the young couple decided it was best to abort. According to her memoir she was “a scared graduate student...in a dirty dusty Mexican border town...fleeing the law that made abortion illegal in Texas.”¹ Abortion was illegal in Texas as it was in most U.S. states at the time. Abortion was also illegal in Mexico, and yet an illegal abortion business was booming on the border. After making some phone calls and finding a clinic, the pair prepared their journey to Piedras Negras. “I was grateful that at least the inside of the building was clean...a nurse motioned for me to come through the door...I was on my way to put my life, my future, in the hands of strangers.”² Ragle would be “one of the lucky ones” who suffered no complications and was able to leave her terrible secret across the border in Mexico. Sarah married Ron Weddington a year later and went on to have a fascinating career as a litigator.

Perhaps the highlight of Sarah Weddington’s career was arguing *Roe v. Wade* before the U.S. Supreme Court in 1971 (it was first argued in December of that year, then reheard the following October, and finally the decision came down in January 1973). She used the story of her illegal abortion in Mexico as a means to instruct the public at large about the need for legal and safe abortions on the U.S. side of the border. Although abortion providers along the national boundary were common during the 1960s, little is known about them. As sociologist Andrzej Kulczycki

¹ Sarah Weddington, *A Question of Choice*. (New York: Penguin Books, 1993) 11. Many thanks to Heather Sinclair for suggesting I begin this chapter with Weddington’s incredible abortion story.

² Weddington, *A Question of Choice*, 14.

contends, “There has always been much cross-border traffic by women seeking abortions, although this has been very poorly documented.”³ There is a dearth of information on the complex network of abortion clinics, referral services, law enforcement officers, prosecutors, judges, doctors, lawyers, abortion providers, and young women who came to make up this illicit business along the nation’s southern border. For instance, Ciudad Juárez, El Paso, Texas’s sister city, was notorious for its “abortion mills” but we know relatively nothing about this phenomenon.⁴ Indeed, hundreds of women sought reproductive refuge at countless clinics along the line as they fled restrictive laws at home, and societal stigmas that sought to demean their sexuality and reproductive choices. Whereas the first three chapters of this study focused on the creation of Planned Parenthood in the borderlands, this chapter describes how the birth control movement diverged to include other groups and organizations interested in creating greater access to reproductive care, including an illegal abortion business along the northern Mexican border.

The criminalization of abortion in the United States helped to spur a new business at the U.S-Mexico border that boomed in the late 1960s, a region that has not yet figured prominently in women’s history in regards to reproductive care. Historians Linda Gordon, David Kennedy and James Reed, among others, have focused on the history of birth control and contraception in the United States on a national level. Discussing the links between eugenics, population control, and family planning, historians of women’s history have added much to the historiography of women’s reproductive health and rights.⁵ James Mohr, Leslie Reagan, and Jennifer Nelson, have focused on women of color outlining the history of abortion in the United States, and paying close attention to

³ Andrzej Kulczycki, *The Abortion Debate in the World Arena* (Routledge: New York, 1999), 82.

⁴ Leslie Reagan’s discusses the brief history of Society for Humane Abortion (SHA) and their connection to clinics across the border, however, she does not delve into the history of abortion in Mexico or the history of the clinics there. Leslie Reagan, “Crossing the Border for Abortions: California Activists, Mexican Clinics, and the Creation of a Feminist Health Agency in the 1960s,” in *Feminist Studies*, Vol. 26, No. 2, Women and Health (2000).

⁵ Linda Gordon, David Kennedy, and James Reed

access to care and the legislation regulating women's bodies.⁶ However, rarely have these two important and distinct veins of women's reproductive health and rights history converged on the border of the nation-state.

This chapter reveals how the illegal abortion business that flourished along the U.S. and Mexico line, from the late 1950s until the years before *Roe v. Wade*, played a vital role in the legalization of the procedure in the United States and splintered the birth control movement in the region. While women like Sarah Weddington knew about referral services, yet little has been written about them, particularly their role in the borderlands and the precarious business they supported.⁷ However, the abortion business in Juárez, or in any other Mexican border city, was not merely an issue of Mexican corruption, but a more complex relationship between women, doctors and clinic staff, businessmen, lawyers, and activists struggling to confront a lack of access to safe and inexpensive procedures. For many women the sinister abortion world lay across the border in Mexico, but the underground world of illegal abortions stretched across national boundaries. Records of the Society for Human Abortions (SHA), an organization out of San Francisco, California, that helped facilitate the use of abortion clinics along the border to American clientele expose the factors that led women to venture across national boundaries. Various newspaper sources describe the pervasiveness of the use of these clinics by American women and depict the dangerous underworld illegality engendered in the region. Oral histories help to describe the doctors, clinics, and patients that populate this history and the business that profited from state restrictions on abortion in the United States and Mexico. Thus, I argue that the illegal abortion

⁶ Leslie Reagan, *When Abortion was a Crime: Women, Medicine, and Law in the United States, 1967-1973*, (Berkeley: University of California Press, 1997); James Mohr, *Abortion in America: The Origins and Evolution in National Policy* (Oxford: Oxford University Press, 1978); Jennifer Nelson, *Women of Color and the Reproductive Rights Movement*, (New York: New York University Press, 2003).

⁷ In her memoir, Weddington describes the work of other Texas feminist activists involved in a referral service out of Austin which they dubbed the Women's Liberation Birth Control Information Center in 1969; Weddington, 31-33.

business was truly a transnational project that dotted the almost 2,000 miles stretch between Mexico and the United States.

An analysis of the intricate and at times tense connection between abortionists in Mexico and the U.S., patients, the activists in San Francisco, and the ever present eyes of the state will help to contextualize the significance of the border in regards to the national movement for the legalization of abortion in the United States. This chapter addresses how the border facilitated the illicit business; and the significance of the border as women used its cover as a means to take control of their reproduction, attempting to shirk the law and social stigmas in the process. In order to understand this borderlands abortion history it is necessary to place it within a national framework both in the United States and Mexico.

The history of abortion on the border in the mid-twentieth century is best understood by reviewing the legal history of reproduction and abortion in the United States and Mexico. As historians have shown, abortion was not always a crime.⁸ These procedures, usually the realm of midwives, physicians, and well-versed housewives, were generally kept private, but remained legal during the nineteenth century in the United States. By the beginning of the following century all states in the union had yielded to pressures from the doctors who wanted to control it by criminalizing its use outside of the developing medical system.⁹ Consequently, medically unsupervised abortions went underground as thousands of women terminated their pregnancies by using abortifacients or more dangerous methods, like inserting catheters, crochet needles and hair pins into the uterus.¹⁰ During this same time Margaret Sanger and other radical feminists emerged to promote contraception as a means to liberate women from unwanted pregnancies and avoid

⁸ See James C. Mohr, *Abortion in America: The Origins and Evolution of National Policy* and Leslie Reagan, *When Abortion was a Crime: Women, Medicine, and Law in the United States, 1867-1973*.

⁹ Reagan, 13; Mohr, Chapter 8: Anti-Abortion Legislation, 1860-1880.

¹⁰ Reagan, 43-44.

abortions. Sanger recognized that if done properly, abortions were necessary, particularly for women who were sick or diseased. She viewed it as a preventative eugenic measure to spare mother and society from a sickly child.¹¹ However, she insisted that, “nothing short of contraception can put an end to the horrors of abortion and infanticide.”¹² She particularly stressed the fact that women would be able to use birth control, outside the realms of medical surveillance.

Although Sanger and many in the birth control movement tried to differentiate between abortion and birth control, major legislative changes concerning the latter, as early as the 1930s, helped create the path for the landmark *Roe v. Wade* decision in 1973. The legal barriers to access birth control were first challenged when the Second Circuit Court of Appeals for the United States in *U.S. v One Package* in 1936, repealed sections of the Comstock Law that had outlawed the distribution of birth control information. Nearly thirty years later the high court’s 1965 decision in *Griswold v. Connecticut* legalized the use of contraception for all married couples and helped set the stage for further important reproductive rights to follow. While in *Griswold v. Connecticut* the Justices argued for the right to privacy under the 14th Amendment, specifically using the “equal protection” clause in order to justify their decisions in that case, seven years later in *Eisenstadt v. Baird*, the Court continued on course and decided to legalize contraception for unmarried women again arguing for privacy.¹³ In 1973 with *Roe v. Wade*, the Supreme Court sustained this process of declaring a woman’s right to privacy. Time and again the Court affirmed that it was the right of heterosexual couples, and later single women to decide how to control their reproduction without intervention from the state. The court declared that the state could not intercede in women’s private reproductive health choices.¹⁴

¹¹ Margaret Sanger, *Woman and the New Race* (New York: Bretano’s, 1920), 201.

¹² Sanger, *Woman and the New Race*, 25.

¹³ Gordon, 289.

¹⁴ Weddington reads the *Roe v Wade* brief.

With or without permission from the state, however, women had been using abortion as a means to control reproduction for decades. Sanger argued that greater access to and knowledge about contraception would keep women from making drastic reproductive choices like using abortion as a means of birth control. However, the border business of terminating pregnancies did not reach its zenith until after the pill was introduced in the United States in 1960 and following *Griswold v. Connecticut* five years later. Connections between the use of contraception and other forms of birth control such as abortion had been discussed as early as 1958 and helped to persuade the American Medical Association (AMA) to diverge informally from its conservative stance on abortion in 1964. During a conference convened by Planned Parenthood Federation of America's medical director Mary Calderone, doctors from throughout the United States acknowledged that even with the availability of various forms of contraception "unwanted pregnancies might still occur."¹⁵ Thus, the years between the legal and technological advances gained for contraception and the *Roe v. Wade* decision, thousands of women struggled to define their rights to privacy as they secretly crossed the border between Mexico and the United States in order to procure an abortion.

The legislative debate surrounding abortion was framed much differently in Mexico than in the United States, particularly for those who performed the procedures and the women who sought them. Knowledge of the legislative history of abortion in Mexico is vague because scant attention has been paid to producing significant scholarship on this issue. However, sources that exist from the 1970s onward concede on major points in regards to changes in legislation and major actors involved in creating restrictions for abortion in Mexico.¹⁶ While throughout the late nineteenth and twentieth centuries doctors, the medical profession and religious organizations on various sides of the spectrum heavily influenced abortion restrictions in the United States, Mexico's laws regarding

¹⁵ Mary Steichen Calderone, "Increased Birth Control May Not Diminish for Demand for Abortion," in *The Abortion Rights Movement*, ed. Megan Powers (Detroit: Thomson Gale), 38-44.

¹⁶ Andrezej Kulczycki, *The Abortion Debate in the World Arena* (New York: Routledge, 1999), 76.

the procedure were negotiated between the government and the Roman Catholic Church for decades.¹⁷ Sociologist Andrzej Kulczycki, a scholar of Mexico, contends that to this day the Church continues to be the most prominent actor in this debate.¹⁸

After Mexican Independence in 1810 the young nation's internal battles between liberal and conservative forces compelled the latter to advocate for a more secular state. As historian Adriana Nohemi Ortiz-Ortega explains, attempts at secularization by Mexico are evident in the 1871 Criminal Codes that regulated abortion until 1929. As she suggests, the state "yielded to Catholic values as it continued to uphold the legal dispositions against abortion and framed its practices as a crime." However, secular ideas influenced legislators as they sought to differentiate the unborn from the born and no longer considered abortion murder. Punishment for abortion was different from infanticide, for instance.¹⁹ The federal government did not adopt these restrictions until in 1931 Pascual Ortiz Rubio's administration wrote the *Código Penal del Distrito Federal y Territorios Federales*.²⁰ The article numbers changed from state to state, but overall the restrictions and punishment for helping to procure or induce an abortion stayed the same. For instance, Article 331 of the 1931 Código Penal del Distrito Federal reads: "If the abortion is caused by a doctor, surgeon, nurse, or midwife, in addition to the sanctions that correspond to the article above, their license to exercise their profession shall be suspended for five years."²¹ In 1968 when illegal abortion along the U.S-Mexico border was at its apex, those accused of performing the procedure were judged using the *Código de Defensa Social del Estado* under Article 307, which was a carbon copy of the 1931 law.

¹⁷ Adriana Nohemi Ortiz-Ortega, "The feminist demand for legal abortion: a disruption of the Mexican state and Catholic Church relations (1871-1995)" (Ph.D. dissertation: Yale University, 1996), Chapter 2.

¹⁸ Kulczycki, 77.

¹⁹ Ortiz-Ortega, "The feminist demand for legal abortion: a disruption of the Mexican state and Catholic Church relations (1871-1995)," 74.

²⁰ Mariclaire Acosta, Flora Botton-Burlá, Lilia Domínguez, Isabel Molina, Adriana Novelo, and Kyra Núñez, *El Aborto en México* (México D.F.: Fondo de Cultura Económica, 1976), 24.

²¹ Acosta, *El Aborto en México*, 24-25. Original: "Si el aborto la causare un medico, cirujano, comadrón o partera, además del las saciones que correspondan conforme al anterior artículo, se les suspenderá de dos a cinco años en el ejercicio de su profesión."

The penal codes in the state of Chihuahua, revised in 2016, continue to use similar language as the 1931 and 1968 codes.²² Abortion is still illegal in Mexico with one exception—the capital city, which made abortion (in the first three months of pregnancy) legal in the capital in 2007.²³ Legal ramifications for performing abortions have not changed over a century, and as Kulczycki suggests “the law serves no useful purpose in reducing the incidence of abortion” in Mexico.²⁴

For women in Mexico the laws restricting abortion did not change much from the earliest penal codes, however, the rules that apply to women go farther back than attempts to secularize the Mexican state. Again, scholars have reflected on the 1931 penal codes to unpack the roots of abortion restrictions for women, particularly noting the various variables that impact punishment. For instance the 1931 penal code suggested that a woman can receive a lesser sentence if she meets *all* of the following three requirements before she had an abortion: 1) “That she does not have a bad reputation”; 2) “She has been able to hide her pregnancy”; 3) “That the fetus is not from a legitimate union.”²⁵ Feminists in and scholars of Mexico have taken this part of the legislation to task, particularly as it serves to reinforce ideas about male honor that extend to medieval laws regarding the preservation of patrimony, and disregards women’s bodily autonomy.²⁶ Moreover, legal access to abortion would only be possible under severe circumstances, specifically rape, incest, and in a few Mexican states—namely Yucatán, Chiapas, and Chihuahua—eugenic concerns. Chihuahua adopted language that described both birth defects and grave economic hardship as being eugenic exceptions that could make abortion permissible by the state.²⁷ These laws continued on the books in Chihuahua as the border region began to see a dramatic increase in clandestine abortion clinics in

²² “Código Penal del Estado de Chihuahua,” *Periódico Oficial No.103*, December 27, 2006.

²³ James C. McKinely Jr., “Mexico City Legalizes Abortion in Early in Term,” *New York Times*, April 25, 2007.

²⁴ Kulczycki, 80.

²⁵ Acosta et al, 25. Original:: 1) “que no sea de mala fama”; 2) “que haya logrado ocultar su embarazo”; 3) “que sea el fruto de una union ilegítima 1) “That she does not have a bad reputation”; 2) “She has been able to hide her pregnancy”; 3) “That the fetus is not from a legitimate union.”

²⁶ Acosta et al, 25-26; Kulczycki, 80.

²⁷ Acosta et al, 26-28.

the late 1960s and served as the legal milieu for the detention and prosecution of doctors, clinic staff, and patients in places like Ciudad Juárez.

It is difficult to pinpoint the exact moment when abortion clinics along the U.S.-Mexico line began to appear. However, word of this underground business spread high and low for decades. Sarah Weddington recalls discussing the issue with her friend Claudia Middleton who had become an American Airlines flight attendant in the 1960s:

When she started flying, Claudia wondered why so many women were on Friday-morning flights to El Paso. An older attendant clued her in: those were the “abortion flights.” Up to twenty women were headed to El Paso to cross the border for an abortion.²⁸

Perhaps the older attendant had known about these particular flights for some time, but before air travel became an affordable and fashionable way to fly many women drove to the border to find solutions to their reproductive problems. Bertha González Chávez recalled in her oral history that abortion clinics were well known to those who inquired. Born in 1930 in Ciudad Juárez, Chihuahua, Chávez apprenticed in the city’s general hospital when she was only fourteen years old and became a nurse and midwife, often crossing the border throughout her life in order to give and receive reproductive care. In 1947 she was approached by Dr. Antonio Davalos, who knew about her skills as a nurse from her time at the general hospital, and asked her to work for him at his clinic, the Davalos Sanatorium. According to Chávez, Davalos performed abortions and soon taught another woman named Ofelia (perhaps his mistress), a hired hand at the clinic, to perform the procedures as well. Women from Texas and other U.S. states came for the procedure. Chávez described the different North American license plates she saw of the cars parked outside the clinic. She also remembered Dr. Antonio Davalos’s son Mauricio, who was nearly her same age, and how he was sent to El Paso to learn medicine like his father.²⁹ In the late 1960s Dr. Mauricio Davalos would

²⁸ Weddington, 38.

²⁹ Bertha González Chávez, Oral History, August 4, 2015

attempt to evade prosecution as authorities on both sides of the border came down on the booming abortion industry.³⁰

Residents on the El Paso side of the border also remembered whispers of these underground clinics for years before the business was known nationally. Anne Holder, an ardent feminist and member of the El Paso Women's Political Caucus suggests that by the late 1950s, small clinics had dotted the landscape of Ciudad Juárez for some time.³¹ Holder gave details of her first abortion experience with a "Hungarian doctor" who did not have the legal papers to cross into El Paso. It was in the late 1950s and she was just out of high school when she became pregnant. She told her boyfriend, who quickly arranged her passage alone to Juárez to obtain the illegal procedure. Holder remembered returning home late, feeling dizzy, and unwell and wanting desperately to hide this incident from her parents. Unfortunately, she got an infection and went to see her physician. Holder admitted to him that she had had an abortion. No further questions were necessary. "I know, he probably assumed it was Juárez, but it could have been anybody over here [El Paso]," Holder declared as she remembered that difficult time. Holder's assertion about abortion doctors in El Paso reveals her own family's history. For years later Anne Holder's sister-in-law would marry the infamous El Paso abortion provider, Dr. Raymond Showery, who was convicted of feticide in 1984 at his clinic on El Paso's South side.³²

Anne Holder's story would become a familiar narrative to those involved in the illicit abortion business along the border. In what appears to be one of the first articles about illegal abortions in Ciudad Juárez, the *El Paso Herald Post* described a young woman's journey. The 23-year old from California mentioned in the 1959 article was being treated at El Paso's Thomason General

³⁰ "Clausurado un Antro de Espantacigüeñas," *El Fronterizo* (Ciudad Juárez, Chihuahua) November 10, 1968;

³¹ Anne Holder and Bertha Chávez oral histories.

³² "Follow-Up on the News; Abortion Sequel 2," *New York Times*, April 29, 1984.

<http://www.nytimes.com/1984/04/29/nyregion/follow-up-on-the-news-abortion-sequel-2.html>

Hospital “for sepsis...as a result of an illegal Juárez [*sic*] abortion.”³³ According to the press, she was questioned by police and explained that she arrived in El Paso “intending to get an abortion.” She asked an El Paso taxi driver about a particular clinic in Juárez, but the cabbie informed her it was no longer open. She waited another day until another cab driver finally appeared who then took her to a special meeting point in El Paso where she was subsequently transferred to a private car. She was taken to a clinic across the border and obtained the procedure. When she returned to El Paso, she began to feel ill and was taken to the general hospital for treatment.³⁴ The articles in the paper followed a standard storyline that portrayed the dangers of a Mexican abortion: Woman comes to the border, talks to a knowledgeable taxi driver, crosses the border, gets abortion, comes back with an infection, and heads for the nearest hospital. Of course, newspaper articles described the ill-fated abortion patient who was being treated at the local hospital for an infection or botched procedure. The press only documented those incidents where women came forward to chronicle their journey, it is unclear how many left without problems or how many never made it to the hospital after complications arose. Women who successfully acquired treatment left the border quickly and quietly. Abortion cases rarely made front-page news at first, articles were short and found imbedded amongst advertisements for car parts and clothing liquidation sales, but by the late 1960s the criminal abortion business was making front page news on both sides of the border.

As various studies have noted, therapeutic abortions slowly became available in the late 1950s and 1960s under strict conditions—in order to protect the life of the mother or deformities in the fetus.³⁵ Historian Leslie Reagan states that “research had shown that among women who had German measles, or rubella, a few weeks prior to conception or in early pregnancy, about a third of

³³ “Hospitalized After Juárez Abortion,” *El Paso Herald Post*, May 29, 1959.

³⁴ Ibid.

³⁵ Gordon, 300; Reagan, 203; Tom Davis, *Sacred Work: Planned Parenthood and Its Clergy Alliances*, (New Brunswick: Rutgers University Press, 2005) 125.

the children would be born with serious defects.”³⁶ For those women with access to supportive physicians and even sympathetic religious leaders with connections, therapeutic abortions were prescribed in hospitals across the U.S. However, it was not until the case of Sherri Finkbine that the abortion spotlight came to the borderlands. After exposure to thalidomide, a tranquilizer known to cause major birth defects in children, Finkbine, pregnant with her fourth child, called her doctor who suggested a therapeutic abortion.³⁷ She also called the Arizona newspaper, *The Republic* in order to warn other women of the potential side effects of the drug that had been outlawed in the United States. Finkbine did not remain anonymous for long, as her story made national headlines changing the face of abortion forever. She was known to Arizona residents as “Ms. Sherri” the affable teacher on “Romper Room” and as scholar Tom Davis notes, “Until this saga, the media represented a woman seeking an abortion as furtive, unmarried, possibly a prostitute, or of otherwise dubious character. But Sherri was the perfect suburban mother with four small children.”³⁸ Although abortion was never discussed in polite company, the Finkbine incident and the rubella scare brought abortion out of the shadows.

Abortion clinics along the border were rumored since the 1950s, particularly among clergy who for decades had quietly referred women to providers in cities like Tijuana. Texas-born Reverend Howard Moody transformed the clergy referral landscape when in 1967 he, along with countless other Protestant ministers, formed the Clergy Consultation Service on Abortion from the Judson Memorial Church in Greenwich Village, New York.³⁹ Just a year before, a small organization called the Society for Humane abortions, organized by three ardent pro-abortion activists Patricia Maginnis, Rowena Gurner, and Lana Phelan, decided to print information about abortion doctors in

³⁶ Reagan, 203.

³⁷ Davis, *Sacred Work*, 124-125.

³⁸ Davis, *Sacred Work*, 125.

³⁹ Tom Davis, 127-129; Douglas Martin, “Howard Moody, Who Led a Historic Church, Dies at 91,” *New York Times*, September 13, 2012.

Mexico and created a more “formal” network of doctors and patients between the U.S and Mexico. Maginnis and Gurner peopled a tiny office in San Francisco, while Phelan took care of the Southern California branch of the organization. All three had had abortions and they unequivocally demanded the repeal of any laws attempting to regulate its use.⁴⁰ It seems that abortionists in Mexican cities like Ciudad Juárez, Tijuana, Piedras Negras, Mexicali, and San Luis Rio Colorado existed before Maginnis formed her organization, but it is clear that this organization and other referral services that followed helped boost business.⁴¹ Historian Leslie Reagan has written about these abortion clinics along the border, in particular Maginnis’s Society for Humane (SHA) (which later created the Association to Repeal Abortion Laws (ARAL) in order to hide illegal abortion referrals and protect the non-profit status of SHA).⁴² For years Maginnis, Phelan and Gurner traveled across California and the country lecturing about abortion politics and teaching women how to self-abort as a means to defy state legislation banning women from controlling their reproduction.⁴³ Maginnis wrote pamphlets, made posters, and dedicated poetry and songs to the abortion movement.⁴⁴ In 1969 Patricia Maginnis self-published “The Abortees’ Songbook,” a pamphlet filled with hand-sketched drawings she did herself accompanied by searing political

⁴⁰ Cynthia Gorney, *Articles of Faith: A Frontline History of the Abortion Wars*, (New York: Simon and Schuster, 1998) 72-80.

⁴¹ Abortion Counseling Service of the Chicago Women's Liberation Union or Jane was created in 1969 in Chicago and followed in the footsteps of SHA from Oakland. For more on Jane see Laura Kaplan, *The Story of Jane: The Legendary Underground Feminist Abortion Service*. (Chicago: University of Chicago Press, 1995).

⁴² Reagan, “Crossing the Border for Abortions: California Activists, Mexican Clinics, and the Creation of a Feminist Health Agency in the 1960s.” 323.

⁴³ Gorney, 75.

⁴⁴ Reagan, “Crossing the Border for Abortions: California Activists, Mexican Clinics, and the Creation of a Feminist Health Agency in the 1960s.” 327.

limericks describing the abortion debate during this time.

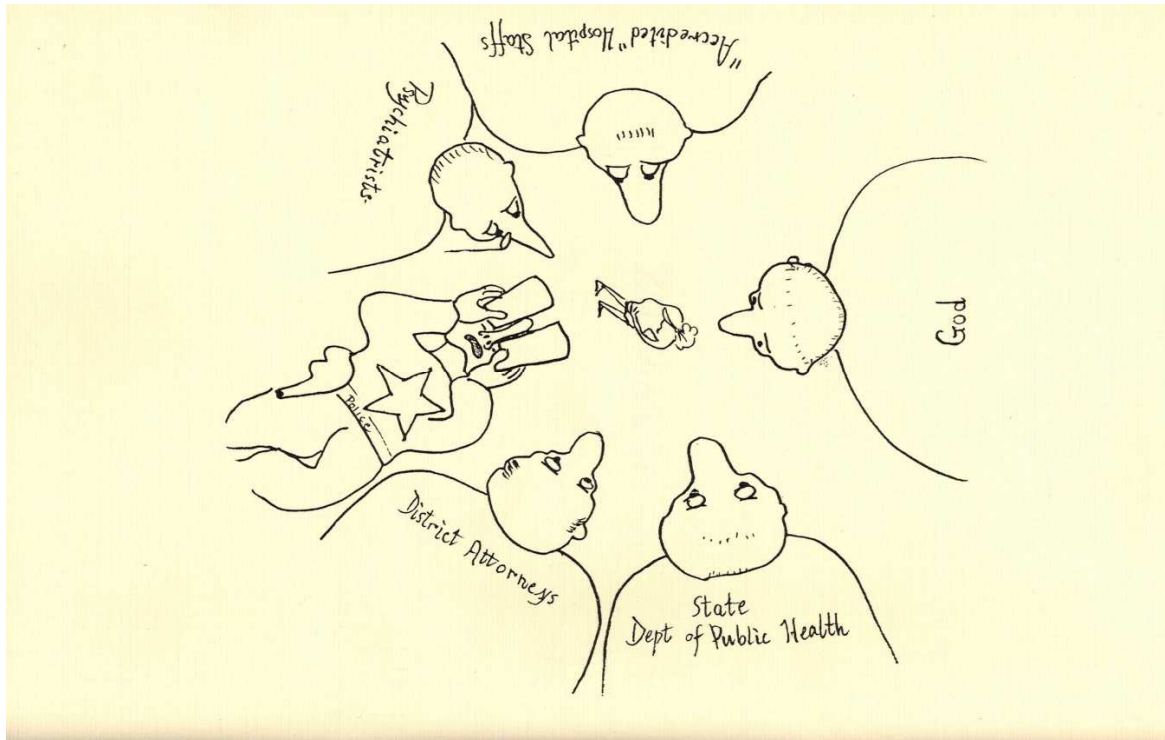


Figure 7. Patricia Maginnis's "The Abortees' Songbook," given to me by the author.

Accompanying her drawing of the various state actors (all men) spying on the woman trying to procure an abortion, Maginnis writes in her wry style: "To privacy you've got not a chance/With bureaucrats' noses up your pants/Your abortion biz? Is theirs to quiz/ And to their sweet tune you'll dance."⁴⁵ Maginnis believed that all women had the right to have sex without fear of becoming pregnant if they did not desire to do so and that no one, not a doctor, the Church, or any state actor should be involved in her decision. SHA/ARAL became well known across the United States, but specifically on the West coast, as an organization that could provide vital and vetted information about abortion clinics across the border. The organization toed the line of what was deemed private and public, defying state laws by publishing lists with the names of doctors who would perform

⁴⁵ Patricia Maginnis, "The Abortees' Songbook," (Oakland: Patricia Maginnis, 1969).

abortions in Japan, Canada, and Mexico.⁴⁶ Via personal correspondence, a potential patient alerted Maginnis to this conundrum, describing the recent “purge on abortionists” in Tijuana. The anonymous writer suggested that the dismantling of abortion providers in Tijuana in June 1966 was due to “your public distribution of these [doctors] names...[and] might [this] not be detrimental to the continuance of this service.”⁴⁷ Up to this point the accessibility of illegal abortions in the borderlands had been kept private and quiet, not only because of the illicit nature of the procedure, but also due to the social stigmas of immorality and promiscuity that accompanied practitioners and patients, respectively.

However, the El Paso-Ciudad Juárez border was no stranger to issues considered illegal or immoral. Prostitution, gambling and liquor were part of this region’s history and illegality fueled business on various sides of the national boundary since the turn of the twentieth century. As historian Ann Gabbert suggests, El Paso had one of the longest standing “Zones of Tolerance” well into the 1940s, where gambling and prostitution were monitored and protected, in order to guard business interests against walking across to Juárez.⁴⁸ During Prohibition in the United States (1920-1933), Juárez saw a surge in “pleasure seekers” as hundreds crossed to imbibe and enjoy the conjoined vices of prostitution and gambling.⁴⁹ Juárez’s reputation for welcoming American vice tourists, coupled with major public health campaigns that sought to control diseases from crossing the border into the United States during this same time, helped to racialize the Mexican population as inherently “immoral” and “diseased.”⁵⁰ Citing proximity to Mexico was a common way to deflect

⁴⁶ Leslie Reagan, “Crossing the Border for Abortions: California Activists, Mexican Clinics, and the Creation of a Feminist Health Agency in the 1960s,” in *Feminist Studies*, Vol. 26, No. 2, Women and Health (2000).

⁴⁷ “Letter from Patient Seeking Service to Patricia Maginnis,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 93. Schlesinger Library, Radcliffe Institute, Harvard University.

⁴⁸ Ann R. Gabbert, “Defining the Boundaries of Care: Local Response to Global Concerns in El Paso Public Health Policy, 1881-1941,” (dissertation: University of Texas at El Paso), 259.

⁴⁹ Gabbert, 320.

⁵⁰ Gabbert, Chapter 6, Chapter 7, and Chapter 8; John McKiernan Gonzalez, *Fevered Measures: Public Health and Race at the Texas-Mexico Border, 1849-1942* (Durham: Duke University Press, 2012), Chapter 5; Heather Sinclair, “Birth City: Race and Violence in the History of Childbirth and Midwifery in the El Paso-Ciudad Juárez Borderlands, 1907-

responsibility from admitting to issues of disease, vice, immorality, and illegality in El Paso. By mid-century “quickie divorces” were the rage in Juárez as hundreds of Americans traveled there before no fault divorces were instated in the U.S., in order to dissolve their unions and to enjoy the border tourism.⁵¹ As some border scholars note, the U.S.-Mexico divide has long been a site of illicit commercial exchange, where Mexico provides what the United States cannot, and vice versa.⁵² As El Pasoans attempted to deride the debauchery in Juárez, their complicity was undeniable, particularly in the case of the illicit abortion business that stretched across the national divide.

A well-known science journalist working for the Associated Press wrote the first-known exposé of the clinics in Ciudad Juárez, which brought greater state and the public attention to the illegal border industry.⁵³ Ralph Dighton’s article was featured in Texas newspapers and even managed to cross state lines. Dighton was reporting on the 1967 changes in California and Colorado’s abortion laws, which made abortion legal to women in the case of rape or incest, physical and mental health issues, and fetal defects.⁵⁴ These modifications were made to give physicians more liberty in prescribing therapeutic abortions and helping to lift the shroud of illegality and immorality that covered performing the procedures. Based on model legislation from the American Law Institute, the states of North Carolina, Maryland, and Georgia followed suit with some aspects of the law.

The liberalization of abortion laws in states like California were supposed to facilitate physicians’ ability to prescribe abortions, but not necessarily easier for women to get them. In a

2013,” (dissertation: University of Texas at El Paso, 2016); also see Monica Perales, *Smeltertown: Making and Remembering A Southwest Border Community*, (Chapel Hill: University of North Carolina Press, 2010); Mario Garcia, *Desert Immigrants: The Mexicans of El Paso, 1880-1920* (New Haven: Yale University Press, 1981).

⁵¹ Oscar Martinez, *Border Boom Town: Ciudad Juárez since 1848* (Austin: University of Texas Press, 1975) 96.

⁵² Peter Reuter and David Ronfelt, as quoted by Kathleen Staudt, *Violence and Activism at the Border: Gender, Fear and Every Day Life in Ciudad Juárez* (Austin: University of Texas Press, 2008) 11.

⁵³ Ralph Dighton was a reporter for the Associated Press and known in the 1960s as a science writer. He had an article published in Bryce W. Rucker’s *Reporting at It’s Best* (Ames: Iowa State University Press, 1964), 3-8.

⁵⁴ Leslie Reagan, *When Abortion Was A Crime: Women, Medicine, and Law in the United States, 1867-1973* (Berkeley: University of California Press, 1997), 220-222.

survey conducted by the Associated Press, women responded saying that the process in states like California and Colorado was too cumbersome and many chose to get abortions in Mexico. One woman interviewed said she went to Mexico because, “I won’t lie about my mental state.” She explained that “the clinic in Juarez [*sic*] was primitive by our standards but the woman abortionist and her two aides were unbelievably kind and apparently very efficient.” She spent two hours in the facility, had no complications, and the total cost for the procedure was \$300, not including airfare.⁵⁵ Costs for legal abortions in California could surpass a thousand dollars after psychiatric and other doctor’s bills were tabulated.⁵⁶ In many regards a trip to Mexico allowed women a level of reproductive freedom not afforded them in the United States. While abortion providers, many of them doctors, still controlled the procedure in Mexico, American women perceived that the ultimate decision of having an abortion was left in their own hands and outside the reach of the state.

Following Dighton’s article, border communities were still left exposed, and the secret industry few dared to speak about in polite company had come to light. As newspapers began picking up Dighton’s story, a month later the *El Paso Herald-Post* declared: “Juarez Abortions Hit U.S. Spotlight.”⁵⁷ The so-called “Juárez abortion mills” were garnering national attention and El Paso doctors were ready to reply. By November 1968, responses to Dighton’s piece began to appear in several Texas newspapers. Consequently, a group of El Paso doctors had come together to write an open letter demanding the investigation of illegal abortion mills in Juárez. They called Ciudad Juárez “the biggest abortion mill in the North American Continent.”⁵⁸ W.A. Pitchford, an El

⁵⁵ Ralph Dighton, “Stigma, High Costs Curbing Legal Abortions in 5 States,” *Wichita Falls Times*, (Wichita, TX), September 19, 1968; “3000 Abortions Likely this Year in Colorado, California,” *Port Arthur News*, (Port Arthur, TX), September 19, 1968; “Legal Abortions Difficult, Costly,” *Hammond Times*, (Northern Indiana, IN), September 19, 1968; “Many Women Obtain Legal Abortions in Two States on Psychiatric Grounds,” *Monroe News-Star*, (Monroe, LA), September 19, 1968.

⁵⁶ *Ibid.*

⁵⁷ “Juarez Abortions Hit U.S. Spotlight,” *El Paso Herald-Post*, (El Paso, TX), October 17, 1968.

⁵⁸ “American Women Taking Trip to ‘The Biggest Abortion Mill,’” *Pampa Daily News*, (Pampa, TX), November 19, 1968; “Juarez Called Abortion Mill,” *Favorite*, (Bonham, TX), November 19, 1968; “Juarez Abortions Are on Increase,”

Paso doctor, who later went on to become the Chairman of the Medical Advisory Committee for Planned Parenthood in the city, was asked to weigh in on the controversy.⁵⁹ He stated that:

Mexicans are a funny people. Although abortions are illegal in Mexico, any taxi driver can point out hundreds of abortion clinics to you...You have to live in this area a long time and then you become skeptical of change on the Mexican side...It is an accepted way of life over there, and we simply cannot do anything about it.⁶⁰

While Dr. Pitchford's sentiments toward his neighbors to the south were emblematic of some white El Pasoans' perspectives about Mexico and Mexicans, particularly his racist assumptions about their attitudes toward morality and the law, his assessment of the situation in Ciudad Juárez and El Paso was far from the truth.

In the borderlands, terminating a pregnancy was very much a binational venture. By no means was the abortion business in Juárez, or in any other Mexican border city, simply an issue of Mexican immorality and lawlessness, but a more complicated reciprocal relationship between businessmen, women, doctors and clinic staff, lawyers, and activists attempting to address a deficit in reproductive care. Moreover, state reprisal for attempts to skirt the law in Mexico and the United States was also spearheaded by law enforcement on both sides of the line. Up to this point, the border region had created spaces of both anonymity and privacy that facilitated deeply controversial procedures like abortions to take place and for organizations like SHA/ARAL to link with abortion providers willing to offer services across national lines.

Of course calling the illicit abortion business a "business" complicates the work of women like Patricia Maginnis and Rowena Gurner. SHA/ARAL did not seek to profit from the referral service created in 1966. Rather they sought a radical feminist approach to the restrictive laws in the

Brownsville Herald, (Brownsville, TX), November 18, 1968; "Juarez Described as Abortion Mill," *Amarillo Globe-Times*, (Amarillo, TX), November 18, 1968.

⁵⁹ "Planned Parenthood Center of El Paso: Board of Directors 1970," Planned Parenthood of El Paso Records, MS 286, Box 3, folder 2,

⁶⁰ "Juarez Described as Abortion Mill," *Amarillo Globe-Times*, (Amarillo, TX), November 18, 1968.

United States. Although, Maginnis and Gurner headed an organization that made several abortion providers across the line very wealthy, the activists used their expansive network to keep doctors in check and prices low for their clients.⁶¹ Doctors involved with Maginnis took great care to protect their relationship with her organization as well as to safeguard their cover as illicit businesses along the border. Likewise, the Society for Humane Abortion and the Association to Repeal Abortion Laws made sure to remove any names from missives, directives, notes, and lists that might otherwise reveal the names, addresses, and telephone numbers of patients and abortion providers. Maginnis and Gurner used codes (both numbers and letters) to identify doctors, specifically, in order to protect their anonymity.

There was pressure on abortion providers from organizations like SHA/ARAL to provide the best service possible. One too many troubled or failed procedures could not only damage the reputation of an abortionist with SHA, but could also draw undue attention from the state. Like any medical procedure, patients needed to make an appointment with nurses or doctors at the clinic and verify their connection to SHA/ARAL or another legitimate referral. While many women like Sarah Weddington rightly expressed their anxiety and fear of crossing the border for an abortion with an unknown doctor, the constant panic of being caught by police or other state actors, made abortion providers suspicious of women calling for assistance. Doctors kept tight records and would send word to SHA activists if patients failed to show. One such provider, known as “Abortionist 30b” described a scene in which a woman from San Leandro, California received a botched abortion from an unknown provider in Juárez.⁶² It appears her call to 30b was intercepted and an unknown person took her with “another girl” from El Paso to a house across the border. A “D&C” (dilation and curettage) was performed on the woman and she was returned to El Paso. 30b stated that he had

⁶¹ “Letter to Dr. #55 from Rowena Gurner, April 10, 1968,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 89. Schlesinger Library, Radcliffe Institute, Harvard University.

⁶² Numbers and letters were used as code to protect the provider’s identities.

spoken with the woman and “she was in a bad condition...she is going to have a big operation from her father he is a doctor.” 30b continued explaining that “we dont [sic] know if they are Doctors [sic] or not, told [name redacted] that they are partners of Dr. [name redacted] and this is not true.”⁶³ Fear permeated all aspects of the experience for patients and providers, as they navigated the illicit terrain of abortion procedures and a lucrative industry that fostered fly-by-night providers.

The illegality of abortion in the United States and Mexico made it almost impossible to hold abortionists accountable to patients in cases of malpractice and made it equally difficult for doctors to protect themselves against women who might snitch. If women spoke out against mistreatment from abortionist they faced risks of potential legal and social repercussions, furthermore, women could strain the relationship between referral services future patients, and doctors, and finally could expose themselves and providers to the criminal system in both countries. In her songbook, Maginnis chastised women who broke their silence to indict providers when faced with possible legal action for their reproductive decision to abort.

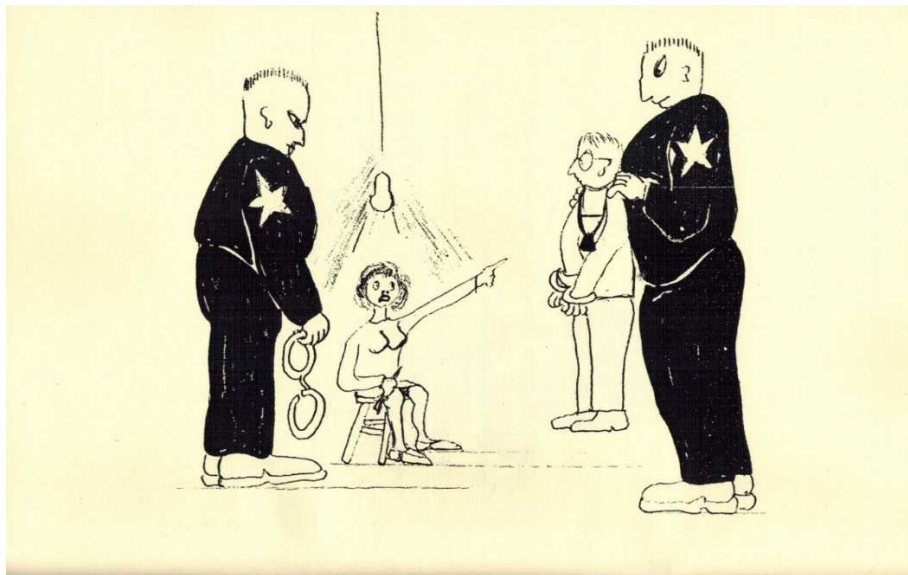


Figure 8. Maginnis, *"The Abortees' Song Book,"* 1969.

⁶³ "Letter to Rowena Gurner from 30b" Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

The verse that follows the sketch of a woman surrounded by huge, menacing, policemen, sitting under a spotlight, with her finger pointing at an abortion doctor reads: “There once was a doctor who dared. /His patient from pregnancy spared. /The abortion was fine/ but she squealed lacking spine. /So the doctor’s in jail now interred!”⁶⁴ In order to prevent such disclosures, Maginnis believed women must understand the political implications of abortion. Maginnis and Gurner believed that having access to the “List” of abortion doctors should come with political work in order for women to feel invested in the fight to legalize abortion, thus SHA/ARAL requested women either pay a small donation to the organization or to work for two hours in their office. Some of these women went as far as helping to monitor some of the specialists.⁶⁵ Activists at SHA/ARAL made certain to protect their referral service from rogue abortionists and relied on doctors from their vetted list in order to maintain good standing among patients; equally with efforts to include abortion seeking women in the political process, SHA/ARAL hoped to protect abortion providers from women who might cave under state pressure to reveal the source of their abortion.

Maginnis’s organization made sure to have reports on the various clinics they used in order to best serve the hundreds of women who sought abortion care. A report from a visit by someone on Maginnis’ team to a Juárez abortion clinic in 1966 helps to showcase various important aspects of the underground border industry. Of major concern to the doctor and nurses at this particular clinic were abortion “hijackers,” The individuals, mostly men, intercepted phone calls made from potential patients staying in El Paso to clinics in Juárez. They would then alert taxi drivers to send patients to competing abortionists in Juárez. A report from Juárez stated that, “Both 30a and 30b believe the tapped phone calls and stealing of pts. [patients] is being done by 43 and 44. Be sure to drop them from list, as both men are considered dangerous. 30e said 44 is wanted by the FBI on drug charges.

⁶⁴ Maginnis, “The Abortees’ Handbook.”

⁶⁵ Reagan, “Crossing the Border for Abortions: California Activists, Mexican Clinics, and the Creation,” 329-330. of a Feminist Health Agency in the 1960s,” 329.

It is almost impossible to control them on your own.”⁶⁶ Competition was fierce in places like Juárez and doctors did what they could in order to maintain a steady and reliable stream of patients. SHA/ARAL was an excellent source. As mentioned above, providers would quickly dissuade SHA/ARAL activists from working with others considered too fringe. The doctor being investigated by the FBI was considered “dangerous” as evidenced by his erratic behavior—the stealing of patients and drug use—and could endanger a patient and the organization as a whole.

The relationship between abortion providers in Mexico and SHA/ARAL (and other organizations like them) was tense specifically because it was unclear to what degree the providers were “physicians of conscience.”⁶⁷ Sociologist Carol Joffe’s study of pre-*Roe* abortion providers in the United States suggests that while the image of the “back alley butcher” became a symbol of the dangers of illegal abortions in the U.S., not all those practicing illegal abortions were quacks or exploitative business people. Physicians interviewed for Joffe’s study provided abortions before *Roe* and described the sympathetic feelings they had toward the women and couples that came seeking their assistance.⁶⁸ Abortion providers in Mexico sent messages to SHA/ARAL that spoke frankly about their practice. One such missive written by the wife—who described herself as an American with a psychology degree—of a doctor performing abortions in Mexico stated clearly, “Nobody sees any more sadness and unfortunate people than I do and nobody has a bigger heart but I have to make a business out of it.”⁶⁹ She explained that while in the past she had accepted checks and even monthly installments as payment, and in the process had been “screwed, chewed, and tattooed”

⁶⁶ “Report from Juarez,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University. SHA used a code of numbers and letters in order to protect important doctor information in their records and the documents that include names are sealed at the Schlesinger Library until 2029, however through newspaper accounts names and places of clinics were revealed.

⁶⁷ Carole Joffe, *Doctors of Conscience: The Struggle to Provide Abortion Before and After Roe v. Wade*. (Boston: Beacon Press, 1995).

⁶⁸ Joffe, Chapter Four: “I was Doing It for Reasons of Conscience,” 70-107.

⁶⁹ “Letter from Dr. and Mrs. To SHA/ARAL, March 14, 1967,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University. 13.

without even a “thank you.”⁷⁰ Now they had to be realistic. Even for this abortion provider the line was not so easily drawn between heartless entrepreneur and humanitarian as she recalled a labor induction performed on a young woman 8 months pregnant. She explained the method they used to induce (which was the same method they used for abortions after the first trimester) and “she [patient] passed the fetus in 48 hours and one of our nurses adopted the baby. Blonde and blue eyed with Mexican parents.”⁷¹ The stories of unscrupulous abortionists were not myths as the history along the border will show, but not all those involved were “physicians of conscience” either. A long history of clandestine underground economies on this national boundary made some abortion providers operate within a gray zone where high profits mingled with compassion and access to proper reproductive care.

Still those running the lucrative clinics understood the importance of protecting and supporting and courting Maginnis and her cohorts in their endeavor. Many of the doctors eagerly awaited visits like Dr. #30 who wrote Maginnis inviting her “to Juarez and expend [*sic*] 2 or 3 days here.” He very kindly included “two round trip tickets...also \$100.00 Dlls. Money Order for your trip expenses from San Francisco to El Paso.” He made sure to reassure Maginnis that “you just dont[*sic*] worry about the expenses here I will take care of everything here.”⁷² Dr. #30 refers to Maginnis’ organization as a business and hopes that everything is running well for her in California. Indeed, the SHA/ARAL referral service was working fabulously, as American women could obtain a vetted abortion provider and clinics in Juárez were raking in the big bucks.

However, regardless of how careful SHA/ARAL was to protect patients and providers, medical complications were bound to arise during the hundreds of abortions provided each year by

⁷⁰ “Letter from Dr. and Mrs. To SHA/ARAL, March 14, 1967,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.14.

⁷¹ “Letter from Dr. and Mrs. To SHA/ARAL, March 14, 1967,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University. 8.

⁷² “Letter to Pat Maginnis from Dr. #30,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

doctors along the line. Given the delicate nature of these procedures a week or two off on conception dates could create complications. Women did not always have accurate dates of conception, and financial constraints prevented them from being able to have the procedure done immediately.⁷³ Not all women were seen by a doctor or gynecologist prior to their abortion and thus providers had no past medical history to help anticipate or diagnose other complications that could arise during or after the abortion. One such case occurred in August 1967 in which Dr. #30 (a much visited physician on the SHA/ARAL list) received an angry letter from a patient's husband complaining that an abortion had not been performed. "I HAVE FIRM BELIEF, SUPPORTED BY DR. [name removed], A GYNOCOLOGIST AND OBSTETRICIAN, OF BERKELEY, CALIFORNIA, THAT YOU DID NOT REMOVE A FETUS AND THEREFORE, DID NOT PERFORM AN ABORTION," claimed the husband [his emphasis]. The Berkeley physician had diagnosed this man's wife with an ovarian cyst, making it nearly impossible to abort the fetus. The husband continued "THE FACT STILL REMAINS, HOWEVER, THAT YOU DISTINCTLY TOLD ME THAT YOU REMOVED A FETUS (WHEN ACTUALLY YOU KNEW YOU DID NOT) AND CHARGED ME A FEE OF \$350.00."⁷⁴ ARAL was notified about the dispute and urged Dr. 30 to comply with the husband's demands for a refund. As Rowena Gurner, Maginnis's main partner in the organization, explained "Of course, I don't hold you [Dr. 30's wife] or Dr. 30 responsible for the fact that Mr. [name removed] girlfriend had a cyst which probably prevented Dr. 30 from completing the abortion." However Gurner was firm and demanded that, "In the future, if you are very careful to see that every woman is given a complete abortion [her emphasis] with no complications, and if you provide all the services which a hospital should provide, we will be very

⁷³ "Letter from Rowen Gurner to Dr. and Mrs. #30," Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

⁷⁴ "Letter from angry husband to Dr. 30," Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

satisfied, and we will not complain and ask for refunds.” In the end Gurner knew that good abortion providers were not easy to come by and recent reviews from ex-patients suggested Dr. #30 treated women well and kept prices low. She recommended that Dr. #30 “hire several more doctors—REAL DOCTORS—to provide for all the women who will be seeking your help [her emphasis].”⁷⁵

The specter of the unsafe, dangerous, dirty, and even deadly Mexican abortion clinic appeared in the minds of many when they contacted SHA/ARAL for the infamous list of specialists. Reminiscent of the letters received by Margaret Sanger in the 1920s and 1930s pleading for birth control, Maginnis and her team collected hundreds of requests for their list and assistance in finding reputable abortion doctors in Mexico. In one such letter a husband explains the sadness of aborting a wanted child and asks for help finding a doctor in Tijuana: “during [my wife’s] first month of pregnancy she contracted German Measles. We looked forward to having our first child, but now we are going through hell.” The couple chose to abort and after reading about SHA/ARAL in the papers decided to contact Maginnis.

My wife and I have decided to go to Tijuana, and look for a doctor, But [his emphasis] we would like to find a good doctor, one whom we could trust. I do not want to endanger my wife’s life. We feel that we can trust you because you had guts enough to fight for what you believe in. So please, if you know the name of a doctor, Please contact us.⁷⁶

Like Weddington and thousands of others, this couple believed that crossing the border would be their salvation, but they would be doing so at great risk to the woman’s life. Maginnis’s organization represented a safety net between the patient and clinics that awaited them in Mexico.

Even after visiting clinics in cities like Juárez, the idea of unsanitary and dangerous conditions that might await American women in abortion clinics in Mexico continued to plague the San Francisco activists. SHA/ARAL sent doctors a “List of Medical Requirements” with twenty

⁷⁵ “Letter from Gutner to Dr.30,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

⁷⁶ “Letter from Husband to Patricia Maginnis,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 93. Schlesinger Library, Radcliffe Institute, Harvard University.

specific guidelines for each clinic to follow in order to ensure an environment that complied with the suitable norms of any hospital or clinic on the U.S. side of the border. Concerns on their list included:

A nurse always on duty, day and night, who speaks and understands English. /All bedrooms, bathrooms, operating rooms cleaned daily with disinfectant. /The doctor should scrub his hands, arms and nails with disinfectant before putting on sterile rubber gloves before each operation. /All operating equipment sterilized. /A REAL PHYSICIAN [her emphasis] on call at all times in case of emergency. /Clean sheets always available. /Nurses should be instructed to change dirty sheets and hospital gowns without waiting to be asked.⁷⁷

It could be that some clinics did not follow such obvious precautions as they engaged in procedures that demanded the utmost respect for a clean, sterile setting and a “real physician”, however, the stereotype of the dirty clinic and unqualified practitioner was ever present. While the demands made by SHA/ARAL to established clinics were condescending, the last point on the list helps to complicate the ways in which the United States and Mexico viewed women and their ability to access reproductive care. Recommendation number twenty states: “All [her emphasis] women should receive excellent care. This includes the women we send, the women other people send, and Mexican women. If we find out that you are not providing all [her emphasis] women with excellent care, we will be very disturbed.”⁷⁸ At this point little is known about the Mexican women who used the services at these clinics, news articles mention “other women” apprehended during the various raids that swept through many border towns in the late 1960s. However, in both English and Spanish language newspapers in the U.S. and Mexico interest seemed to focus on the “American women” who sought abortions in Mexican clinics. In the end SHA/ARAL activists took great care to vet prospective doctors and make sure they were attending to the needs of all the women who visited their facilities.

⁷⁷ “Letter from Gurner to Dr.#30,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

⁷⁸ Ibid.

Doctors had many reasons for their eagerness to join Maginnis's organization and comply with the vetting process that was sure to secure well-paying American patients. After an article in *Playboy Magazine* in 1967, more doctors began to contact Maginnis for her connections to potential clients.⁷⁹ Gurner responded to one of the doctors by asking him to provide documents that showed proof of a license to practice medicine as well as a request to answer over twelve other questions including: "price, length of pregnancy at which you will operate (10 weeks? 12 weeks? 14 weeks? 16 weeks? Etc., type of anesthetic administered, type of antibiotics used, is an English speaking person on duty at all times [her emphasis], [and] what type of sterilizing equipment do you have for instruments?" She explained that, "the specialist who gives excellent care for a low fee will have a steady flow of customers."⁸⁰ The doctor promptly replied with all the necessary information in order to begin work with SHA/ARAL. He answered their questions swiftly: "Until 12 weeks \$500 U.S., we operate all length of pregnancies, Kemital and Trilene, Terramicina (I.V. I.M. Oral.), Yes, Autoclave.-The instruments are under high pressure steam." Under separate cover he sent the documents that served as his proof to practice medicine. A diploma from the Universidad Nacional Autónoma de Mexico, presented from the Hospital Juárez, proof of his internship from 1956-1957, and a certificate from Saint Luke's Hospital (Pittsfield, Massachusetts), where he was a rotating intern from July 1, 1959 until July 1, 1960, were enough to allow him to join SHA/ARAL's network. He was immediately assigned his code: #55.⁸¹

Abortion clinics along the border were able to fly under the radar for some time before authorities began to crack down on providers. According to reports in the SHA/ARAL archives in

⁷⁹ "Letter from Juárez Doctor to F.H. Kirkpatrick, Jr. [author of Playboy article] from the California Committee to Legalize Abortion"; "Letter to Juárez Doctor from Rowena Gurner [after Kirkpatrick forwarded the doctor's original letter]," Society for Humane Abortion Collection, MC 289, Box 5, Folder 89. Schlesinger Library, Radcliffe Institute, Harvard University.

⁸⁰ "Letter to Juárez Doctor from Rowena Gurner [after Kirkpatrick forwarded the doctor's original letter]," Society for Humane Abortion Collection, MC 289, Box 5, Folder 89. Schlesinger Library, Radcliffe Institute, Harvard University.

⁸¹ "Letter to Rowena Gurner from Dr.#55," Society for Humane Abortion Collection, MC 289, Box 5, Folder 89. Schlesinger Library, Radcliffe Institute, Harvard University.

the summer of 1966 there was an initial crackdown in Tijuana.⁸² However, as abortion clinics were shuttered there, these providers moved east to continue their businesses across the line from Arizona and Texas. By January 1968, Maginnis began to receive the first reports from El Paso, discussing the surveillance at the city's airport and motels near it. The correspondence sent to Maginnis mentions doctors #44, #35b and #35. The unidentified writer explained, "My telephone is being checked by the long distance operators." They wished that patients contacted them via postal service with correspondence sent to an El Paso address.⁸³ The following month Maginnis received another report with more bad news. An unknown person, perhaps associated with the referral service, explained in a letter to Maginnis that Dr. #30 had posted bail, was out on bond, but his office had been closed and his equipment confiscated; Dr. #48 was in a mental institution in Mexico City due to his drug addiction; and Dr. #60 had been shot a few days prior and according to reports would be paralyzed if he survived.⁸⁴ However, SHA/ARAL soldiered on in the face of violence that began to surround its referral service and their abortion providers in Juárez.

The Mexican government was working with American authorities, including the F.B.I., in order to expose the illicit industry according to both Mexican and American news sources.⁸⁵ In 1968 newspaper accounts of arrests and the closing of clinics showed a steady attack of state forces against the booming border business. Some of the first reports came from Ciudad Juárez, where major players in the "Banda de Espanta-Cigüeñas ("Stoker shooer")" had recently arrived from

⁸² "Letter to Patricia Maginnis discussing Dr. #70, June 23, 1966," and "Letter to Patricia Maginnis from San Diego client," Society for Humane Abortion Collection, MC 289, Box 5, Folder 93. Schlesinger Library, Radcliffe Institute, Harvard University.

⁸³ "Letter to Patricia Maginnis from Dr.#35, January 26, 1968," Society for Humane Abortion Collection, MC 289, Box 5, Folder 87. Schlesinger Library, Radcliffe Institute, Harvard University.

⁸⁴ "Letter to Patricia Maginnis from Juárez, February 8, 1968." Society for Humane Abortion Collection, MC 289, Box 5, Folder 90. Schlesinger Library, Radcliffe Institute, Harvard University.

⁸⁵ Various newspaper sources discuss the F.B.I.'s involvement with Mexican authorities to crack open the illicit abortion business on the border: "Se Encuentra Refugiado Aquí 'Simon Blanco' Es Miembro de una Banda de Espanta-Cigüeñas," *El Mexicano: Diario de la Tarde*, (Ciudad Juárez, Chihuahua) February 13, 1968; "Juarez Physician Suspect In Abortion Free on Bond," *El Paso-Herald Post*, (El Paso, Texas), April 16, 1968; "Surgery Corrects Juarez Abortion," *El Paso-Herald Post* (El Paso, Texas), July 15, 1968.

Tijuana. Accounts from *El Mexicano: Diario de la Tarde*, suggested that Eusebio Sánchez, alias “El Simón Blanco,” had recently arrived in the desert city with his lover Elia Hernández Gaona, accompanied by an American woman nicknamed “La Pamela” and another doctor surnamed Pirelli. Sánchez was accused of leading a multi-city abortion ring between the United States and Mexico. Moreover, the newspaper article revealed the names of other abortionists, including the brothers Victor y Santiago Fuentes, who along with “El Simon Blanco” were wanted in Baja California for the murder of a lawyer Arturo Solis Corzo. It seems that Sánchez’s latest victim was Mario Díaz Muciño, an agent of the Mexican Judicial Police in Tijuana.⁸⁶ As the papers began to piece together the investigation into the illicit abortion ring a grim picture began to emerge. Illegality forced abortion providers to go underground and in some border cities in the Mexican north, mafia like groups were created with providers finding protection among a ruthless class of “gatilleros a sueldo.” Most of these assassins for hire were primarily ex-agents from the Federal Mexican Judicial Police “they were very capable with the use of weapons and with the ability to use punches in order to soften a conscience.”⁸⁷ It is unclear to what degree abortion doctors used these mercenaries and for what end, but newspaper claims of violence surely brought greater unwanted attention to the business. Not all abortion providers were involved with the “gatilleros a sueldo,” but the informal economy of these clinics helped to create a booming business that would be protected violently. As a telegram addressed to Maginnis suggests some providers “pay protection” and attempted to use the border, crossing back and forth from Juárez to El Paso, as a means to evade harm.⁸⁸

⁸⁶Ibid.

⁸⁷ “Esta Operando Peligrosa Banda Criminal de Espantagüeñas: La Encabezan Dos Medicos Que Reclama la Policia de Tijuana,” Society for Humane Abortion Collection, MC 289, 10 Mexican clippings 1967-1970 (no date available for this document). Schlesinger Library, Radcliffe Institute, Harvard University. Original: “[y eran] muy hábiles en el manejo de las armas y para ‘ablandar la conciencia con los puños.’” “They were very capable with the use of weapons and with the ability to use punches in order to soften a conscience.”

⁸⁸ “Telegram to Patricia Maginnis, no date,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 87. Schlesinger Library, Radcliffe Institute, Harvard University.

The border served both as a space traversed in order to hide from authorities or rivals in the lucrative business and for the state to extend its reach and apprehend providers on either side. By April 1968 Dr. Hernan Fraga Buendia, a Juárez physician, was placed on bond after a short jail stint in El Paso awaiting extradition to California where he had earlier pleaded guilty to his part “in an abortion ring involving El Paso, Juárez, San Diego and Tijuana.” It is not certain that Buendia worked with “El Simon Blanco” or whether the abortion ring included performing abortions on the U.S. side of the line, but his arrest shows that authorities in the U.S. and Mexico were clamping down on the business. After Buendia’s capture the news about arrests in El Paso and Juárez quieted down until later that year.⁸⁹

While reports about apprehensions of abortionists and closures of clinics dominated the newspapers, behind the scenes doctors in Juárez and SHA/ARAL activists moved quickly to protect themselves from state surveillance and disruptions in service. Maginnis received hundreds of letters from men and women requesting information about the procedure and a delay in services was detrimental to the lives of many women. It is unclear exactly which doctors SHA/ARAL worked with along the border, but what is clear is that many of these doctors were involved in providing bribes to officials in order to protect their business. By summer 1968 recent raids and new changes in law enforcement had doctors worried. As doctor #35 declared in a letter to Maginnis in reference to a patient who complained of an infection: “Please do not ask me for any refunds. My budget is limited right now since we are having new members in our government.”⁹⁰ Later that summer Maginnis managed to make arrangements in order to calm the climate in Juárez. In a letter from that city’s Law offices of Espinosa and Espinosa, addressed to Patricia Maginnis, the writer—whose

⁸⁹ “Juarez Physician Suspect In Abortion Free on Bond,” *El Paso-Herald Post*, (El Paso, Texas), April 16, 1968.

⁹⁰ “Letter to Patricia Maginnis from Doctor #35, June 20, 1968.” Society for Humane Abortion Collection, MC 289, Box 5, Folder 87. Schlesinger Library, Radcliffe Institute, Harvard University.

name was redacted from the missive—explained the new arrangements made between him and his clients:

A meeting was held after I talked with you in the afternoon between Dr. [name removed], the chief of the Judicial Police, Mr. [name removed], and myself. This meeting was proposed by the doctor and we did manage to agree to the terms that Dr. [name removed] will pay Mr. [name removed] the amount of \$500.00 per month and Mr. [name removed] also guarantees the safety of the doctor and all other [sic] involved. It also has been agreed to remove the so-called Dr. [name removed] from Dr. [named removed]'s office since we assume that all of this trouble has arisen because of him.⁹¹

The lawyer instructed Maginnis to remove old information about him from the referral list and replace it with his new address in El Paso for “my protection as well as the protection of the girls.”

He concluded by asking Maginnis to weigh in on the arrangement, “Please advise me if you are satisfied with the agreement that we have reached and if you do have anything else in mind, please do not hesitate to contact me.”⁹² Due to the removal of sensitive names from all of SHA/ARAL records, it is unknown who Maginnis was corresponding with, but she was helping to broker deals between doctors and lawyers, as well as arrange pay-offs to government officials in order to keep her vital referral service afloat.

⁹¹ “Letter to Patricia Maginnis from Law Office of Espinosa and Espinosa, August 1, 1968,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 91. Schlesinger Library, Radcliffe Institute, Harvard University.

⁹² Ibid.

The abortion referral service and abortion business navigated the gray zone of the discreet, the private, the clandestine, and the public. As SHA/ARAL continued to publish their referral list and make secret deals to protect their important work, some abortion providers in Mexico brought attention to the illicit business by attempting to contact U.S. doctors asking for referrals. Although

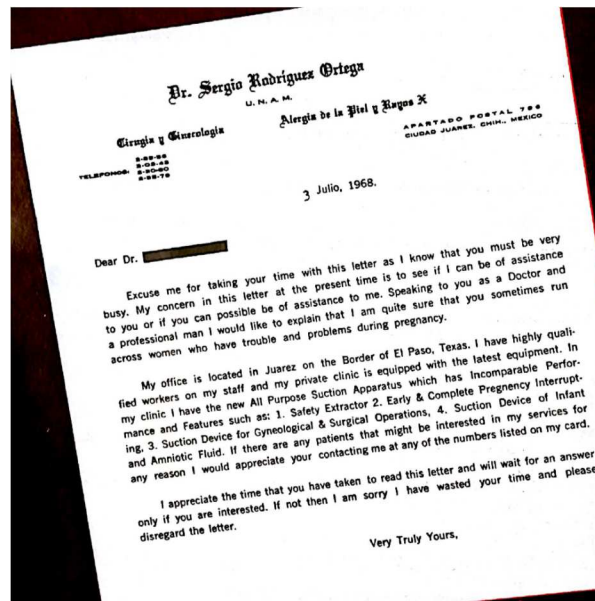


Figure 9 "Letter from Dr. Sergio Rodriguez Ortega to U.S. doctor," *Medical World News*, October 11, 1968.

Dighton's article brought scrutiny from the press in Texas, *Medical World News*'s October 11, 1968 edition's investigation of abortion doctors on the border exposed the story nationally. Sending letters like the one shown above, abortion providers in Juárez sought to create private networks with doctors in the United States. Doctors in El Paso, like Dr. Donald Knaut at Hotel Dieu Sisters' Hospital, and the chief resident at Thomason Hospital, noted that women were being exposed to rudimentary procedures and thus returning across the border into the U.S. with incomplete or botched procedures—the chief resident at Thomason contends he saw at “least three to five cases a month.”⁹³ The magazine's investigation went as far as to have a doctor from Massachusetts contact Dr. Ortega (Figure 3) and set up an appointment to meet in El Paso, but upon arrival the staff,

⁹³ “Mass Mailing For Dangerous Abortions,” *Medical World News*, Vol.9, no.41 (October 11, 1968), 25.

suspicious of the visit, refused the final meeting in Juárez.⁹⁴ The *Medical World News* asked one of its own staffers to pose as a woman in need of an abortion. Meeting briefly with her at the El Paso airport, Dr. Ortega quickly escaped a trap—by driving across the border into Juárez—set by local postal agents wanting to question Ortega’s use of the U.S. mail service to deliver the abortion referral letters.⁹⁵ While FBI, border patrol, and local law enforcement stayed vigilant, abortion doctors, staff, and patients used the border to circumvent laws on both sides of the line.

Although the legal ramifications could be disastrous, the financial gain of the illegal business was ever present and very powerful. “Abortionists in Mexico have stepped up their campaign for U.S. dollars with a mass mailing that in the past year has reached more than 100,000 doctors from California to Connecticut” declared the *Medical World News* report.⁹⁶ SHA/ARAL attempted to keep prices low for instance suggesting doctors charge \$200 up to 11 weeks and \$300-\$400 for 11 weeks to 5 months. However, without a recommendation from Patricia Maginnis and Rowena Gurner, women could pay up to \$600 for a procedure and even as much as \$1,000 depending on the provider and the circumstance.⁹⁷ With the largest known clinic performing up to 20 procedures a day, clinics could gross anywhere from \$4,000 (U.S.) to \$12,000 (U.S.) a day.⁹⁸ According to the Labor of Bureau Statistics calculator from the United States Department of Labor, adjusting for inflation, today clinics would gross \$27,501 to \$82,503 each day on abortion services alone.⁹⁹

⁹⁴ “Mass Mailing For Dangerous Abortions,” *Medical World News*, Vol.9, no.41 (October 11, 1968), 25.

⁹⁵ “Mass Mailing For Dangerous Abortions,” *Medical World News*, Vol.9, no.41 (October 11, 1968), 27.

⁹⁶ “Mass Mailing For Dangerous Abortions,” *Medical World News*, Vol.9, no.41 (October 11, 1968), 24.

⁹⁷ “Letter to Dr. #55 from Rowena Gurner, April 10, 1968,” Society for Humane Abortion Collection, MC 289, Box 5, Folder 89. Schlesinger Library, Radcliffe Institute, Harvard University; “Graficas de Las Maniobras Policiacas en el Sanatorio,” *Correo: Diario Independiente al Servicio de Juárez*, (Ciudad Juárez, Chihuahua), November 11, 1968; “Mass Mailing For Dangerous Abortions,” *Medical World News*, Vol.9, no.41 (October 11, 1968), 25.

⁹⁸ “Clausurado un Antro de Espantacigüeñas,” *El Fronterizo* (Ciudad Juárez, Chihuahua) November 10, 1968; Reports suggest that 5-7 abortions could be performed regularly at most clinics and the largest clinic, the Davalos Sanatorio, was capable of about 15-20 a day; See “La Operaban Dos Medicos: Cieran Otra Cueva de Abortos,” *El Fronterizo* (Ciudad, Juárez), November 13, 1968.

⁹⁹ “CPI Inflation Calculator,” Bureau of Labor Statistics, United States Department of Labor. http://www.bls.gov/data/inflation_calculator.htm accessed: May 23, 2016.

The informal economy created by the criminalization of performing and receiving an abortion helped to foster a dangerous environment along the U.S.-Mexico border where the lives of women, doctors, and state officials were at risk. As El Paso publicly recognized the existence of illegal abortion clinics minutes from its downtown and the connections many of its residents had to these abortion providers, news from another border city broke the entire operation wide open. The October 31, 1968 reports from Nogales, Sonora described the death of an American woman at the hands of an abortion provider in that city.¹⁰⁰ Jo Ann Homman from Hemet, California died in Nogales of a botched abortion on 30 of October 1968. She was eighteen years old. According to neighbors, a couple from Juárez, Chihuahua had moved into their small barrio in Nogales and opened a clinic.¹⁰¹ Most believed the procedure had taken place at that location. An unknown man abandoned the young woman at the municipal hospital. Doctors there tried to stop her hemorrhage, but were unsuccessful. In the days that followed her death, reports described the clinic as one of the most luxurious investigators had seen.¹⁰² Further inquiries by U.S. and Mexican police revealed a dramatic connection between abortionist in Mexico and American religious organizations, mostly Protestant from Arizona and California, who made the main referrals to the facility in Nogales.¹⁰³ The *Nogales Herald* in Arizona reported that according to police approximately 100 abortions had been performed in the short time the clinic had opened since September of that year.¹⁰⁴

¹⁰⁰ “Murió una Norteamericana al Provocarle un Aborto,” *Accion: Diario Independiente* (Nogales, Sonora) October 31, 1968; “Misteriosa Muerte de una Mujer en el Sanatorio Municipal,” *El Noroeste* (Nogales, Sonora) October 31, 1968; “Muere Joven Mujer: Escandalo en Nogales: Una Estadunidense Fue Abandonada en el Hospital Municipal,” *El Sonorense* (Nogales, Sonora), November 1, 1968.

¹⁰¹ “California Teenager’s Death Uncovers Giant Border Abortion Mill,” *Nogales Herald*, (Nogales, Arizona) November 1, 1968.

¹⁰² “¡Espantagüeñas!: La Banda Tenia Lujosa Clinica Clandestina en Nogales,” *El Sonorense*, (Nogales, Sonora) November 2, 1968.

¹⁰³ “Encontraron Documentos de Recomendación de ‘Pacientes’ al Sanitorio Clandestino,” *Accion* (Nogales, Sonora) November 2, 1968.

¹⁰⁴ “100 Abortions Believed Performed At Sonora Clinic,” *Nogales Herald* (Nogales, Arizona), November 2, 1968.

Raids in Ciudad Juárez a few days later further exacerbated the ability for SHA/ARAL to continue their referral work and brought critical observation of the clinics and referral services. Perhaps the greatest hit to Maginnis was the raid of the Sanatorio y Clinica Davalos. As mentioned above it is unclear which doctors SHA/ARAL worked with, but during an oral history interview conducted with the author, Maginnis recalled working with Davalos, visiting his clinic in Juárez, and securing him as a provider in her network.¹⁰⁵ Mauricio Davalos was the son of Antonio Davalos, the man who worked with the Juárez midwife and nurse Bertha Chávez in the late 1940s. There is little information about what happened to the older Davalos, but by 1968 Mauricio Davalos was operating one of the most well-known abortion clinics in the borderlands. *El Fronterizo*, the Juárez daily, broke the news of the bust declaring that along with local police and the department of health had “shattered the powerful international mafia of ‘stork-shooers’ that had the Davalos Sanatorio as its center of operations.”¹⁰⁶ The papers reported that with the beds available and some records they estimated that about 15 to 20 abortions were performed at the clinic every day.¹⁰⁷ However, the doctors were alerted to the raid and managed to escape before police arrived. Law enforcement detained nurses, office staff, and even the cook. Authorities in El Paso were able to locate the contact person between the Davalos clinic and potential clients. Signaled out as Clifford Gibbson[sic] according to Juárez papers, he was an African American man from Oakland, California who would bring women from that state to El Paso in order for them to procure an abortion in Juárez. Gibbson[sic] was not detained as there was no material evidence connecting him to any

¹⁰⁵ Patricia Maginnis Oral History Interview

¹⁰⁶ “Clausurado un Antro de Espantacigüeñas,” *El Fronterizo* (Ciudad Juárez, Chihuahua) November 10, 1968. Original: “esintegro ayer ponderosa mafia internacional de ‘espantacigüeñas’ que tenia como centro de operaciones el Sanatorio Davalos.”

¹⁰⁷ “Clausurado un Antro de Espantacigüeñas,” *El Fronterizo* (Ciudad Juárez, Chihuahua) November 10, 1968.

crime.¹⁰⁸ Along with clinic staff, 15 American women were arrested and their names were published in Juárez newspapers, while the El Paso press kept that information quiet.

Indeed, the papers' treatment, on both sides of the border, of the doctors and patients at the Davalos raid and subsequent raids of other clinics was quite telling of gender and racial discourses that informed the social milieu of the borderlands. Dr. Pitchford quoted in El Paso newspapers describing the unscrupulous nature of Juárez doctors, who, he suggested, saw nothing wrong with providing women with illegal abortions, encapsulated the stereotypical ideas about Mexicans' respect for authority and the law. However, Mexican newspapers did little to avoid misogynistic phrases and commentaries when describing the women who were captured during the raids. Described by journalist as "irresponsible women" and "denaturalized mothers" one newspaper went as far as to suggest that these women were capable of anything even to go as far as "kill the fruit of her loins, so she may do as she pleases."¹⁰⁹ The papers made sure to underscore that the women were "extranjerías," and when possible contended they were all "norteamericanas" and even disparagingly signaled them as "Yanquis" all in an attempt to suggest that Mexican women were not engaging in illegal and immoral behavior. However, documents and interviews suggest that women on both sides of the line sought abortions at the Davalos clinic.¹¹⁰ Although it is difficult to know the exact ethnic, racial, and class make-up of those using the SHA/ARAL "List" sources suggest that women from across the socioeconomic spectrum from the United States used the list, including African American women and Chicanas.¹¹¹

¹⁰⁸ "Clausurado un Antro de Espantacigüeñas," *El Fronterizo* (Ciudad Juárez, Chihuahua) November 10, 1968; "Como Opera La Mafia," *El Fronterizo* (Ciudad Juárez, Chihuahua) November 11 or 12, 1968 [date unclear].

¹⁰⁹ "Les Dieron el 'Pitazo,'" *El Correo* (Ciudad Juárez) November 11, 1968; "Como Opera La Mafia," *El Fronterizo* (Ciudad Juárez, Chihuahua) November 11 or 12, 1968 [date unclear]; "Pasaron a un Hotel A Las Yanquis," *El Fronterizo* (Ciudad Juárez, Chihuahua) November 14, 1968. Original: "irresponsables mujeres;" "madres desnaturalizadas;" and "matar al fruto de sus entrañas, contal de salir con la suya."

¹¹⁰ Interview with Patricia Maginnis, April 24, 2015; "Letter from Gurner to Dr.#30," Society for Humane Abortion Collection, MC 289, Box 5, Folder 86. Schlesinger Library, Radcliffe Institute, Harvard University.

¹¹¹ Reagan.

Jo Ann Homman's death spurred the increase in vigilance of law enforcement to the illicit abortion business along the border for years. Arrests of abortionists and the closure of clinics along the border continued that year and into 1969.¹¹² By that time legal challenges were being made in states within the United States as a means of paving the way for federal laws legalizing abortion. In *People v Belous* (1969), the California Court case that called into question the legal abortion restrictions in that state, was one of the first state challenges to abortion restrictions. Dr. Belous, the defendant in the case, justified his referral of an illegal abortionist in California because his patients had threatened to flee to Tijuana in order to obtain the procedure if the doctor refused to help. This case motivated women's rights activists to fight restrictive abortion laws in various states until *Roe v Wade* was first argued in 1971.¹¹³ Maginnis and Gurner's referral service began to wane, as more women were able to seek legal solutions to their reproductive needs in the United States.

As the second wave women's movement and the discovery of illegal abortions across the border helped to garner support for the legalization of abortion, Planned Parenthood in El Paso was slow to the table. Not until 19 January 1973, just three days before the *Roe V. Wade*'s decision sparked a firestorm across the nation, did PPEP contend publicly with abortion issues. As it celebrated its 36th Annual Planned Parenthood of El Paso Meeting, Sarah Ragle Weddington gave the keynote address, titled "The Law and Planned Parenthood."¹¹⁴ In the following year's presidential report, Dr. W. Taft Moore, the first man to preside over the organization, demonstrated unease about the decision, stating, "At this time we as a board seem uncertain as to the qualitative

¹¹² "Three Arrested in Clinic Inquiry," *El Paso Herald-Post*, (El Paso, Texas), November 13, 1968; "Con Fianza de Seis Mil Pesos Dejaron Libre a Una Abortera," newspaper unknown, January 5, 1969. Society for Humane Abortion Collection, MC 289, 10 Mexican clippings 1967-1970. Schlesinger Library, Radcliffe Institute, Harvard University.

¹¹³ Reagan, *When Abortion Was a Crime*, 235.

¹¹⁴ "Program: Thirty Sixth Annual Meeting of Planned Parenthood of El Paso," Planned Parenthood of El Paso records, MS 286, Box 4, Meeting Programs.

extent of our obligation concerning the question of abortion.”¹¹⁵ Nowhere in his assessment of 1973’s major reproductive health legislation did Dr. Moore mention the abortion business in Juárez. He did, however, reinforce the PPEP’s stance on curbing overpopulation in the Mexican border city, declaring:

The birthrate in the United States is approximately 15 per 1,000 population [sic]. Ours in El Paso is 30 per 1,000, and that of Juarez [sic] is one of the highest in the world at 49 per 1,000. Our goals in Planned Parenthood aim at the very core of many, if not most, of the world’s present publicized problems. Without overpopulation, there would be no energy crisis. Pollution is a function of overpopulation. Welfare and excessive taxation are results of pool [sic] family planning. We must work to reach more people, especially in this area with its exaggerated need.¹¹⁶

Even after one of the most important legal reproductive health decisions made since *U.S. v. One Package* in 1936, PPEP could not come to grips with a changing political world. White women and women of color in the late 1960s and 1970s had experienced a political awakening that placed bodily autonomy at the very center of their struggle. Organizations like Planned Parenthood in the borderland’s outdated vision would alienate radicalized Chicanas during this period. Moreover, as abortion issues took center stage for white women in the national movement, women of color in places like El Paso sought to create a more holistic reproductive rights movement making basic access to healthcare the main goal of their activism.

Nevertheless, the history of clandestine abortion providers along the border highlights the ways that the region provided women with some privacy and cover from the stigmas of society and the ever-watchful eye of the state. The criminalization of abortion pushed it underground, fostered organized crime, and some paid the ultimate price. Border communities were expected to respond to the various aspects of the illicit business by using public funds for increased law

¹¹⁵ “Program: Thirty Seventh Annual Meeting of Planned Parenthood of El Paso,” ,” Planned Parenthood of El Paso records, MS 286, Box 4, Meeting Programs.

¹¹⁶ “Program: Thirty Seventh Annual Meeting of Planned Parenthood of El Paso,” ,” Planned Parenthood of El Paso records, MS 286, Box 4, Meeting Programs.

enforcement, employing public medical facilities when procedures went awry, and absorbing the corruption in local governments that was spawned to protect the profitable industry. There is a long history of the ways in which the criminalization of services and products creates informal economies rife with corruption and exploitation particularly at the edges of the nation. The U.S.-Mexico border has recently experienced a surge of violence, most notably in places like Ciudad Juárez, due to the corruption shaped by the criminalization of the use of drugs and their distribution. More recently the Texas legislature further exacerbated reproductive violence along the line by passing laws that made it nearly impossible for women to secure safe and legal abortions. Reports surfaced of rises in dangerous self-induced procedures across the state.¹¹⁷ In June 2016 the U.S. Supreme Court ruled against these repressive measures in *Whole Woman's Health v. Hellerstedt*, where the dearth of reproductive health options in the borderlands figured prominently in the case.¹¹⁸

Weddington's experience with illegal abortion along the border highlights the ways in which many women defied the laws of the state and crossed the border in order to exercise autonomy over and privacy of their reproductive health choices. However, Weddington's story did not fully account for the detrimental consequences illegality would unleash on the various actors involved at different levels of the business. As contemporary legislators, many encouraged by evangelical calls to protect life, force women to contend with all manner of intrusions in order to prevent abortions, the specter of times when illegal methods produced corruption and violence looms overhead. The history of illegal abortions along the U.S.-Mexico border must serve as a cautionary tale, and must

¹¹⁷ Olga Khazan, "Texas Women Are Inducing Their Own Abortions," *The Atlantic*, November 15, 2015, accessed: <http://www.theatlantic.com/health/archive/2015/11/texas-self-abortion/416229/>; Seth Stephens-Davidowitz, "The Return of the D.I.Y. Abortion," *New York Times*, March 5, 2016, accessed: http://www.nytimes.com/2016/03/06/opinion/sunday/the-return-of-the-diy-abortion.html?_r=0

¹¹⁸ Although the decision came down in June 2016, Justices Ginsburg, Sotomayor, and Kagan asked several questions and asked for clarification about the El Paso area during oral arguments in March. See "Whole Woman's Health, et al. v. John Hellerstedt, Commissioner, Texas Department of State Health Services, et al," Supreme Court of the United States, oral arguments, March 2, 2016.

remind us that regardless of legal ramifications and criminalization from the state women will continue to find ways to assert control over their reproductive health and in so doing secure their rights.

Chapter 5:
Reproductive Justice in the Age of Overpopulation: Chicanas and Planned Parenthood in 1970s El Paso, Texas

As Planned Parenthood scoured some of the poorest areas of El Paso in order to find willing participants for their spermicidal foam campaign and SHA headed a multi-city illicit abortion referral service in the borderlands, ethnic Mexicans in these communities, particularly in South El Paso, sought to address poverty and societal marginalization from a different perspective. By the late 1960s various groups, supported by the Office of Economic Opportunity (OEO), dotted the landscape of South El Paso. Project Bravo, Volunteers in Service to America (VISTA), Project MACHOS, and the Juvenile Delinquency project (charged with addressing issues of increased gang activity in the area), began to organize residents of El Segundo and many began to clamor for a neighborhood clinic. Pete Duarte, who later became the Executive Director of Thomason Hospital and was a leader in the movement for healthcare in South El Paso, explained:

The concerns articulated by the people of the Southside were similar to those voiced by the poor throughout the country: the unavailability of services, the insensitivity of providers, the high cost of services, transportation problems, the long waiting periods at public health facilities, language barriers, and the institutionalized racism inherent in the delivery of health services to this segment of society.¹

As Duarte tells the story, several Chicanas came together in *Los Seis Infernos* (Six Hells) tenement building, owned by the director of the City-County Health Department—they chose that location partly to embarrass him—and with two small rooms began the barrio clinic in April 1968. Focused on self-determination South El Paso residents came together to create a clinic for their community.²

The call for self-determination within the ethnic Mexican community of South El Paso occurred alongside Planned Parenthood of El Paso's expansion and quest to diversify its clinics'

¹ Pete T. Duarte, "Centro de Salud Familiar La Fe: From Struggling Volunteerism to Regulated Bureaucracy" (master's thesis: University of Texas at El Paso, 1993) 28.

² Duarte, 29.

services and provide various forms of birth control through their “Knock on Every Door” campaign. As the Johnson administration formulated plans to address social unrest and poverty, organizations like Planned Parenthood and the Father Rahm Clinic, as the community facility was later named, attempted to confront these issues from different perspectives in the borderlands. PPEP maintained that controlling the growing population of South El Paso and other poverty stricken areas of the city would, over time, reduce poverty, crime, and help quell social unrest among Mexican-American youths. Their prescription was wholesale use of contraceptives by all women in the barrio. On the other hand, Chicana/os in South El Paso believed a more universal approach was needed in order to tackle poverty within the ethnic Mexican community. Poor communities around El Paso had suffered decades of neglect, specifically related to health. Chicana/o activists, through community organizing and the creation of clinics, which included family planning and other social welfare programs, fought to reduce destitution in these areas. While chapter four charted one of the major divergences between Planned Parenthood and the movement for reproductive rights, which highlighted access to abortion, this chapter will discuss how Chicana/o activists and organizations in South El Paso, and Planned Parenthood attempted to tackle the problems of ethnic Mexicans in El Paso in the late 1960s and early 1970s. This chapter traces the ways in which ideas about self-determination and claims of citizenship for Chicano/as came to describe what would later be called reproductive justice and how these ideas contested with the top-down, population control rhetoric of organizations like Planned Parenthood.

Very little has been written about the history of Chicano/as and health during the Chicano movement, in particular the creation of community clinics in the late 1960s and 1970s. Scholars know even less about Chicana activism particularly in regards to reproductive health and rights.³

³ See Elena Gutiérrez in *Undivided Rights*, Chapters 12, 13 and 14; Maylei Blackwell, *Chicana Power! Contested Histories of Feminism in the Chicano Movement* (Austin: Texas University Press, 2011); for more contemporary studies of sexuality and

This chapter is an attempt to understand the history of the relationship ethnic Mexican women had with the reproductive health/rights movement along the U.S.-Mexico border. As historians have noted, the abortion rights movement came about because of the second wave women's rights movement in the late 1960s and early 1970s. Alongside this call for greater "reproductive rights" as articulated by mostly white feminists in regards to legal access to abortion, Chicanas were engaged in legal battles against forced sterilizations in places like Los Angeles. Indeed, MALDEF (Mexican American Legal Defense and Educational Fund) created a small organization called the Chicana Rights Project in the early 1970s to document cases of forced sterilizations of Chicanas in California and Texas. While the Chicana Rights Project was concerned with reproductive rights, they mostly focused on sterilization abuse and were not necessarily interested in aggressively advocating for legal access to abortion.⁴ In many ways this shows the ways in which Chicanas' concerns about reproductive health and rights manifested itself differently than their white counterparts. As white women sought sterilization on demand, Chicanas insisted on a waiting period.⁵ Many of these differences stem from the birth control movement's early days when eugenic reasoning was used to problematize the fertility of poor women of color on the one hand, while exalting the fecundity of white, mainly middle-class women on the other. By the 1970s, the question of reproductive "rights" did not materialize evenly across different racial/ethnic groups of women because not all women had experienced access to reproductive healthcare in the same way.

Thus, when Chicanas in Segundo Barrio started a clinic in 1968, which sought to address overall health and reproductive care in their community, they were perhaps pushing back against a

contraception see Aída Hurtado, *Voicing Chicana Feminisms: Young Women Speak out on Sexuality and Identity* (New York: New York University Press, 2003).

⁴ "Group 5: Series: 5: The Chicana Rights Project," Mexican American Legal Defense and Educational Fund (MALDEF) Records, M0673, Dept. of Special Collections, Stanford University Libraries, Stanford, California. Father Rahm Clinic predates these national efforts to address the legal reproductive rights of Chicanas by the Chicana Rights Project, which started in 1973.

⁵ See Rebecca Kluchin, *Fit to Be Tied*.

birth control movement that had sought to stigmatize and control their reproduction. Chicanas engaged in what scholar and activist Loretta Ross termed “reproductive justice.” Ross described the conditions necessary for women of color, particularly poor women, to attain reproductive justice: 1) “the right to have a child; 2) the right not to have a child; 3) the right to parent the children we have and to control our birthing options, such as midwifery.”⁶ Moreover, Ross stressed that in order to be able to have autonomy over their reproduction, women had to: “also fight for the necessary enabling conditions to realize these rights.”⁷ Although reproductive justice was not articulated until the late 1990s, this study suggest that in the Vietnam War Era, Chicana/os efforts to expand the ways that barrio women could access healthcare, (including reproductive care), is best understood within a *reproductive justice framework*. Chicana activists were well aware that poor living conditions, the spread of treatable diseases, the lack of education, police brutality, and exploitative work, impinged on poor women’s abilities to exercise their reproductive rights. Moreover, the founders of the Father Rahm Clinic were in line with other radical groups of the time, such as Oakland’s Black Panthers, New York’s Young Lords, and Los Angeles’s Brown Berets who also created neighborhood clinics in order to bring proper healthcare—including access to birth control—to their communities.⁸

In order to understand the significance of Chicanas’ reproductive health activism crossing paths with population control advocates, it is important to contextualize the place of Planned Parenthood Federation of America, the most well-known and respected birth control organization at the time, in this larger history. As discussed in past chapters, the movement for access to birth control in the United States began in the early twentieth century. Until the late 1920s the

⁶ Loretta Ross, “Understanding Reproductive Justice: Transforming the Pro-Choice Movement,” *Off Our Backs*, Vol. 36, No.4 (2006) 14.

⁷ Loretta Ross, 14.

⁸ Jennifer Nelson, *Women of Color and the Reproductive Rights Movement* (New York: New York University Press, 2003).

organization focused on ensuring that women had autonomy over their reproduction. However, as leaders of the movement, particularly Margaret Sanger, sought to broaden its aim, connections between population control, eugenics, and contraception were formed. As the feminist underpinnings of the 1920s birth control movement began to erode from the organization's rhetoric, it was supplanted by "the incorporation of reproduction control into state programs as a form of social planning."⁹ Planning and control were in many ways different sides of the same coin. Historian Linda Gordon suggests that for many in Sanger's organization birth control was first and foremost a tool to "achieve a goal greater than individual freedom."¹⁰ After World War II scholars argued that the extremes implemented by the Nazis regime left the eugenics movement—including many who advocated for birth control—scrabbling to rebrand itself. Some began to focus on the issue of overpopulation. By the early 1960s Planned Parenthood Federation of America was fully ensconced in the global battle to stem overpopulation, and in 1961 joined forces with the World Population Emergency Campaign (WPEC) to become Planned Parenthood Federation of America-World Population Campaign.¹¹ Planned Parenthood of El Paso's "Knock on Every Door" project was the local example of global attempts to curtail populations in the "poorer regions" of the world. Coupled with population increases in places like India, China, and Latin America, population control activists found new resolve in their convictions about birth control. By the 1970s Planned Parenthood was at the vanguard of the overpopulation crusade.¹² As the focus on overpopulation became part of public lexicon, civil rights movements became more militant. In light of Vietnam war activism and earlier civil rights struggles, Chicano/a, Black, and Puerto Rican youths began to

⁹ Linda Gordon, *The Moral Property of Women: A History of Birth Control Politics in America*. (Urbana: University of Illinois Press, 2007), 243.

¹⁰ Gordon, 245.

¹¹ Matthew Connelly, *Fatal Misconception: The Struggle to Control World Population* (Cambridge: Belknap Press, 2008) 188-189.

¹² For connections between birth control, population control, and eugenics see Connelly, *Fatal Misconceptions*; Elena Gutiérrez, *Fertile Matters: The Politics of Mexican-Origin Women's Reproduction* (Austin: University of Texas Press, 2008); and Rebecca M. Kluchin, *Fit to Be Tied: Sterilizations and Reproductive Rights in America, 1950-1980* (New Brunswick: Rutgers University Press, 2009).

organize in order to bring greater access to food, proper housing, and healthcare to their neighborhoods. Thus, concerns about population became complicated by demands for economic equity and racial justice. In El Paso, the proximity to the border, a seemingly expanding Mexican-origin community, and the growing social unrest of Chicano/as served to foreground local anxieties over and mirrored national preoccupation with overpopulation and quality of population in the region.

The history that ties El Paso to the Chicana/o movement further exacerbates the anxiety pro-population control activists had over their vision of a controlled demographic in the borderlands. President Lyndon B. Johnson's arrival in El Paso, Texas in late October 1967, to sign the Chamizal Treaty, which formally ended the dispute over territory there, and meet then Mexican President Gustavo Díaz Ordaz, signaled a major change. Simultaneously, Johnson scheduled meetings with Mexican-American leaders from across the country.¹³ The official document released after the two day meeting, titled "Mexican American: A New Focus on Opportunity," was the compilation of testimony presented to Johnson administration officials. Prominent leaders discussed the state of Mexican-Americans in the U.S. by presenting extensive studies, some related to Johnson's War on Poverty programs. The schism within the national Mexican American leadership and more radical activists had been growing in recent months and came to a head during the two-day event. When Johnson declared that the second day of hearings would be cancelled so that participants could be shuttled to the Chamizal ceremony, those disenchanted with the sessions "spilled out of the hotel and joined José Angel Gutiérrez, Corky Gonzales, and Reies López Tijerina, who were picketing in front."¹⁴ Various organizations and groups demanding justice in regards to housing, education, political representation, and greater access to employment united that afternoon,

¹³ Julie Leininger Pycior, *LBJ and Mexican Americans: The Paradox of Power* (Austin: University of Texas Press, 1997) 203.

¹⁴ Pycior, *LBJ and Mexican Americans*, 210.

and as Frank Moreno Martínez wrote about the experience a few months later, “It was in El Paso where La Raza Nueva was given form.”¹⁵ Although Los Angeles would emerge as the hub of the Chicano Movement, this event would leave a lasting impression on young Chicana/os, particularly those living in South El Paso, as well as city leaders and wealthy white residents.

Months before Johnson’s arrival in the borderlands, young ethnic Mexicans had taken to the streets to protest the conditions of the barrio. In the shadow of the 1965 Watts Rebellion in Los Angeles, which came to symbolize the anger of African Americans pushed to the edge by state violence, “the idea of a Watts-like outbreak [in El Paso] suddenly did not seem at all far-fetched.”¹⁶ South El Paso residents were protesting squalid living conditions, economic exploitation, lack of access to education, police brutality, and the denial of healthcare. The Department of Planning of the City of El Paso conceded in July 1967 that, “the story of South El Paso has been the same since the beginning.” Quoting the *Herald-Post* in 1922, the report cited, “there is no toilets [sic], there is garbage on the vacant lots...The City should solve the problems of Chihuahuita, its shame.” The Planning Department concluded that “Today, the same problems exist.”¹⁷ Indeed, in the 1960s, South El Paso was the subject of numerous studies. As one journalist noted “Anthropologists, sociologists, youth and social workers have long studied the Second Ward.” However, “if someone wanted to make a study of the nearly total impotence of this approach, South El Paso would be a good place to go.”¹⁸ Although the Johnson administration had declared a war on poverty in 1964, and monies had reached the borderlands in order to support programs in the barrio, poverty and degradation still characterized South El Paso by the end of the decade. The 1967 City Planning analysis summarized its findings of the tenements in South El Paso, thusly:

¹⁵ Frank Moreno Martínez, as quoted by Pycior, *LBJ and Mexican Americans*, 213.

¹⁶ Elroy Bode, “South El Paso and Hope,” *Texas Observer*, October 27, 1967.

¹⁷ “South El Paso: An Analysis,” Department of Planning of City of El Paso, July 1967, Department of Planning Collection (City of El Paso), MS 204, box 51, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

¹⁸ Tim Sinclair, “Project MACHOS,” *Texas Observer*, April 11, 1969.

[They] are in fact the worse housing condition that exists in the City today. The typical tenement is deplorable for the simple fact that individual units are denied the basic needs of a family shelter. Housing amenities such as water, open space, pride of ownership, area for child play, toilets, and bathing facilities are for common use. These facilities in the common use area (courtyard), so typical of tenement housing in South El Paso are the true root of the slum condition. Accepted conditions of South El Paso such as high density and aging structures are diseased by the total failure of common use space. Almost all tenements in South El Paso deprive thousands of El Paso citizens from the basic needs of our society.¹⁹

El Paso City Planners condemned the living conditions of thousands of ethnic Mexicans in South El Paso. Planned Parenthood had for decades claimed that overpopulation in the barrio fostered poverty and advocated birth control as the main solution, however, in 1968 Chicana/os contested that rhetoric by organizing against the social and economic injustices that kept their neighborhoods in total deprivation.

Rather than focus on stereotypical ideas of hyper-fertility and its connection to poverty, Chicano/a activists viewed their economic marginalization as part of a larger struggle for social justice. One of the most important examples of Chicano/a community organizing around issues of health including family planning was the Father Rahm Clinic created by Chicana activists on the Southside. As a short history of this community facility declared, “The Father Rahm Clinic was conceived by the dreams of the people in the Mexican American barrio called Second Ward in El Paso, Texas.”²⁰ The first paid members of the staff were all Chicanas: Amelia Castillo, a social worker; Mary Márquez, an RN; Lupe T. De Anda, community aide; Gloria Amador, as secretary; and Maria-Elena Martínez, as a part-time clinic coordinator.²¹ Established by community leaders in 1968, the Father Rahm Clinic did not receive federal funding for its work until June 1970 from the

¹⁹ “South El Paso: An Analysis,” Department of Planning of City of El Paso, July 1967, Department of Planning Collection (City of El Paso), MS 204, box 51, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

²⁰ “Announcement by Amelia Castillo,” Box 1, folder 3, *Movimiento Estudiantil Chicano de Atzlan (El Paso) Records, 1967-2000*, MS 254, C.L. Sonnichsen Special Collections Department. The University of Texas at El Paso Library.

²¹ Ibid.

U.S. Public Health Service. Chicanas at the Father Rahm Clinic demanded access to basic health care including reproductive care.

Although the founders and initial members of the clinic staff were community organizers, professionals, and residents, many had long ties to activism and social reform efforts in El Paso. The first executive director of the Father Rahm Clinic was Amelia Castillo, an outspoken social worker, who had cut her teeth in the early 1960s working with Family Services of America—a program funded by the United Way—in Segundo Barrio. Castillo was born on a peninsula along the Rio Grande just a few miles from Fabens, Texas in a covered wagon on 6 October 1934—the same year Margaret Sanger first visited El Paso. She was the youngest of six children, two died before she was born, and her mother was the lone breadwinner in the family. Castillo never knew her father, but was raised by her unwavering *abuelita* in Carlsbad, New Mexico while her mother worked as an “indentured servant” for a chicken farmer in West Texas. The elder Castillo never went to school, but taught herself how to read and write. Bearing witness to her mother’s determination, Castillo knew she wanted to go to college and then return to serve her community. In 1954 she registered at El Paso’s Texas Western College and majored in Business Administration. Unable to find work after graduation in 1958, she decided to heed the advice of a friend, and take the test to become a social welfare worker in Texas. After a year of working for the state, Castillo’s supervisor announced that Castillo would be heading to Our Lady of the Lake University Worden College in San Antonio to complete a Master’s degree in Social Work. She received a full scholarship and interned as a medical social worker at M.D. Anderson Cancer Center in Houston during her time in school. “I was able to help individuals facing cancer and they were Hispanic, and I was able to use my *español mocho, de manita, de Nuevo Mexico* to assist in reducing their stress, their fear, their loss of hope,” Castillo recalled in a 2016 interview.²² With a Master’s degree in Social Work in hand, Castillo

²² Oral History with Amelia Castillo, July 22, 2016.

returned to El Paso to marry her sweetheart, Fernando Castillo, and begin a career as a social worker in South El Paso in 1962. Later she became involved in helping to write grants for Project Bravo, as part of the Johnson administration's War on Poverty.²³

After her Family Health Services of America supervisor changed jobs, and they replaced him with a "racist skinhead, named Waggoner," who only wanted therapy and marriage counseling for the wealthy, white residents of El Paso, Castillo decided it was time for a change. She became the first Chicana social worker GS12 at William Beaumont Army Medical Center. She gave consultation to command in regards to mental hygiene and mental health for soldiers on and off the field. However, she longed to return to her work in Segundo Barrio. During these same years the state, through the National Institute of Mental Health (NIHM) and the Social and Rehabilitation Services (SRS), began to give grants in order to further train incoming social workers. In 1966 her alma mater and the Social Work department at Texas Western College, recruited Castillo to help rewrite a grant to receive these monies. They were missing the "cultural component" discussing issues relating to the ethnic Mexican community in El Paso that Castillo had plenty of experience with and knew how to write about. Dr. Corinne Wolfe, who had long ties to the borderlands region, and knew the demographics of the area well, granted them the funds.²⁴ Castillo became a faculty member of Texas Western College and those in the department quickly realized she was threatening the powers that be. After establishing curriculum and securing grants in order to produce more social workers from the ethnic Mexican community, the mainly white all male faculty in the department began to push Castillo out. After two difficult years in the department, Castillo was recruited to help establish the Father Rahm Clinic in South El Paso.

²³ Oral History with Amelia Castillo.

²⁴ Amelia Castillo interview; "Corinne H. Wolf (1912-1977)," *National Association of Social Workers: NASW Social Work Pioneers* (<http://www.naswfoundation.org/pioneers/w/wolfe.htm>; last accessed: August 1, 2016).

After nearly a decade as a social worker with extensive work focused on the ethnic Mexican community of El Paso, Castillo joined the group of activists who started the Father Rahm Clinic in Segundo Barrio as the Executive Director of the facility. She took on an advocate role in the clinic and sought out “promotoras,” or field workers from the community, to canvas the neighborhood and document “the lack of healthcare with R.E. Thomason, the inaccessibility, unavailability, racism, distance, policies, everything that would interfere with our population getting healthcare.”²⁵ For Castillo health was “todo, todo, todo,” including battling police brutality. “The community called for a program that would help them, it was the community that drew me back, and now that I know more about grant writing...we survived and we survived beautifully, and we addressed police brutality, the first thing!” Young Chicano men, brutalized by police, were the first patients at the Father Rahm Clinic on the corner of Virginia and Third Avenue in El Segundo. The clinic also sought to analyze the current availability of healthcare for ethnic Mexicans in the area, which at the time remained geographically distant. The promotoras ran experiments, taking their young children to R.E. Thomason, El Paso’s general hospital, and they would register their children and document how long it would take for that child to receive treatment. According to their findings, children would wait a minimum of five hours to be seen regardless of their issue. Castillo worked tirelessly to find grants that would support the organization and after several attempts, obtaining small grants from the National Urban Coalition and the Zales Foundation in 1970, they finally received a large enough grant to train community staff members as health professionals.²⁶ With the help of Republican Senator John Tower of Texas, the Department of Health, Education and Welfare (DHEW) awarded them over three hundred thousand dollars to start a Family Health Center in July 1972.²⁷ Amelia developed a “self-concept” grant that was approved and focused on the children of

²⁵ Amelia Castillo interview.

²⁶ Duarte, 33.

²⁷ Duarte, 33.

Segundo barrio. Amelia recounted, “they [children] didn’t have toys, they’d never seen themselves in an upright mirror, you know, to develop their own self-concept...everything was broken around them...”²⁸ She explained “how can they go out and fight the system? When they have no food, no clothing, lack of sleep, cause they’re all piled up—todos juntos—they don’t have a place to rest. They have no wellness. So how can we expect them to grab the concepts of our system?”²⁹ For Castillo and the other activists that worked alongside her, including Pete Duarte, Mary Marquez, and Lupe T. De Anda, justice for their community—fighting against police brutality, poverty, lack of access to education—was premised on bringing health and wellness to the barrio.

As the Father Rahm Clinic began to grow and work with other groups like Project Bravo, they began to receive funds for women’s health, specifically. The clinic sponsored programs around the community that would provide women with complete medical examinations. Castillo noted that many times women had children, but never had follow-up medical visits after the birth. Countless cases of cervical cancer and uterine cancer were detected after their program was implemented.³⁰ Domestic violence issues were also addressed during the physical exams as well as women’s desires to obtain birth control. Castillo called on a student resident, working at R.E. Thomason, José Cázares-Zavala, to help expand this aspect of the clinic. At the time the clinic did not have money to buy contraception or to purchase the instruments to conduct full physical exams, but R.E. Thomason, recalled Castillo, was receiving “lots of money for family planning.” As sociologist Elena Gutiérrez explains, by 1970 the Nixon administration folded in national concerns about the “population explosion” into their platform by adopting the Family Planning and Research Act, which funneled plenty of federal dollars into family planning programs across the nation.

²⁸ Amelia Castillo interview.

²⁹ Amelia Castillo interview.

³⁰ Amelia Castillo interview.

Simultaneously, Nixon's administration created the Office of Population Affairs headed by the DHEW, who in 1972 would award the Father Rahm clinic with its largest grant.³¹

Although family planning was being connected nationally and locally to population control campaigns vis-à-vis the Office of Population Affairs and Planned Parenthood of El Paso, Chicana/os like Castillo and Dr. Cázares-Zavala focused on the immediate needs of women in their community. After some discussion, Dr. Cázares-Zavala agreed that twice a week he would hold a women's clinic, first at the Father Rahm location, and then, in order to guarantee greater privacy for the patients, at the Houchen Settlement House. He also agreed to prescribe contraception to the women who wanted it, because as Castillo explained, "they will ask you about it!" According to Castillo, he would send the women to obtain their birth control from R.E. Thomason: "let them feel it he said."³² Dr. Cázares-Zavala provided women from Segundo Barrio with complete physicals, including blood work, pap smears, pelvic exams, and all other manner of health tests. They called it the Women's Care Clinic, facilitated by Castillo through auspices of the Father Rahm Clinic. Later, Dr. José Cázares-Zavala would become a member of the Medical Advisory Committee of Planned Parenthood of El Paso in 1973 and work at its clinics.³³

As the clinic's reproductive health programs began to expand, Castillo recalls that a rumor began to circulate insinuating that abortions were being performed at the Father Rahm Clinic. Castillo, a self-described devout Catholic, explained the issues that surrounded the lack of information about reproductive health in the barrio: "The [Catholic] Church would not provide the 'education'...because it was taboo, you don't talk about sex, you don't talk about prevention, there was no education, and no clinics."³⁴ Bishop Sydney M. Metzger, "was receiving information from his

³¹ Gutiérrez, 16.

³² Amelia Castillo interview.

³³ "Planned Parenthood of El Paso Committees-1973," Planned Parenthood of El Paso Records, MS 286, Box 3, folder 5.

³⁴ Amelia Castillo interview.

‘santuchos’—males—that we were having abortions and dispensing medication—like the Pill.”³⁵ Castillo went to see the Bishop and explained to him, “I am the mother of six [children] and not once has the Church given me money for a medical exam or for medication. There has been nothing developed by this diocese, not one thing about the human body...now if you provide it we’ll stop whatever we’re doing at Father Rahm.”³⁶ Bishop Meztger nonetheless suggested the name of the clinic could cause confusion among parishioners. What if people thought it was sanctioned or working under the auspicious of the Church? Castillo retorted, “Well you just have to take my word for it. There has never been an abortion, no miscarriages, not one single crisis. But if there has, I want proof.” She remembered that the Bishop fell silent. Because of the reproductive health component, the Church and other community residents demanded that the Father Rahm Clinic change its name and by 1973 it would be known as Centro de Salud Familiar La Fe.³⁷

As the Father Rahm Clinic began to take shape, spurred by Chicano/a activists in the barrio, and address the decrepit conditions that continued to plague their communities, El Paso, Texas was thrust into the national spotlight. In March 1970 *Look* magazine, along with the National Municipal League, released the names of the winners of their coveted “All America Cities” contest. Given to cities and townships that exalted democratic values, the award symbolized total civic participation in local politics. El Paso, Texas was the largest city on the list. The Sun City rushed to capitalize on the distinguished honor. The *El Paso Herald-Post* and the *El Paso Times* moved quickly to showcase the news on almost every page of their newspaper. “EL PASO NAMED ALL-AMERICA CITY” was splashed across the front page of the *El Paso Herald-Post* attached to a picture of Mayor Pete De Wetter with other members of the Chamber of Commerce celebrating this huge triumph. They held

³⁵ Amelia Castillo interview.

³⁶ Amelia Castillo interview, original: “Yo soy madre de seis [hijos], ni una vez esta Iglesia me a dado el dinero para una examinación, medicamento, nada.”

³⁷ Amelia Castillo interview; Pete Duarte, 30. Pete Duarte suggests, however, that the name was officially changed in January 1974.

a congratulatory telegram from President Nixon and were all eagerly wearing the All America Cities symbol, a red, white, and blue shield, as a patch on their coat jackets.³⁸ As one article explained, “The Chamber of Commerce, the City and various business firms are making plans to incorporate the All America City shield design into their letterheads.” And if this was not enough to bolster the importance of the award, “bumper stickers with the symbol will soon break out all over the city as the full import of the honor attributed to El Paso is understood.”³⁹ Indeed, as the weeks passed businesses on both sides of the border sought to link themselves to the award.

The same month the *Look* article appeared, disputes over El Paso Planned Parenthood’s desire to join city-county health clinics erupted. Some county officials determined the new relationship between private and public entities was a necessary step and a means to address a public health concern. Others, specifically the Catholic Church, felt this nexus would disproportionately target poor, mostly Mexican-origin families, whose poverty was viewed as self-inflicted and caused by too many babies. As Chicano/as sought self-determination through the creation of community infrastructure programs, specifically the Father Rahm clinic, Planned Parenthood continued to support contraception as a means to quell social unrest among ballooning populations. The tensions caused by the expansion of birth control into city-county clinics mirrored national and local concerns about overpopulation and the menace of young Black and Brown radicals.

The initial response to the *Look* magazine award seemed to affirm what many elites in the city long hoped to celebrate: civic and democratic progress on the border. City managers were thrilled and many turned to congratulate the group who first began the process for the prize. The League of Women Voters, comprised of steadfast, wealthy, women activists, sought to highlight El Paso as a socially progressive space. Mrs. J. Max Quenon, president of the El Paso League of

³⁸ “Mayor Unveils El Paso’s All-America City Plaque,” *El Paso Herald-Post*, Thursday, February 19, 1970.

³⁹ “El Paso Named All-America City,” *El Paso Herald-Post*, Thursday, February 19, 1970.

Women Voters, and its vice president, Mrs. John Tullis, had the idea to apply for the coveted award and pushed to include some of the city's most impressive projects. The jury comprised of *Look* magazine executives and members of the National Municipal League wanted to highlight towns, suburbs, and cities that were front runners in community participation, specifically in the fields of "mental health, job training, and birth control."⁴⁰ The League of Women Voters outlined the Mayor's Youth Opportunity Program, which provided young people in the community the chance to become involved in civic affairs. Quenon and Tullis included St. Joseph Hospital's plans to offer assistance to an estimated 15,000 alcoholics as well as "care for the narcotic sick, the mentally retarded and 80 and 90 year-old geriatric population."⁴¹ While El Paso was recognized for its efforts to address alcoholism and palliative care for those with mental health issues and the elderly, birth control was omitted from the award application. This absence was striking since Planned Parenthood of El Paso (PPEP) was a strong force in the community.

The *Look* article highlighted some of El Paso's "social problems," namely its disgruntled Mexican-American population. "The largest 1969 winner (pop. 350, 0000) has so far accomplished least in brick-and-mortar terms," chimed the piece. However, *Look* suggested that El Paso was having a "spiritual awakening," led by Mayor de Wetter, forcing El Pasoans to confront a "half-century of indifference toward its Mexican American poor." The Mayor's youth program was an attempt to quell what the magazine termed "Brown Power militancy among angry chicano [sic] youths" and include young Mexican-Americans into its revitalization plans. The Mayor's efforts served to bolster the requirements for the prestigious All America City honor.

Look was celebrating the twentieth anniversary of the All America award, and the periodical believed it was the proper moment to "remind the reader—especially the young reader—that an All

⁴⁰ "Look and the National Municipal League Salute All America Cities, 1969," Thomas Barry, *Look* (March 1970) available at the Library of Congress, 60.

⁴¹ "El Paso Named All-America City," *El Paso Herald-Post*, Thursday, February 19, 1970, 5.

America City award recognizes citizen participation in democracy.” The citizenry in El Paso was, according to historian Oscar Martínez, 57.3 percent ethnic Mexican by 1970, and thus a truly democratic space would require their participation.⁴² As the city worked to address health issues, it struggled to include its Mexican community in civic life. The article examined the condition of many Mexicans in South El Paso and concluded that they were “locked in feudal poverty on the city’s south side, [and] they provide[d] de Wetter with enough negative housing, health and employment statistics to fill a target-area textbook.” These circumstances were staples of ethnic Mexican life in El Paso for nearly half a century. In a caption under the photograph of two young El Paso children, *Look* proclaimed that, “El Paso’s unfinished business is to fulfill promises of a better deal for its forgotten Mexican-Americans.”⁴³ These contradictory images did not deter the *Look* judges from bestowing El Paso this distinguished award.

While the city was celebrating its huge honor, Planned Parenthood of El Paso (PPEP) was a few months into organizing new programs for 1970. Like any good social organization, PPEP was constantly reevaluating existing programs and suggesting ideas for new ones in order to maintain relevance within the community. Of great concern in the early months of this new decade was the issue of overpopulation. In January, the members of the Education Committee recommended a new program that would highlight this social concern, and asked that board members save and clip any relevant magazine and newspaper articles related to overpopulation. Mrs. Studdard, the head of this committee, also asked that board members think about new ways to increase the patient load, since it had begun to dwindle in recent months. Before the meeting adjourned, Mrs. Porter, the board president, reminded all in attendance to watch for Dr. Guttmacher’s interview on the Today Show “discussing the birth control pill,” but equally important was Dr. Paul Erlich’s, author of the

⁴² Oscar Martinez, *Chicanos of El Paso*, 6.

⁴³ “Look and the National Municipal League Salute All America Cities, 1969,” Thomas Barry, *Look* (March 1970, available at the Library of Congress, 63

bestselling book the *Population Bomb*, appearance on the Tonight Show with Johnny Carson and focusing on overpopulation.⁴⁴

This was perhaps one of the greatest strains on the movement in El Paso: the competing discourse between women's reproductive rights and population control. Little is said in the minutes of the board meetings about promoting women's reproductive rights, but highlighting fears over a population explosion was a common theme. One of the main goals of the PPEP Education Committee was to educate the public about the mission of the organization and create favorable conditions for support of the clinics. In 1969 the Education Committee dedicated much of its time to presenting films concerned with controlling birth at schools, churches, hospitals, and other welfare organizations in the city. Films with titles like, "The People Problem," "Population Ecology," and "Children by Choice" are scattered in the meeting notes for that year.⁴⁵ With a message that foregrounded concerns about a population out of control, many on the PPEP Board were confident they had succeeded in their aims to encourage birth control as a public health need.⁴⁶ Moreover, the "Knock on Every Door" campaign supported by Joseph Sunnen, a population control advocate, had been a huge success and helped to showcase the "need" for contraception in the barrio (see Chapter 3).

During the early months of 1970 Planned Parenthood of El Paso had reached dozens of organizations, groups, and individuals with a message that connected birth control and overpopulation. This may be one reason why some in the city, particularly from the Mexican community, reacted negatively to requests by Planned Parenthood to make birth control information

⁴⁴ "Planned Parenthood Center of El Paso: Board of Directors Meeting, January 7, 1970," Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

⁴⁵ "Planned Parenthood Center of El Paso: Board Meeting, February 5, 1969," Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library; "Planned Parenthood Center of El Paso: Board Meeting, October 1, 1969," Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

⁴⁶ "Planned Parenthood Center of El Paso: Board Meeting, December 6, 1969," Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

available through county health clinics.⁴⁷ Speaking visits by men like Lee Loevinger were not necessarily helpful to their cause. Loevinger, a well-respected jurist in the Kennedy Administration who had spearheaded anti-trust legislation, suggested “Compulsory birth control” was on the horizon.⁴⁸ Speaking at the Texas Daily Newspaper Association conference in El Paso, Loevinger “attributed the rise of such protest groups as blacks, students and anti-this or pro-that, as being formed simply because individuals want recognition as individuals not because of the cause.”⁴⁹ Rather than view the work of Chicano/as in Segundo Barrio as a process of self-realization and self-determination through community engagement, Loevinger viewed demands for social justice as mere self-aggrandizement and symptoms of a population out of control. Like Sanger’s push for compulsory birth control before a similar audience in El Paso in 1937, Loevinger declared:

You may not agree, but our children are going to live to see compulsory birth control...Only when we control the population will society be back in control of itself. The family of two children must become the average and the norm. If we make this much of an adjustment in our attitudes, we may preserve our basic values and ethics; otherwise we surely will not.⁵⁰

So moved was Betty Mary Goetting, the honorary President of Planned Parenthood of El Paso, by Loevinger’s talk that she clipped and neatly pasted the article in her scrapbook, alongside the countless articles that emerged as Planned Parenthood fought to make birth control a part of the city’s public health regime.

However, by April the PPEP Board meeting minutes reveal that there were big obstacles that could prevent PPEP plans from moving forward with their public health campaign for contraception. The minutes describe the entanglement as “Planned Parenthood vs. City, County

⁴⁷ “Planned Parenthood Center of El Paso: Board Meeting March 4, 1970,” Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

⁴⁸ “Lee Loevinger, 91, Kennedy-Era Anti-trust Chief,” *New York Times*, May 4, 2003.

⁴⁹ “Compulsory Birth Control Forecast,” *El Paso Times*, February 17, 1970. Betty Mary Smith Goetting Papers, Box 8.

⁵⁰ “Compulsory Birth Control Forecast,” *El Paso Times*, February 17, 1970. Betty Mary Smith Goetting Papers, Box 8.

Health Board, County Commissioners and the City Council.”⁵¹ Enmeshed in this public debacle were not only city and county social services, but also the United Fund, a large financial supporter of Planned Parenthood. The relationship between United Fund and PPEP had been complicated from the onset with many Catholic organizations openly boycotting its affiliation. Planned Parenthood was no stranger to hostilities with the Catholic Church and many in the Mexican community whom the Church purported to represent. As the drama unfolded the Board members of PPEP sought to “request statements from the City, County, Health Board, and United Fund saying whether they have been unduly influenced by strong Catholic elements.”⁵²

The United Fund became one of the main financial contributors to the PPEP in the early years. Any financial changes from the United Fund to the clinics could radically alter services. Consistent pressure from the Catholic Church and its affiliated groups to remove Planned Parenthood from the roster of organizations funded by the United Fund was established early on in the century. Faced with economic uncertainty, the clinic turned to the state for assistance. Rather than compromise attention to its patients, the organization strove to “obtain federal funds from the Health, Education, and Welfare department for their program, and that such funds would be much more easily available if the Planned Parenthood applicants could work in conjunction with El Paso City-County Health Unit.”⁵³ As other organizations began to receive monies from the War on Poverty war chest, by December 1969 the Board decided to obtain “government money.” As discussed in the meeting minutes “previous attempts have been unsuccessful,” but “since the Public Health Board and Project Bravo are also eligible for funds for family planning we need to move

⁵¹ “Planned Parenthood Center of El Paso: Board Meeting, April 1, 1970,” Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

⁵² Ibid.

⁵³ Ibid.

quickly in order not to be excluded.”⁵⁴ Project Bravo had worked hand in hand with the Father Rahm Clinic to assist in the formation of family planning projects, but according to Amelia Castillo, Planned Parenthood of El Paso never made an attempt to join forces with groups in South El Paso.⁵⁵ If the goal was to end poverty in Segundo Barrio and assist the destitute population there, surely Planned Parenthood should have been enthusiastic to support the work of the Father Rahm Clinic. PPEP ignored Chicano/a attempts to address social marginalization, and, instead, the organization increased its overpopulation rhetoric. The same month as the release of the *Look* magazine article exalting El Paso’s civic engagement, PPEP’s plans to attain public funds and join with the city-county health department in order to make birth control a public health issue were made public.

In March 1970 during a County Commissioners Court hearing Commissioners voted to “ok” the use of city-county health clinics for the distribution of contraceptive information and devices. Newspapers noted that overriding objections from Bishop Sidney M. Metzger of the El Paso Catholic Diocese and some Mexican-American commissioners the Court voted to approve the Planned Parenthood request.⁵⁶ Despite Mexican-American Commissioners Richard Telles and Rogelio Sanchez voting no, the project moved forward ready for a vote from the City Council, which shared the budget for the clinics with the county.⁵⁷

Although the program received a green light from the County Commissioners, the voices of dissent were loud. Jane Pemberton published a succinct and powerful summary of Bishop Metzger’s views of this critical project. Al Velarde, president of the church’s Social Action

⁵⁴ “Planned Parenthood Center of El Paso: Board Meeting, December 6, 1969,” Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

⁵⁵ Oral history interview Amelia Castillo.

⁵⁶ Jane Pemberton, “Court Oks Health Center For Birth Control Program,” *El Paso Herald-Post*, March 9, 1970.

⁵⁷ Ibid.

Committee, presented a long letter written by Bishop Metzger at the Commissioner's meeting. The letter outlined three main reasons for Metzger's objection to the proposed plan:

(1) The physical dangers arising from the use of the pill have prompted the recent requirement that warnings about the harmful effects of the use of the pill must be issued whenever it is dispensed; (2) Family limitation is not the proper solution for serious social problems causing poverty, such as low wages, lack of adequate educational opportunities, sub-standard and-or over-priced housing etc.; (3) The determination of family size is essentially the obligation of the parents themselves, while inclusion of a birth control pill project in a public health program implies governmental coercion and an invasion of family privacy.⁵⁸

Though the Bishop's main message sought to condemn the relationship between the city-county health department and Planned Parenthood, he also played on the underlying racial and class concerns from the mostly Catholic and Mexican community in the city.

Metzger's protest merits greater examination. Interestingly his first critique was about the use of the birth control pill, introduced in 1960 as the ultimate advancement in contraceptive technologies. The Bishop's concern focused on the Pill itself. In light of Congressional hearings about the dangers of the contraception pill in February 1970, Metzger contended that this contraceptive method should not be given to the greater public. Excerpts from the Congressional hearings published in the *El Paso Herald-Post* a month before PPEP moved to publicize its intent to join city-county clinics were telling. Congress solicited the testimony from Planned Parenthood Federation President Dr. Allan F. Guttmacher, who believed the pill was a profoundly important tool in the war against overpopulation. He warned the committee: "With world population soaring and bringing in its wake malnutrition and starvation, overcrowding and increasing illiteracy...it would be foolish to abandon use of this particular contraceptive."⁵⁹ Guttmacher accused Senator Gaylord Nelson, D-Wis., and the hearings on the "pill" of "being highly inflammatory and have

⁵⁸ Ibid.

⁵⁹ "Pill Advocate Hissed By Women Militants," *El Paso Herald-Post*, February 25, 1970; "Birth Control Pill Still Called 'Boon' and 'Bane,'" February 26, 1970, *El Paso Herald-Post*.

panicked the public.” In fact, one of the headlines in the *El Paso Herald Post* read: “Pregnancy More dangerous than the pill! Says Dr. Guttmacher.” It was clear that Guttmacher believed the pill was an important tool in the war against overpopulation, for he warned the committee: “With world population soaring and bringing in its wake malnutrition and starvation, overcrowding and increasing illiteracy...it would be foolish to abandon use of this particular contraceptive.”⁶⁰

Guttmacher had long insisted on family planning as the ultimate remedy for overpopulation. When Planned Parenthood Federation of America added the “World Population Emergency” suffix to its name, Guttmacher was hired as the president.⁶¹ Guttmacher had been a welcomed visitor to El Paso’s Planned Parenthood luncheons and fund drives since 1956 and had extolled the virtues of population control at every speech.⁶² During his first talk in the borderlands Guttmacher was sure to justify fear of overpopulation declaring that it would, “aggravate the food problems and affect living standards.”⁶³ His remedy for overpopulation was entangled in eugenic arguments and his connections to El Paso brought into question the intentions of Planned Parenthood in El Paso and helped to underscore Bishop Metzger’s second argument.

Metzger’s next point was in some ways a rebuttal to Guttmacher’s warnings about overpopulation, but was also connected to a longer history of the birth control movement in El Paso. Since Margaret Sanger’s visit to El Paso in 1937, birth control had been lauded as the singular solution to the city’s social problems. Residents of Segundo Barrio were the main targets of campaigns against social degeneration in the city and birth control movement activists did little to dispel this connection. Metzger derided eugenic arguments made by some in the birth control

⁶⁰ “Pill Advocate Hissed By Women Militants,” February 25, 1970, *El Paso Herald-Post*, El Paso, Texas; “Birth Control Pill Still Called ‘Boon’ and ‘Bane,’” February 26, 1970, *El Paso Herald-Post*, El Paso, Texas; “‘Pill’ Claimed Safer Than Pregnancy,” *The El Paso Times*, March 15, 1970.

⁶¹ “Parenthood Director Named,” *El Paso Herald-Post*, November 21, 1961.

⁶² “Speaker Sees World Population Doubled,” *El Paso Herald-Post*, January 17, 1956; “The Gadabout,” *El Paso Herald-Post*, November 11, 1959; “Meeting Minutes September 1962,” El Paso Planned Parenthood Records, MS 286.

⁶³ “Speaker Sees World Population Doubled,” *El Paso Herald-Post*, January 17, 1956.

movement insisting that “prescription of anti-ovulant pills to treat individual pathological conditions is a matter to be determined between physician and patient and is not properly the concern of public health programs.”⁶⁴ The Bishop’s argument referenced discussions riddled with eugenic overtones that dominated the birth control movement in the 1920s and 1930s. Moreover, Metzger declared that “Children are not the cause of poverty which has indeed many causes, gravely low wages, lack of adequate educational opportunities, substandard and or overpriced housing, to name a few...”⁶⁵ His statement was a direct indictment of the social and economic neglect of Southside barrios. He scoffed at Planned Parenthood of El Paso’s championed motto, stating, “It is far too simplistic to assume or to assert the children of the poor are unwanted or unloved.”⁶⁶ While Chicana/o students and professionals sought to address the lack of social services and funding for social welfare program in places like Segundo Barrio, Metzger delineated the hypocrisy with which Planned Parenthood attempted to confront similar issues. As Castillo declared, however, even as the Bishop criticized the societal neglect of families in South El Paso, the Church had done very little in terms of addressing the poverty they decried.

The Bishop’s third objection focused on the state’s interest in advocating for birth control using public health clinics. Metzger stated that “It is claimed that such a program never contemplates ever a hint of coercion on the individual recipients of any welfare program, but this is not always the case.”⁶⁷ He highlighted the private nature of family planning: “The determination of the size of one’s family is essentially the obligation of the parents themselves and this natural right is theirs whether they be rich or poor.”⁶⁸ According to Metzger’s, decisions about reproductive

⁶⁴ Jane Pemberton, “Court Oks Health Center For Birth Control Program,” *El Paso Herald-Post*, March 9, 1970. El Paso, Texas.

⁶⁵ “Birth Control Program Okd for Health Center,” *El Paso Times*, March 10, 1970.

⁶⁶ “Birth Control Program Okd for Health Center,” *El Paso Times*, March 10, 1970.

⁶⁷ Jane Pemberton, “Court Oks Health Center For Birth Control Program,” *El Paso Herald-Post*, March 9, 1970. El Paso, Texas.

⁶⁸ “Birth Control Program Okd for Health Center,” *El Paso Times*, March 10, 1970.

health should not be made at the mercy of state entities, given the interest the state had in controlling welfare programs. His final remarks to the commissioners emphasized the pressure some in the community might feel, explaining how "...it may be stated policy that participation in a welfare program imposes no obligation, the recipients of welfare have protested against the intrusions on their privacy."⁶⁹ Although, PPEP's history with the Catholic Church in El Paso was controversial it had up to this point involved private entities. According to the Church, state clinics promoting Planned Parenthood's mission would now mean government interference into private matters.

However, what was missing from the Bishop's stern opposition to the plan were overtly religious claims that birth control was against Catholic doctrine. Indeed, the clergyman made almost no reference to religion as a major motive for refusal of the project. Perhaps earlier moves to thwart Planned Parenthood had been affected by the doctrinal visions of the Catholic Church.⁷⁰ Again historical memory would remind many in the community that fervent religious arguments would only help to deeply divide the city as it had in the late 1930s and 1940s when the contraceptive movement first took flight. Misogynistic arguments about a woman's proper place in the family and her subservience to her husband would not hold the same sway in the 1970s, particularly in light of changing social and cultural ideas about gender and race. Furthermore, religious claims might only spur public ire toward the Church and most likely would not have affected the vote. Metzeger steered clear of religious overtones, but helped to draw attention to economic and social concerns.

Metzeger was not the only person to oppose the nexus between the City-County Health clinics and Planned Parenthood of El Paso. Richard Telles, one of the county commissioners who voted against the plan, spoke out during the court proceedings. Not only did Telles question the

⁶⁹ Jane Pemberton, "Court Oks Health Center For Birth Control Program," *El Paso Herald-Post*, March 9, 1970. El Paso, Texas.

⁷⁰ Tentler, discussion of Catholics and birth control in 1960s and 1970s nationally.

legality of the use of public clinics to advocate for a private cause, he also pleaded with the court on behalf of the poor. Telles's declaration was printed in the paper:

How long would the rich last if we eliminated the garbage collectors and ditch diggers who are the poor? ...We have failed the poor. There are those who say we are giving them too much and it turns my stomach every time I hear that. We are not giving them enough care. It is the Mexican-Americans doing all the dirty work and we should do more for them.⁷¹

Telles, a long-time political figure in El Paso whose older brother Raymond was celebrated as the first Mexican-American mayor in the United States upon his election in 1957, defined the debate as upper and middle class residents shirking their civic responsibility to the poor.⁷² Telles' comments were in-line with those espoused by other leaders in the Mexican-American community at the time, particularly in regards to poverty. While Metzger sought not to mention the Mexican-American community directly in his dissent of the birth control project, Telles insisted they would be the main targets for natal control. The stark economic and racial disparities highlighted by the *Look* article seemed to confirm for Chicana/os what they had long hoped to address: the marginalization of the Mexican community in El Paso. For more than 80 years, Anglo residents attempted to drive a wedge between questions of economic exploitation by city elites, on the one hand, and the financial degradation of the ethnic Mexican community on the other.

For years, Anglo residents in El Paso maintained that a combination of immigration and fertility were the contributors to the "explosive" population of Mexican-Americans and their economic marginalization. During the same month of the birth control debate, a Juárez reporter did little to deter this vision when he declared in local papers that, "Besides immigration, the high rate of Mexican-Americans in this country has been a major contributor to the explosive growth of the population in the United States in recent years."⁷³ On the day the "All America City" article was

⁷¹ "Birth Control Okd For Health Center," *The El Paso Times*, March 10, 1970. El Paso, Texas.

⁷² Mario T. Garcia, *The Making of the Mexican American Mayor: Raymond L. Telles of El Paso*. (El Paso: Texas Western Press, 1998) 51-83.

⁷³ Ramon Villalobos, "How Many Mexican-American In U.S.?" March 29, 1970, *El Paso Times*.

published, the *El Paso Times* highlighted the immigration status of some residents of the Southside and their connection to social problems there. Discussing Mayor De Wetter's trip to Washington D.C., in order to secure funding to build affordable housing in that area of the city, the press acknowledged the social ills faced by the many "resident aliens" who sought refuge in the Southside. The mayor "made it clear [to Washington D.C. politicians] that if the U.S. government is going to allow thousands of poor Mexicans into El Paso to live and work, then the U.S. is going to have to foot some of the bill to alleviate the social problems caused and encountered by these aliens."⁷⁴ The mayor's comments conflated Mexican-American citizens with newly arrived immigrants as a means to divorce the city of its civic and social responsibilities toward its residents who had populated the city since its inception. Historian Oscar Martínez's study of Chicanos in the borderlands suggests that in 1970, 80.3 percent of ethnic Mexicans in the city were born on U.S. soil. Less than a quarter were immigrants in the city.⁷⁵ Wealthy El Pasoans benefited greatly from the migration of "thousands of poor Mexicans" at the turn of the twentieth century which helped spur El Paso's industrial, agricultural, and service sector economy.⁷⁶ Many, including 1930s birth control movement activists, sought to address poverty in the barrio by imposing ideas about family limitation while refusing to address issues related to meager wages and deplorable living conditions. The conversation about overpopulation, poverty, and the Mexican-origin community in El Paso had been tightly bound since the 1930s.

⁷⁴ "Problems of South El Paso Rate as Big Challenge to Whole City," *El Paso Times*, March 4, 1979.

⁷⁵ Oscar Martínez, *The Chicanos of El Paso*, 6.

⁷⁶ Chicano/a historians, such as Oscar Martínez, Mario García, Vicki Ruiz and Monica Pérales, have been writing about this for decades. For Mexican migration and El Paso's economy at the beginning of the twentieth century see Mario García, *Desert Immigrants: The Mexican Americas of El Paso, 1880-1920* (New Haven: Yale University Press, 1981); Vicki Ruiz, *From Out of the Shadows: Mexican Women in the Twentieth-Century America* (Oxford: Oxford University Press, 1998); Monica Perales, *Smeltertown: Making and Remembering a Southwest Border Community* (Chapel Hill: University of North Carolina Press, 2010)

Many El Pasoans took to the newspapers to proclaim their support for the fight against overpopulation and the need for birth control in El Paso. In the *El Paso Times*' section "Speaking the Public Mind," resident Roy H. Huntley proclaimed, "I believe it is worthy to note that thinking people, be they socialist, capitalist, or any other ideology are in agreement on this issue. In order to keep the earth inhabitable we must limit population."⁷⁷ Huntley, like others in the city, underscored the fact that "thinking people" would easily discern the importance of controlling populations implying that those who were against it were likely not thoughtful about family limitation and social ills brought about by poverty. Others sought to openly support PPEP. In the *Herald-Post* another concerned El Pasoan explained her interest in supporting the organization. Likening Telles' remarks to those of Stokely Carmichael, Mrs. C.M. Boone declared:

If Stokely Carmichael's charge is true, that drugs are a tool of whites to dull the minds and ambitions of blacks in the ghetto, then is also true that the Planned Parenthood's Association's aim is to limit the number of births of Mexican-Americans, as Richard Telles seems to believe. One assumption is as realistic as the other.⁷⁸

Of course associating Telles with Stokely Carmichael, the radical Civil Rights leader who coined the term "Black Power," was an attempt to connect Chicana/o struggles in Segundo Barrio to contemptuous leaders of color across the country.⁷⁹ Although Telles was a long-time Mexican American civic leader, he was no Brown Power radical. For Boone conflating birth control with controlling Mexican-Americans birth rates was as ludicrous as Carmichael's assessment that whites invented drugs to keep African Americans subservient and numb to their social realities. However, Boone's alignment of Carmichael and Telles is telling, given that the Black Power leader was seen as a radical on the national stage. Telles's views were more conservative and he was not espousing the

⁷⁷ "Speaking the Public Mind: Agrees with Letter on Population Control," *El Paso Times*, March 5, 1979. El Paso, Texas.

⁷⁸ "Thinking Out Loud: Favors Planned Parenthood," *El Paso Herald-Post*, April 6, 1970. El Paso, Texas.

⁷⁹ Stokely Carmichael, "Toward Black Liberation," *The Massachusetts Review*, vol. 7, no. 4 (1966); Micheal Kaufman, "Stokely Carmichael, Rights Leader Who Coined 'Black Power' Dies at 57," *New York Times*, November 16, 1998.

same anti-establishment, anti-colonial rhetoric as Carmichael. But nonetheless Boone sought to link them in the minds of El Pasoans, who not only feared the uprisings of militant Brown and Black youth around the country, but also the supposed population explosion by those very same groups.

During these same weeks that the birth control fiasco continued, Chicano/a youths in El Paso were organizing. As Mayor De Wetter tried to quell concerns of marginalized groups in Segundo Barrio by developing outreach programs, many young people took to the streets to expose the rampant discrimination in the border city. Focusing mainly on deplorable living conditions, on 22 March 1970 members of the Mexican-American Youth Association (MAYA) marched to “protest housing, education, and job conditions.” Others from Union de Inquilinos, MACHOS, and MECHA, also sought to join the protest. Tony Marín, a MAYA leader, responded that they could no longer simply “wait for better housing” and jobs. Furthermore, when asked about education Marín proclaimed:

We cry for justice because too many students are pushed out by a system that does not understand the culture of the Mexican-American. Racist teachers and racist books should not block the way for a better education.⁸⁰

Up to this point newspapers and city officials alike refused to call the degradation in South El Paso racist. Although Meztger accused city and county officials of attacking poor family’s fertility in Segundo Barrio and Telles underscored the disproportionate targeting of Mexican-origin residents for natal control, neither directly called it racist. Chicana/o activists, however, directed their ire at policies they deemed racist, bringing to light decades of structural marginalization by El Paso’s government. The radical analysis of the Southside by Chicana/os helped to articulate deeper tensions between private and state institutions worried about the city’s population, particularly in this area of town.

⁸⁰ “MAYA Sets Protest Rally For Sunday,” *El Paso Times*, March 21, 1970. El Paso, Texas.

The fight to have PPEP join with city-county clinics failed. Weeks after the County Commissioners decided to approve the measure, City-County Health Board members recommended that City Council nix the plan.⁸¹ Since county and city monies funded the health agency, a no vote from the city would inevitably kill the nexus. The recommendation, however, was made during an executive meeting—a session closed to the public—and Judge Coldwell, a staunch supporter of the idea, quickly jumped to reprimand Dr. Laurence Nickey, the head of the Health Board, for discussing the matter in private. Furthermore the judge declared the voice of the health agency would have no standing with the commissioner's court since they had already voted and hoped that city council would stand steadfast in favor of the clinics.⁸²

The drama unfolded into the following month as various groups continued to fan the flames of the debate. Mayor de Wetter received letters from clergymen in favor of and against the measure to unite Planned Parenthood services with City-County Health clinics. Several ministers from Protestant churches in El Paso urged the mayor to strongly consider the idea, while representatives from the Catholic Church stood in opposition. So angry was County Judge Colbert Coldwell that he demanded the resignation of all members of the City-County Health Board. The *El Paso Herald-Post* said Coldwell remarked the “Health Board was ‘presumptuous’ in making the recommendation [to City Council] to reject the request, particularly after the County Court had officially voted to approve it.”⁸³ This move certainly motivated the City Council to vote quickly to approve the plan.

⁸¹ “Planned Parenthood Opposition Seen,” *El Paso Times*, March 20, 1970. El Paso, Texas.

⁸² “Birth Control Said Not For Closed Talks,” *El Paso Herald-Post*, March 27, 1970. El Paso, Texas; “Judge Raps Closed Meetings of City-County Health Unit,” *El Paso Times*, March 28, 1970. El Paso, Texas.

⁸³ “Ask Ouster of Health Board,” *El Paso Herald-Post*, April 6, 1970. EL Paso, Texas.

Coldwell suspended the call for the resignations of all Health Board members pending their decision on the use of city-county clinics for the distribution of birth control devices and information.⁸⁴ The Health Board was resolute and voted to block the plan citing:

Legality of permitting private organizations to use health clinics built with...federal funds; whether or not the Board was setting a precedent in designating family planning as a health service; what legal liability might exist on the part of the city and county if any birth control device recipient filed suit, claiming injury...whether approval would open a “Pandora’s box” of applications from various other health-connected organizations; and information from a survey to be conducted as to whether the people want or need such a program.⁸⁵

Dr. Joe Román and Dr. Raúl Rivera were the most vociferous opponents on the Board. Rivera concluded that “the Board should not get involved in something that is not a public health issue, but a moral and religious issue.” Interestingly Coldwell, who attended the meeting, remained silent on the matter. Perhaps the impending City and County elections that followed in May kept him quiet.

However, what is most telling about the events that took place in El Paso, Texas during March and April 1970 are highlighted in the final concerns outlined by City-County Health Board members. Did “the people want or need such a program?” Clearly poor residents needed healthcare since the Father Rahm clinic had garnered so much support from local activists and leaders in the barrio. As Planned Parenthood continued to frame the use of birth control as a tool to combat overpopulation, residents in the barrio created comprehensive healthcare programs that included family planning as a matter of self-determination and justice. Like any good progressive city, the political and civic leaders took matters into their own hands without addressing the specific concerns from the public.

Despite the contentious debates occurring between politicians and activists about birth control, poor and ethnic Mexican women continued to use PPEP clinics and Father Rahm in order

⁸⁴ “Resolution Sets May 1 as Law Day,” El Paso Herald-Post, April 13, 1970. El Paso, Texas.

⁸⁵ “Health Board Blocks Birth Control Plan,” El Paso Herald Post, April 23, 1970. El Paso, Texas.

to address their reproductive health needs. During the two months of the controversy PPEP had 247 new patients and conducted over 699 medical exams.⁸⁶ The program created through the Father Rahm clinic, assisted by Amelia Castillo and Dr. José Cázares-Zavala, which took a more holistic approach to reproductive care, saw countless patients. Indeed, the late 1960s and 1970s ushered in a movement to train more people of color as medical professionals and to create additional clinics centered on the desires of those in the community.⁸⁷ In the health newsletter “For Your Health: A Su Salud,” published by the Department of Health, Education, and Welfare (DHEW), an article was dedicated to the Father Rahm Clinic. It stated that “The Father Rahm Clinic, a community based organization, has made tremendous strides in a two-year pilot demonstration to improve and develop adequate, accessible, and available health care services in South El Paso.”⁸⁸ By 1972 the Father Rahm Clinic had identified four major gaps in healthcare for its community: (1) availability of medical care; (2) family planning services; (3) the creation of health and health-related information and referral services; and, (4) greater community involvement in the decisions regarding healthcare in the barrio.⁸⁹ The recent acquisition of buildings from the Newark-Houchen Board of Directors would help expand their programs for El Segundo, the article reported.⁹⁰ Receiving these major grants forced the Father Rahm clinic to focus on professionalization of its staff, causing it to lose the

⁸⁶ “Planned Parenthood Center of El Paso: Board Meeting March 4, 1970,” Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library; “Planned Parenthood Center of El Paso: Board Meeting April 1, 1970,” Planned Parenthood of El Paso Records MS286, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library.

⁸⁷ See the Health section of the Chicano Vertical Files, C.L. Sonnichsen Special Collections Department, The University of Texas at El Paso Library. For instance the Chicano Health Careers Institute, funded by Chicano Health Development, Inc. in the 1970s out of San Antonio, Texas.

⁸⁸ “Father Rahm Health Referral Service,” *For Your Health: A Su Salud*, vol. 1, no.2 (Department of Health, Education and Welfare, March 1972), Health, Chicano Vertical File, C.L. Sonnichsen Special Collections Department, University of Texas at El Paso Library.

⁸⁹ “Father Rahm Health Referral Service,” *For Your Health: A Su Salud*, vol. 1, no.2 (Department of Health, Education and Welfare, March 1972), Health, Chicano Vertical File, C.L. Sonnichsen Special Collections Department, University of Texas at El Paso Library.

⁹⁰ “Father Rahm Health Referral Service,” *For Your Health: A Su Salud*, vol. 1, no.2 (Department of Health, Education and Welfare, March 1972), Health, Chicano Vertical File, C.L. Sonnichsen Special Collections Department, University of Texas at El Paso Library.

“informality” that made it easier for patients to “approach medical personnel with their medical health problems.” As Pete Duarte surmised, this made some of the militant Chicano/as, involved in the “ethnic empowerment” of communities of South El Paso, view the clinic’s professionalization and bureaucratization as a “co-optation—an ethnic betrayal in return for fiscal support from external sources.”⁹¹ However, this should not diminish the initial intent of Chicana/os committed to self-determination through the creation of institutions that represented their interests and concerns. Viewing health, including reproductive care and family planning, as part and parcel of the larger struggle for social justice in the barrio served to create an organization that continues to offer services to the poor in El Paso nearly 50 years later.

Yet, when *Look* magazine declared El Paso an All America City, city officials did little to acknowledge the work of Chicana/os in the barrio. While racial and class tensions through calls for population control dominated the discussion about access to contraception, the voices of those who were actually trying to address the social ills caused by so-called overpopulation were ignored. Like any good, modern city, the political and civic leaders took matters into their own hands without addressing the specific concerns from those most affected. It seems likely that a city-wide discussion of reproductive health, stripped of its population explosion rhetoric, would have neutralized the backlash from the Catholic Church and would have been welcomed within the Mexican-American community given the use of family planning programs by the Father Rahm Clinic. If Planned Parenthood’s purpose in extending birth control into city-county clinics was to address the major public health issue of overpopulation, which in the eyes of many was the root of poverty, surely Chicano/a attempts to create a clinic that addressed general health and well-being of the Mexican origin people of Segundo Barrio would be praised.

⁹¹ Duarte, 56-57.

Nowhere was the Father Rahm clinic mentioned as city representatives scrambled to confront the critiques made by *Look* magazine. The “All America City” award not only outlined the city’s marginalization of Mexicans in the community, but also foregrounded the paternalistic vision of city leaders as they sought to tackle issues caused by decades of exploitation through programs that did not include the work of Chicana/os in their community. PPEP’s focus on population control coupled with a disregard for an organized Mexican-American community revealed the tangled and undemocratic history of El Paso, one premised on the economic exploitation of those it presumed expendable and outside the reach of proper citizenship, but in need of reproductive control.

Conclusion: Reproductive Justice in the Present and Future

“Birth Control on the Border” focuses on the history of the birth control movement along in the borderlands in the twentieth century. As such it highlights pivotal moments in the past to draw attention to the myriad ways that reproductive control has been a source of freedom, but also a space for control and coercion. The national boundary is no stranger to projects of control and domination, and I argue that the birth control movement was used in order to discipline reproductive bodies viewed as interlopers in the national imaginary. However, there are always those who push back against hegemony. This study’s last chapters demonstrate that countless women, many whose names we do not know, were subjected to the state and private agencies’ attempts to dictate the parameters of their reproduction and how they in turn circumvented these forces in order to create spaces of bodily autonomy. The border, then, became a space where access to reproductive freedom and coercion was negotiated and challenged. Thus, the history of reproduction in the borderlands is paramount for understanding the constraints and permeability of the U.S.-Mexico border in the twentieth century and into the twenty-first.

This study has traced the birth control movement in the borderlands and its significance within the ethnic Mexican population in the borderlands. I suggest that an analysis of this region can give us greater insights into the ways in which ethnic Mexican women and Chicanas engaged with the movement for reproductive control throughout the twentieth century, and how, conversely, the movement engaged with them. Moreover, as I outlined in other chapters, this study argues that ethnic Mexican women’s reproduction was racialized well before campaigns in the 1970s, 1980s, and 1990s, defined “illegal aliens” as Mexican and their children as “anchor babies.” From early calls to curb ethnic Mexican fertility in the 1930s, to using ethnic Mexican women for pharmaceutical studies in the 1960s, each chapter reconstructed various periods where birth control and reproductive health issues were extensions of domination, but also of freedom. “Birth Control on

the Border” reveals how Mexican origin women as part of institutions, groups, but also as individuals helped to mold the movement in favor and against the distribution of birth control information, devices and procedures. The history of ethnic Mexican women’s involvement with the birth control movement in the U.S.-Mexico borderlands amplifies the ways in which race, gender, and class categories were constructed and defined.

This study seeks to critique the birth control movement on the border from a feminist perspective, which highlights how race and class disrupted this woman-centered movement. This occurred in at least two clear ways. First as mostly wealthy, white women dominated the movement targeting the reproductive capabilities of a largely ethnic Mexican population, I argue that ethnic Mexican women used birth control and clinics based on their own needs for reproductive health, perhaps attempting to ignore the racialized language that accompanied access to birth control. As birth control activists disparaged the “superstitious and ignorant” culture that supposedly kept Mexican-origin women away from contraception, women poured into Planned Parenthood clinics in 1937 without major education campaigns or public outreach (and continued to do so well into the twenty-first century). Second, as white birth control activists denied ethnic Mexican women’s desire to use birth control, they simultaneously ignored the social milieu that created poverty and destitution on El Paso’s Southside. Rather than critique inequality and exploitation; poverty caused by “overcrowding” was used to justify a stringent campaign for reproductive control in the city. The birth controllers did not confront their own political and socioeconomic positions in the low wages, exploitative labor conditions, and the non-existent infrastructure that characterized the ethnic Mexican barrios. Instead white birth control activists constructed overpopulation as inextricably linked to ethnic Mexican women’s supposed superstition toward and ignorance about birth control causing hyper-fertility. As the decades went by, the activists could continue to disregard the

systemic forces that fostered decrepit conditions in the barrio, and strategically point to poverty in Segundo Barrio and Chihuahuita as the evidence for ethnic Mexican women's reckless reproduction.

However, the research presented suggests that birth control activists were not interested in extinguishing the reproductive capabilities of ethnic Mexicans along the border, as the organization did not champion sterilizations, instead they were concerned with disciplining fertility they viewed outside white middle class social norms. Americanization programs flourished during the Progressive era, by missionaries and others hoping to transform immigrants, and those considered outside the bounds of proper citizenship, into acceptable citizens. At the turn of the twentieth century, ethnic Mexicans in places like El Paso were at the center of such programs.¹ The birth control movement in El Paso can be seen as an extension of Americanization campaigns that began in the early twentieth century, but in this incarnation continued well into the latter part of the century as the clinic later provided marriage counseling and fertility treatments. Planned Parenthood in El Paso not only hoped to curb overpopulation in the barrio, but they sought to maintain what they perceived to be an adequate number of children and culturally appropriate rules for marriage. Thus, birth control on the border could be used to discipline a community deemed economically necessary, but racially problematic and attempt to fold them into the United States national boundary.

Furthermore, analyzing Planned Parenthood in the borderlands allows for a different and more complex rendering of the institution we know today. Although historians have long discussed the eugenic ties of its founder, Margaret Sanger, few have found actual evidence of the dissemination of this ideology and how it was practiced at specific clinics across the country. "Birth Control on the Border" offers a fascinating look into Planned Parenthood of El Paso and its

¹ See Vicki Ruiz, *From Out of the Shadows: Mexican Women in Twentieth-Century America*; and Monica Perales, "Who has a greater job than a mother? Defining Mexican Motherhood on the U.S-Mexico Border in the Early Twentieth Century.

connections to eugenic and population control advocates throughout across the globe in the twentieth century. From Clarence Gamble to Lady Rama Rau to Allan Guttmacher, PPEP served as space for the convergence of population control rhetoric and practice on the margins of the nation-state. Betty Mary Goetting and the birth control activists in this isolated city worked diligently to connect themselves with the international movement against overpopulation while simultaneously arguing for birth control for the “poorest among us” at home. After World War II and a subsequent rise in population emerged in the global south, further entrenched PPEP in ideology that connected overpopulation to societal decay.

By the late 1960s civil rights insurgencies that emerged across the country eclipsed the birth control movement’s aims in El Paso. As PPEP board members insisted population control would solve the world’s social problems, abortion rights activists and Chicanas carved out divergent paths for reproductive rights and justice. PPEP remained on the reproductive rights sidelines as activists from as far away as San Francisco confronted draconian legislation prohibiting women from reproductive autonomy in the United States. Moreover, Chicanas initiated their own health movement as they accessed medical care, including reproductive health in their communities. Although, PPEP had promised that birth control would remove the excess population that created poverty stricken areas, destitution reigned well into the 1970s. Chicana/o activists in Segundo Barrio created an organization that continues to provide accessible healthcare to El Pasoans today.

A passing look at PPEP in the last years of the 1970s allows us to understand the contemporary reproductive health situation in the borderlands. Planned Parenthood of El Paso attempted to contend with the changing political landscape that transformed the nation and the borderlands region in the 1970s, it continued to be mired in an antiquated vision of the purpose of birth control: population control. As other activists like Pat Maginnis and Amelia Castillo altered the movement for reproductive control along the border, Planned Parenthood seemed confused by the

changing terrain. After nearly 36 years of fighting for access to contraceptives for the “poorest among us,” they were almost surprised by the 1973 *Roe v. Wade* decision, which legalized abortion for women across the country. As Dr. Moore, the first male president of PPEP, explained, “precipitating fear and uncertainty in our hearts, was a Supreme Court decision destined to have a great impact on our country and on our Planned Parenthood organization more specifically.”² While young feminists heralded the abortion decision as a victory for women’s rights, Planned Parenthood in El Paso looked into the future with some trepidation. Perhaps PPEP’s past history with the Catholic Church—the controversies caused by contraceptives—would pale in comparison to anti-abortion campaigns that would surely come. However, I believe that the women’s movement of the 1960s and 1970s, in conjunction with the Chicano/a movement, both articulated self-determination and by extension bodily autonomy, forced organizations like Planned Parenthood to question their long held missions and goals.³ Yet as evidenced by national upheavals that characterized the late 1970s and early 1980s, the local organization for Planned Parenthood in El Paso stayed on course focusing on population control. The long arch that defined the reproductive control movement in the borderlands had diverged as other groups identified significant reproductive health issues tied to social movements of the period, but PPEP, influenced by dubious overpopulation activists, continued to direct their concern on populations considered overly fertile.

The forces that trapped Planned Parenthood of El Paso between the discourse of “choice and coercion” continued throughout the 1970s. For instance, in 1974 the organization welcomed Dr. Edward J. Quilligan a prominent obstetrician from Los Angeles, California to give the keynote address titled “Contraception Today, the Possible Effects for Tomorrow.”⁴ The following year Dr.

² “Program 37th Planned Parenthood of El Paso Annual Meeting, President’s Report,” Planned Parenthood of El Paso records, MS 286, box 4, meeting programs.

³ Gordon, 300.

⁴ “Program 37th Planned Parenthood of El Paso Annual Meeting, President’s Report,” Planned Parenthood of El Paso records, MS 286, box 4, meeting programs

Quilligan would be the main defendant in the now infamous *Madrigal v. Quilligan* case, a class action lawsuit against the Los Angeles County-Medical Center, twelve other doctors including Quilligan, and the U.S. Department of Health, Education and Welfare. Charles Nabarette and Antonia Hernández, attorney's representing the ten ethnic Mexican women who brought the lawsuit, charged that they had been coercively sterilized at the hospital in the 1960s and the 1970s.⁵ Dr. Bernard Rosenfeld, the main whistleblower in the *Madrigal* trial, suggested that hundreds of mostly ethnic Mexican women had been sterilized during this time.⁶ According to one doctor questioned in the case, Dr. Quilligan explained to incoming residents in 1970 that the hospital had received a deferral grant to "show how low we can cut the birth rate of the Negro and Mexican populations in Los Angeles County."⁷ It is unknown what Dr. Quilligan outlined in his speech during Planned Parenthood's annual meeting in 1974. However, in the following year's President's report, where, according to tradition, the prior year's keynote address would be summarized, there was silence. Even if Quilligan's words were absent from the president's report, his population control sentiments were exalted. Thrope A. Mayes, Jr., PPEP president at the time, declared, "Those of us who are familiar with the reasons for and aims of Planned Parenthood recognize that behind major problems facing our world is the lurking spectre [sic] of ever increasing population. We have cried "Wolf" when there really was a wolf."⁸

The institution had cried "Wolf" for decades and adapted its message to changing global events, catastrophes, wars, and so on. As sociologist Elena Gutiérrez contends, by the late 1970s and early 1980s overpopulation advocates like Paul Erlich, were not calmed by a declining national birthrate, instead they sounded the immigration alarm, describing an invasion by "a horde of illegal

⁵ Gutiérrez, *Fertile Matters*, 45.

⁶ Gutiérrez, *Fertile Matters*, 40.

⁷ Dr. Karen Benker quoting Dr. Edward Quilligan in Gutiérrez, *Fertile Matters*, 44-45.

⁸ "Program: Thirty-Eight Annual Meeting of Planned Parenthood Center of El Paso," Planned Parenthood of El Paso records, MS 286, box 4, meeting programs.

immigrants from Mexico.” In the preface to Elrich’s 1979 *The Golden Door*, he asked: “If we are limiting our family sizes so that our children can inherit a better nation, why should we throw open our doors to over-reproducers?”⁹ Indeed, why should they throw open a welcoming door to expatriates seeking a better life for their family when perhaps birth control could solve the issue? Planned Parenthood of El Paso had for years sought to address this concern by helping to create a Planned Parenthood clinic in Juárez, and by 1975 they were making inroads. An “investigation” by some PPEP members had located “concerned citizens” in Ciudad Juárez and “there was now a movement in that city which should result in clinical Family Planning services being offered by a family planning non-profit organization.”¹⁰

In 1976 with support of PPEP, Ciudad Juárez resident and PPEP board member Lupe Arizpe De la Vega finally opened a clinic south of the border. It could not have come soon enough as co-president of PPEP Susan White determined that Juárez was a city “with one of the highest birthrates in the world.”¹¹ De la Vega, like Sanger and other activists before her, used the trope of the poor mother overburdened with children to later describe her enthusiasm for creating a clinic in Juárez for a poverty stricken population.

She was inspired to work to improve these conditions when she read about a depressed mother of nine children who tried to commit suicide because she could not provide for her family. This desperate need for education on family planning and maternal and child healthcare touched Lupe De La Vega profoundly, and through FEMAP, she is able to prevent such tragedies from occurring.¹²

De la Vega’s clinic, later FEMAP (Federación Mexicana de Asociaciones Privadas), became a force for reproductive and overall healthcare along Chihuahua’s northern border. De la Vega was later

⁹ Paul Elrich quoted in Gutiérrez, 73-74.

¹⁰ “Program: Thirty-Eight Annual Meeting of Planned Parenthood Center of El Paso,” Planned Parenthood of El Paso records, MS 286, box 4, meeting programs.

¹¹ “Program: Fortieth Annual Meeting of Planned Parenthood Center of El Paso,” Planned Parenthood of El Paso records, MS 286, box 4, meeting programs.

¹² Carolyn Farb, *The Fine Art of Fundraising: Secrets for Successful Volunteers*, (Cincinnati: Emmis Books, 2004) 75.

recognized for her work within the community as the first Mexican woman to receive the Woodrow Wilson prize for Philanthropy in 2013 and in 2010 she was named a CNN Hero by the broadcasting institution, bringing greater acclaim to her hospitals.¹³ Although PPEP declared that its vital services would be the “Charity to End all Charity” in 1937, by the late 1970s its benevolence stretched across the border and, today, poverty continues unabated on both sides of the line.

Fast forwarding to the twentieth-first century reveals the difference between an institution with deep community roots and another that did very little to ground itself in the values and real concerns of those it purported to save. In 2009 Planned Parenthood of El Paso abruptly closed its doors after over 70 years of existence in the borderlands. Although, popular ideas about its closure abound, many suggesting deplorable state legislation from Governor Rick Perry’s administration was to blame, the truth was much gloomier. Planned Parenthood of El Paso declared bankruptcy because of mismanagement of large sums of money, mostly related to their HIV/AIDS funding.¹⁴ From one day to the next, the clinics across the city closed. Who absorbed the majority of patients, particularly those in dire need of HIV/AIDS medication? Without extra funding or even notice of these closures, Clinica La Fe, formerly Father Rahm Clinic, accepted hundreds of PPEP patients.¹⁵ Without proper community support and oversight, Planned Parenthood slipped into oblivion with little protest from local activists. Many justified this lack of enthusiasm as part of state actions aimed at defunding Planned Parenthood—the Evangelical wing of the Republican Party found fertile ground in Texas—but perhaps the complex history of Planned Parenthood in El Paso played a role in the lack of response and attempts to save this reproductive health institution. As part of the

¹³ “De la Vega Honored with Woodrow Wilson Award,” El Paso Inc. June 16, 2013 (http://www.elpasoinc.com/news/local_news/article_34a02c30-d6a0-11e2-8b83-0019bb30f31a.html) Last accessed: September 24, 2016); “Lupe De la Vega CNN Hero.”

(<http://www.cnn.com/SPECIALS/cnn.heroes/archive10/guadalupe.de.la.vega.html>) Last accessed: September 24, 2016.

¹⁴ Betty Hoover, oral history interview; Escobar, oral history interview.

¹⁵ Phone conversation with Estela Reyes, Public Relations Officer at Clinica La Fe, 2015.

bankruptcy agreement, Planned Parenthood Federation of America revoked the city's charter to house another clinic under its banner.¹⁶

Planned Parenthood in El Paso's bankruptcy predated the legislation that came down in full to eviscerate abortion patients and providers in Texas. Most notably HB 2, a series of new regulations severely restricting women's access to abortion in 2013, engendered a state and nation wide movement to protect women's constitutionally protected rights to a safe abortion. Although PPEP never offered abortions, it did support reproductive rights. In the absence of Planned Parenthood's political force, young women in the borderlands decided to act and created the West Fund, a non-profit organization created to help poor women find and pay for abortion procedures in the El Paso-Ciudad Juárez metropolitan area. In the wake of new laws, the only two abortion clinics available to El Paso women were closed. Another border clinic located in McAllen, Texas, decided to take these new restrictive laws all the way to the Supreme Court. The decision in *Whole Women's Health v. Hellerstedt* came down in June 2016, and the Court decided 5 to 3 against the state of Texas. The Texas laws were found to place an undue burden, outlined in *Planned Parenthood v. Casey* (1992), on women attempting to procure abortions. Radical young feminists in El Paso recharged the movement for reproductive rights and justice without the support of Planned Parenthood in the borderlands. Moreover, these current iterations of abusive legislation against women's reproductive rights, again fomented reproductive control traffic across the U.S.-Mexico border as women seeking abortions and various other forms of birth control took to Mexico to find help.¹⁷

¹⁶ Escobar, oral history interview

¹⁷ "Without this Texas clinic, women with unwanted pregnancies would have to travel 230 miles or cross into Mexico," *Los Angeles Times*, March 12, 2016; "A Pill Available in Mexico is a Texas Option for Abortion," *New York Times*, July 13, 2013; "Looking to Mexico for an Alternative to Abortion Clinics," *New York Times*, August 11, 2012.

“Birth Control on the Border” is my attempt of putting the spotlight on the U.S.-Mexico border as the state of Texas, national and international groups and politicians continue to press against our rights and freedom as reproductive beings. This study was written at a tenuous time. The day after I defended the merits of this project, millions of Americans headed to voting booths across the country in order cast their votes for president. Two of the most problematic and utterly distrusted people in our political history, were our choices: Hillary R. Clinton and Donald J. Trump. Clinton was unwavering in her support for women’s rights and is staunchly pro-choice, while Trump recommended prison for women who have abortions. In regards to reproductive rights, the choice could not have been clearer, given those examples, however, I sought to take a broader stand on the significance of bodily autonomy and reproduction within a reproductive justice framework. The freedom to create life or not is pivotal to discussions about war, the economy, and the sustainability of humanity on this planet. This assertion is further complicated by reviewing the history of women’s reproduction in the United States, particularly in the borderlands. As mostly white women and men at the turn of the twentieth century created an entire science out of deciding who was “naturally” fit to reproduce and who was not through sterilization laws and laws against abortion—these decisions were based on socially constructed ideas of racial and gendered inferiority—set a disturbing historical precedent. Today we are told resources are scarce, consumption is out of control and a decline in the habitability of this planet is eminent. Fear mongering and the spread of fallacies in order to justify the acquisition of resources and land has become much more systematic and cruel; and as technology has eroded what little space we have for privacy of thought and dissent, the image of a dystopian society comes into view. The question of overpopulation will rise again. How might earlier models of social control, premised on racial and gendered bigotry, influence ideas on growing social inequality, scarcity of resources, and technological innovation? Although Hillary Clinton’s defense of reproductive choice at home stood miles above her

contender, her connections to brutal military dictatorships (Saudi Arabia), violent interventions (Libya) and political destabilization (Honduras) abroad suggests she was not concerned with reproductive justice for women and children outside of national boundaries. Her efforts in producing this bloated carceral state at home, suggests she was not much interested in choice for poor women at home. On the other hand, Donald Trump's sociopathic ideology may equal ruin for women across the globe. He said he will upend *Roe v. Wade* and has stoked the flames of white nationalism, particularly among the so-called alt-right, who believe the white race is on the verge of extinction due to the growing populations of non-white peoples and the outright genocide of whites. Hillary Clinton won the popular vote by more than 1.8 million votes, yet Trump received the necessary electoral votes to become the nation's forty-fifth president. Many believed that Clinton would easily clinch the presidency, but as the hours ticked on during election night, this country and the world witnessed the demise of neoliberalism embodied by Clinton and the rise of neo-fascism embodied by Trump.

However, as controversial as it may be, I contend that neither candidate would fully embrace or defend reproductive justice in this country or around the world. The neoliberal politics embraced by Clinton and her predecessor Barack Obama have not led to less war or halting the devastation to our environment, two issues directed related to the preservation of human life. It is true that Clinton would not defund Planned Parenthood, but would she end the mass detention of Central American immigrant women and children crossing the border for asylum? Would she open the borders to countless refugees (mostly women and children) fleeing Syria, Afghanistan, or Iraq? Trump promised to place women accused of having abortions in prison, but we have seen scenarios like this under Obama. Take the case of Purvi Patel from Indiana (Mike Pence was governor of the state before he became Vice President-elect), where she spent two years in jail convicted of feticide

after courts ruled she had self-induced an abortion.¹⁸ My stance on reproductive justice is clear: we must take back the power we give political figures to dictate how we will organize and survive when faced with threats against own freedoms. Rather than place our aspirations and hopes in national figures to protect women, I recommend we take note of the significant examples of radical women like Amelia Castillo, Patricia Maginnis and the women of the West Fund. In a concerted effort to bring justice to women in their communities, these activists worked locally, under conservative and liberal political regimes, to bring greater access and freedom to thousands of women around them. Now more than ever we must exalt the vibrant movements that defied convention and raged against the legal system to bring women greater freedoms over their bodies. Most importantly, we must elevate the nameless women who supported these causes with their bodies, who as patients demanded access to contraception and abortion even as state actors sought to deny them their human rights. We must embolden our communities to fight against the threat of fascism that is sure to come with the rise of Trump, and we must take heed from these histories of reproductive justice along the border. The borderlands region provides a fascinating glimpse of movements and people who sought freedom at the margins of the nation-state, and reveals the history of thousands of women who bravely fought back. Their example must lead us as we move into this next political epoch and help us define how we will bravely fight back.

¹⁸ The rise of the DIY abortion (DIY is slang for “do it yourself”) has grown under the Obama administration as countless states have changed statutes and enacted legislation to make it increasingly more difficult for women to obtain abortions. While it will get worse under a Trump presidency, it is already bad now. See “DIY Abortion in America: ‘Please, I am out of options: inside the murky world of DIY abortions,’” *The Guardian*, November 21, 2016. (Last accessed November 22, 2016; <https://www.theguardian.com/us-news/2016/nov/21/home-abortions-emails-secret-world>)

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CURRICULM VITAE

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