



CRITICAL ISSUES OF OUR TIME

**U.S. PRO-CHOICE
AND PRO-LIFE
GROUPS' STRATEGIES SINCE 1960**

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U.S. PRO-CHOICE AND PRO-LIFE GROUPS' STRATEGIES SINCE 1960

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This paper explains the pro-choice and pro-life movements' trajectories since 1960. There are two policy regimes covered, the first one a fairly short time frame from 1960 until 1973, when women's reproductive policy interests were aligned with the general government frame. The interest in both Democratic and moderate Republican administrations in global and U.S. population issues and aiding firms in those areas helped women to achieve national access to publicly-funded contraception. This was a significant development, even though women were only represented in single-digit percentages in Congress at the time. The symbol of the policy punctuation between the first period on reproductive drug policymaking in the United States and the second, was the election of 1980, the start of a rolling realignment that continued through 1994 and the end of the George W. Bush administrations in 2008.¹ The Reagan Revolution brought in a new electoral coalition to the Republican Party, including many former Democrats among the ranks of blue-collar workers, Catholics, and Southerners. The domestic ethos of his administrations was to shrink the size of government, and, although his project, like those of most conservative governments, was not successful at the national level, it was successful in other realms. The main examples of his success were a seemingly permanent devolution of social policy administration and funding to the states under the new federalism rubric, continued by President Bill Clinton.

PRO-CHOICE DOMINANCE AND ACTIONS IN THE FIRST REGIME, 1960–1973

The boundaries of the period start with the FDA's approval of the Pill for contraceptive purposes in 1960 until the 1973 U.S. Supreme Court's *Roe v. Wade* decision. A third important event was the 1970 passage of Title X of the Public Health Service Act, which established a national system of publicly-funded clinics to provide reproductive health care. President Richard Nixon was in full support of this measure, stating that "no American woman should be denied access to family planning assistance because of her economic condition. . . . This we have the capacity to do."² As Coleman and Jones have noted, the Title X-supported clinics provide services that are not reimbursable under Medicaid and commercial insurance plans. They also observed that Title X received four of its six largest appropriations increases during its first 10 years.³ The second policy period has involved the continual erosion of women's rights to access contraception, comprehensive sexuality education, and abortion.

In the pro-choice coalition, the earliest well-known single-issue group was the National Association for Repeal of Abortion Laws (NARAL), formed by journalist Lawrence Lader, author Betty Friedan, and Dr. Bernard Nathanson in New York in 1968, around their successful attempts to repeal the abortion law of New York State. Lader's 1966 book, *Abortion*, was cited eight times in Justice Harry Blackmun's *Roe v. Wade* decision.⁴ In 1973, after *Roe*, NARAL changed its name to the National Abortion Rights Action League and became the preeminent mass single-issue organization that fought mainly in legislatures, courts, and public opinion discourse to keep abortion safe and legal. In 1976, Lader left NARAL and formed his own organization, Abortion Rights Mobilization (ARM), to perform more niche-based actions without having to go through the bureaucratic structure that had developed at NARAL. Lader had become interested in U.S. reproductive-rights policy by researching and writing a biography on Margaret Sanger, who while pro-birth control had been against abortion. That led Lader to become active in the fight to overturn abortion laws in his home state of New York and to write his 1966 book. The Planned Parenthood Federation of America (PPFA) was formed in 1942.⁵ This website states that PPFA has "ninety-five locally governed affiliates across the U.S." and "more than 850 health care centers."⁶ It also states that more than 90 percent of its clinic services are focused on preventive health care, including pregnancy prevention, and that 77 percent of its clients are at least 20 years old.

From a 21st century point of view, information about the 1960s U.S. governmental consensus on contraception seems incredible: "As a central element of the War on Poverty, President Lyndon Johnson singles out a lack of family planning as one of four critical health problems facing the nation: the U.S. Department of Health, Education, and Welfare creates a program to provide contraceptive services for low-income,

married women. Amendments to the Social Security Act require that at least six percent of the annual appropriations for maternal and child health be earmarked for family planning and that family planning services be provided to public assistance recipients who request them. The U.S. Agency for International Development begins providing contraceptives as an integral part of its overseas development programs."⁷

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During the Johnson and Nixon administrations, funds were provided to low income women to access contraception. According to Critchlow, the bargain that was struck during the early 1960s was that the U.S. Catholic Church would not actively oppose public funding for birth control as long as those programs were voluntary and the Church could still preach against this chemical contraception in its parishes and advocate the rhythm method instead.⁸ Critchlow further states that at that time, the U.S. Catholic hierarchy was mindful of the need to cultivate the American public during the Kennedy presidency and so was amenable to soft-pedaling its stance on contraception. One of the key people who helped broker this compromise was John D. Rockefeller III who founded and funded the Population Council. The Population Council and the Rockefeller Foundation have been the sources of funding for agricultural and chemical research around the world, and the provision of birth control globally and in the United States.

The Population Council was founded in 1952 by John D. Rockefeller III, brother of Nelson Aldrich Rockefeller who served as New York governor from 1959 to 1973, crucially during the time of the abortion liberalization legislation in 1968. Both shared an interest, like Margaret Sanger, in population control and population health. They also had extensive experience in Latin America: Nelson through appointments in the Truman and Eisenhower administrations in the State Department and National Security Council; and John through his Population Council work in funding agriculture and pharma companies such as Procter & Gamble and Upjohn who tested their products there.

The Rockefeller fund supported Planned Parenthood and the Population Council through public appeals to women's

autonomy. On the other hand, as some analyses note, Malthusian thought ran rampant through the Population Council at certain points in its history. Both pro-choice and Malthusian views could end up in the same place, being pro-choice and allowing—largely off the public radar screen—the testing of contraceptives and agricultural products in Latin America and Puerto Rico by Upjohn and Procter & Gamble. Gamble is another family who made money in both chemical products and contraceptives. Its descendants founded the Pathfinder Foundation and have been involved with Planned Parenthood as well; for example, both Richard Gamble (Clarence's son) and his wife Nikki Nichols Gamble have worked with Planned Parenthood of Massachusetts. Critchlow also notes that soon in the 1960s, the Population Council felt too many strictures in providing birth control through the federal government's programs and quickly the PPFA became their major provider. The International Planned Parenthood Federation (IPPF) was founded in Bombay, India in 1952 and at least two other internationally-based companies were formed in the 1960s and 1970s, funded through some combination of Rockefeller, Population Council, and Planned Parenthood money. These companies state on their websites that they exist to provide direct assistance to developing partnerships with private-sector pharma companies in the area of reproductive and sexual health. An early one founded in this manner is the Program for Appropriate Technology in Health (PATH).⁹

The PATH website adds that the company was originally formed as the Program for Introduction and Adaptation of Contraceptive Technology (PIACT), and its first full-scale international project, contracted with the United Nations Population Fund (UNFPA), was in China. The PATH website describes its work as "modernizing contraceptive factories and boosting production to keep up with the country's burgeoning population." At the same time, the organization was branching out into other Asian countries to promote the same type of activity. PIACT became known as PATH in 1980 and it is now active in more than 70 countries, receiving funds from the same types of foundations that support other reproductive-rights research and technologies. Other supporters include the Packard, Hewlett, Ford, MacArthur, Susan Buffett, Doris Duke, Soros, and Gates foundations.¹⁰ The Soros and Buffett foundations have been helpful in replacing monies lost when Republican presidents revoke U.S. Agency for International Development and UNFPA funding. The Gates Foundation has been particularly important in working with the United Nations since the declaration of the U.N. Millennium Development Goals in 2000. Since Bill Gates's wife Melinda is Catholic, the fund does not support any abortion-related activities.¹¹

Another reproductive health foundation is the Concept Foundation, which was involved in helping to secure funding and siting for developing RU-486 in China when no U.S.-based company would license it. The Foundation also helped fund development of Plan B. The Concept Foundation was established in 1989 in Bangkok, Thailand, through funding

from the UNFPA, UNDP, WHO, Population Council, International Planned Parenthood Federation, and the World Bank to "create a mechanism through which WHO's rights associated with an injectable contraceptive could be licensed to potential producers in developing countries."¹² This drug, Cyclofem, is largely based on the Depo-Provera formulary owned by Pfizer with an addition of synthetic estrogen. The Concept Foundation's homepage states its multi-faceted pro-choice activities.¹³

Another group crucial to trying to maintain the pre-1980s expansive reproductive-rights framework is the Guttmacher Institute, named for Dr. Alan Guttmacher, the president of Planned Parenthood in the 1960s and 1970s. The institute was founded in 1968 as the Center for Family Planning Program and Development, to work with the Johnson and then Nixon administrations in delivering publicly-funded contraception. The center was originally formed as a "semi-autonomous division of PPFA."¹⁴

Another important pro-choice advocate at the national and particularly international levels has been the Center for Reproductive Rights (CRR), which changed its name in 2003 after being formed as the Center for Reproductive Law and Policy in 1992. The original group was formed when feminist litigators left the American Civil Liberties Union. The CRR works often in tandem with the Guttmacher Institute, Planned Parenthood, and NARAL. It could best be described as a legal defense fund for reproductive rights, on the national but again especially on the international scale. On its website, the Center states about its mission that it "has used the law to advance reproductive freedom as a fundamental human right that all governments are legally obligated to protect, respect, and fulfill."¹⁵ The Center has litigated and won important cases that, among other things, forced the Bush administration to allow Plan B over-the-counter for those 18 years old and over in 2006, and Latin American governments to enforce their own pro-choice laws.¹⁶

William Saletan uses a helpful schematic on both the pro-choice and pro-life sides. He refers to purist groups as those who would not condone any sort of compromise in their goals. On the pro-choice side, Saletan has characterized NARAL (National Abortion Rights Action League) as being instrumentalist to the exclusion of being purist on the choice issue, where he shows that in three different electoral races, NARAL lined up twice behind the more conservative candidate on abortion because they believed he could win. This happened in their support of Doug Wilder in the 1989 Virginia gubernatorial election and Al Gore versus the more liberal Bill Bradley in the 2000 presidential primaries. According to Saletan, for some odd reason, NARAL stayed out of the 1990 Georgia gubernatorial race where Andrew Young offered a much more liberal position than Zell Miller.¹⁷

Saletan has characterized the pro-life groups based on whether they are predominantly affiliated with the Catholic or Protestant Churches. In the former group, he includes the U.S. Catholic Conference, the National Right to Life Committee, the American Life League (ALL), and Feminists for Life. The more Protestant groups are the Christian Coalition, the Family Research Council (FRC; absorbed into Focus on the Family [FOF] in the late 1990s), Concerned Women for America (CWA), Eagle Forum, and the Traditional Values Coalition.¹⁸ Saletan describes the

SALETAN DESCRIBES THE PURISTS IN BOTH PRO-LIFE AND PRO-CHOICE SIDES AS THOSE WHO ARE NOT AMENABLE TO COMPROMISE, EITHER IN THEIR RHETORIC OR IN SUPPORT OF MIDDLE-GROUND LEGISLATION.

purists in both pro-life and pro-choice sides as those who are not amenable to compromise, either in their rhetoric or in support of middle-ground legislation. In the pro-life coalition, Saletan describes the purists as those who could not sanction anything that would destroy life, typically the Catholic-affiliated groups, while the Protestant ones—more concerned with encouraging procreation inside the family and discouraging it outside those boundaries—might support a measure that the other group feared would promote abortion. Saletan distinguishes these Protestant groups as pro-family rather than pro-life.¹⁹

The fragile bargain that had enabled contraception to be provided without means to pay broke after *Roe v. Wade*.²⁰ As Lawrence Lader, founder of NARAL and ARM, wrote, the entire pro-choice community was surprised

by the sweeping breadth of Supreme Court Justice Harry Blackmun's 1973 decision. Another crucial event happened in 1964, when U.N. Secretary-General U Thant accorded special status to the Vatican as a non-state Permanent Observer member of the governing Economic and Social Council. As Critchlow has noted, the *Roe* decision removed the willingness of the U.S. Catholic Church to remain a silent partner in the expansionist regime. Starting in 1980, under Ronald Reagan, the U.S. Catholics joined their fundamentalist Protestant counterparts in becoming Reagan Democrats.

DOMINANCE OF THE PRO-LIFE COALITION IN THE SECOND POLICY PERIOD AFTER ROE V. WADE

The institutional mechanisms of the second policy period have included the following. The first has involved the election of more social conservative legislators at all levels, and scaling

back pro-choice federal appropriations for Title V of the Social Security Act and Title X of the Public Health Service Act regarding contraception. In the parlance of the historical institutionalists, this strategy has involved drift, whereby fewer women are covered under these systems than before.²¹ It has been noted that "if appropriations had kept up with inflation since FY 1980, the program would be funded at \$840.1 million rather than the FY 2010 funding level of \$317.5 million . . . funding for Title X in constant dollars, taking inflation into account, is 62% lower today than it was 30 years ago."²² Key players among the pro-life groups that have worked on a single-issue basis to undo *Roe v. Wade* have included the National Right to Life Committee (NRLC) and Americans United for Life (AUL).²³ The website of AUL states that it "was incorporated as the first national pro-life organization to counter, through national education, the growing threat of disrespect for human life." By 1975, it had added public-interest law as part of its work.²⁴ That of ALL says that it was "founded by Ms. Judie Brown in 1979 and is the largest grassroots Catholic pro-life education organization in the U.S."²⁵ The NRLC appears to favor working on legislation, while AUL is a litigating group, and the ALL describes itself as an educational organization.

There were two early victories for the NRLC and AUL. The first was that of the 1974 Church Amendment not to force providers to provide services against their consciences. The Guttmacher website notes that "almost every state has a policy explicitly allowing some health care professionals or certain institutions to refuse to provide or participate in abortion, contraceptive or sterilization services." Also, in states without explicit refusal clauses, anti-religious-discrimination laws may protect individual employees.²⁶ This strategy may certainly be considered a success for the pro-life movement in restricting the availability of services to women, as has been its intent.

Another such early policy win was that of the 1976 Hyde Amendment (later adopted by the bulk of the states) not to allow Medicaid funding for abortions except in the cases of rape, incest, or life endangerment. The Guttmacher Institute reports that 32 states follow the federal Hyde framework, and one state, South Dakota apparently in violation of federal law goes beyond it only to allow Medicaid funding in the case of the mother's life endangerment. Similarly, 17 states provide nearly full funding for Medicaid-eligible women, but 14 of them only after a court order was obtained.²⁷ The website of AUL states that it was a central actor in the litigation of the 1980 *Harris v. McRae* Supreme Court decision upholding the Hyde Amendment.

Two other prominent members of the pro-life coalition since the 1970s include CWA and FOF. CWA states that it was galvanized to action in 1978, when founder Beverly LaHaye, wife of televangelist Tim LaHaye, was watching Betty Friedan, founder of the National Organization for Women on television. As CWA website states, "realizing that Friedan claimed to speak

for the women of America, Beverly LaHaye was stirred to action. She knew the feminists' anti-God, anti-family rhetoric did not represent her beliefs, nor those of the vast majority of women."²⁸

While CWA was initially engaged with anti-Equal Rights Amendment advocacy, along with Phyllis Schlafly's Eagle Forum, it joined the anti-contraception and anti-abortion fight in the 1980s. CWA appears to be as multi-issue and amorphous as Schlafly's Eagle Forum in that it will move from one issue to the next, where both are described as pro-family, antiabortion, and anticommunist. While CWA was initially headquartered in San Diego, it decided that the greener pastures of the District of Columbia were a better move in 1985. In 1988, another activity of the group was that the Escuela de la Libertad (School of Liberty) was built and sponsored by CWA in the jungle of Costa Rica for Nicaraguan refugee children. Meanwhile, CWA's open-air medical clinics at the school offered physical, emotional, and spiritual assistance.²⁹

In 1991, CWA became interested in the RU-486 project, becoming active with the NRLC in meeting "with European companies engaged in the production of RU-486." CWA was one of the few pro-life groups to voice public disagreement with Texas Governor Rick Perry's 2007 Gardasil mandate. In the 1990s, CWA was mindful of increasing its public profile and weighed in against stem-cell research and Plan B.

The histories of the FRC and FOF are discussed together since they tried to work as one organization from 1988 to 1992. FOF was first on the radar screen, according to its website, when Dr. James Dobson began broadcasting his family-based radio show in 1977. Like the LaHayes, Dobson began his organization in California (Arcadia), later moving to Colorado Springs, Colorado, its present day home.³⁰ In 1980, while the LaHayes were holding an alternative conference to the White House Family Conference as the co-chairs designated by the National Pro-Family Coalition, Dobson was invited to participate in the 1980 White House Conference on Families, according to his organization's website. The competition for policy space inside the pro-life/pro-family movement has been keen since the 1970s. In another development related to the expansion of one's territory, FOF had an office in Canada as early as 1984; it set up another lobbying office in Ottawa, the capital, in 2006 at the time of the federal election when the Conservatives won a minority government. As with the Rockefeller Foundation and the Population Council, FOF seems to have become one of the nexus points for the pro-life side's money. For example, the network of crisis pregnancy centers, CARENET and Birthright, mention significant donations from FOF. FOF, like many other groups in the pro-choice and pro-life constellations, has been putting up its recent federal tax returns on its website. The numbers show that it is in a similar realm to PPFA. While PPFA showed \$89 million in assets in 2007, FOF listed \$96 million.³¹

The FRC was founded under the following circumstances. According to its website, www.frc.org,

After attending a research planning meeting for President Carter's 1980 White House Conference on Families, Dr. James Dobson met and prayed with a group of eight Christian leaders at a Washington hotel. From that beginning resolve was formed to establish the Family Research Council, and one of those present that night, Gerald P. Regier, became our first president. FRC's immediate goal was to counter the credentialed voices arrayed against life and family with equally capable men and women of faith.³²

By 1988, the FRC had joined FOF and was then headed by Gary Bauer, domestic policy advisor to President Reagan and former undersecretary of education.³³ The marriage between FOF and the FRC was short-lived, when FRC broke away to have its own board and director. It set up its own building, funded by the Prince and DeVos families of Michigan. Erik Prince, heir to the family fortune, has worked at both FRC and FOF. His sister is married into the DeVos family, and his mother, Elsa, has also sat on both FRC and FOF boards. He is a major donor to conservative, pro-life members of Congress, including former Representative and now Senator (and MD) Tom Coburn. Coburn was one of the House leaders in the fight against RU-486 importation and one of the initiators of the Title V Social Security Act amendment in 1996, authorizing funding for abstinence-only education programs, including anti-choice crisis pregnancy centres.³⁴ Prince is probably most famous for being the founder and CEO of the mercenary security firm, Blackwater Worldwide. The DeVos family, like the Van Andel one, is one of the controlling interests in Amway. The FRC website says that in addition to the D.C. office, a distribution centre was founded in Holland, Michigan. That area is in social conservative territory, with a strong following in the Calvinist Dutch Reform Church, claiming members of the DeVos, VanAndel, and Prince families. One wonders exactly what is being distributed at the distribution centre; the FRC website is silent on that. Other foundations that have been identified as strong supporters of the New Right include those of Mellon, DeMoss, Bradley, Scaife, Kirby, Earhart, Hume, Castle Rock, Coors, and Smith Richardson, among others.³⁵ If one were to visit the Heritage Foundation in Washington, D.C., one would find the names of the Scaife and Coors foundations emblazoned in an archway over the door.³⁶

Other active groups in the pro-life coalition groups are Physicians for Life, Nurses for Life, and Pharmacists for Life. The website of the former states, interestingly, that its Canadian side was formed in 1975 (much earlier than the United States), with the U.S. group starting in 1986 as an Alabama chapter and the national organization starting at an unspecified date thereafter.³⁷ Pharmacists for Life International (PFLI) states on its website that it was founded in 1984 in Ohio. It also states: "PFLI is a worldwide apostolate of thousands of pharmacists, plus hundreds of other health professionals, pharmacy students, interns, pharmacy technicians, and the public, in the USA, Canada and worldwide. We are represented on all of the

continents except Antarctica, with active regional coordinators in many states and nations.³⁸

The groups Physicians for Life, Nurses for Life, and Pharmacists for Life participate in blocking women's access to services at the provision point. In most cases, they violate statutory or constitutional law that has established women's rights to access this type of care. In Canada, the same landscape holds true except that the hospitals and clinics, not the provinces, are the levels at which the refusal policies are adopted and implemented.³⁹ While Physicians for Life and Nurses for Life are often found in Catholic-owned hospitals, which comprise 12 percent each of the U.S. and Canadian landscapes, their members can claim exemption from providing services in any public or private hospital subject to the policy.⁴⁰ A significant problem in both the United States and Canada is that virtually no accountability mechanisms are in place to stop the manipulation of these policies by anti-choice providers. For example, doctors and nurses will routinely not pass on the names of pro-choice providers or clinics as most conscience clauses require. Other frontline violators of women's rights include those answering the telephones at clinics or hospitals who falsely claim ignorance of a venue's pro-choice policy or incorrectly describe it as anti-choice only.⁴¹ For many years, pharmacists in the United States and Canada violated the alternative embedded in the conscience clause policy that was to inform clients where or when a pro-choice pharmacist would be available. The pharmacy issue has been onerous with regard to Plan B in both the United States and Canada.⁴²

A seemingly contradictory strategy has been pursued by the New Right since the 1980s. The first has been to pay strong attention to building an infrastructure at the state level. This structure includes a web of mini-Heritage Foundations and mini-FRCs, to solidify the policy presence of the right.⁴³ This infrastructure has come in particularly handy as state legislators have crafted conservative legislation and conservative lawyers have contested against pro-choice laws in the states. On the other hand, the federal level has also been targeted by the New Right, and in particular, the Department of Health and Human Services (HHS) due to its presence in administering the bulk of family-related program money in the United States.

In terms of establishing the state-level think-tank networks, a key player is said to be Don Eberly of Pennsylvania, a cofounder with Wade Horn of the National Fatherhood Initiative in 1994.⁴⁴ According to Clarkson, the goals behind the conservative think-tank infrastructure built have been not only to act as liaisons and funders to candidates but also to state Republican parties as strategists and mentors, to "take the Reagan revolution to the states," and to groom federal candidates.⁴⁵ Clarkson notes that the mini-Heritage idea was broached at a 1986 conference at the Madison Hotel in Washington, D.C., and the idea for the network was originally to call it the Madison Group. In 1992, it was renamed the State Policy Network (SPN) and in 1999 was said to have 37 organizations in 30 different states. This

network represents mainly financial conservative interests.⁴⁶ Social conservative interests are represented through the network of family policy councils, started in 1988 under James Dobson and FOF.⁴⁷ In 1999, there were 34 of these state-based groups. Dobson also funded the Promise Keepers, the report stated. The family policy councils usually work more on social issues, but at times will combine with SPNs to reach more voters or legislators, based on the target.

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As conservative farm teams at the state levels, the two networks hire former Congressional aides and also former employees have been elected as governors and state legislators.⁴⁸ As with the groups Physicians for Life et al., concerted attention has been paid to enacting robust networks to change policy on the front lines, whether it be in a hospital or in a state legislature.

The federal level of social conservative strategies was continued from the Hatch and Hyde Amendments of the 1970s into the 1980s. Social conservatives in Congress quickly started to challenge public funding for contraception. As noted by Alesha Doan and Jean Williams, the beginning of abstinence-based education in 1980 by Senators Jeremiah Denton and Orrin Hatch was "expressly for the purpose of diverting (federal) money that would otherwise go to Planned Parenthood to groups with traditional values."⁴⁹ Specifically, the Adolescent Family Life Act (AFLA) was added as Title XX of the Public Health Service Act, to counteract Title X that had

been added in 1970 to publicly fund contraception. AFLA also set up the Office of Adolescent Pregnancy Prevention within the newly created HHS. According to Rebekah Saul of the Guttmacher Institute, AFLA was intended to stop mainly teenage sexual activity and to encourage adoption over abortion.⁵⁰ The program devoted two-thirds of its funding to the care of pregnant teenagers and one-third of the funding to prevention efforts. These percentages were reversed in the 1996 welfare reform legislation, the Personal Responsibility and Opportunity Work Reconciliation Act. Another part of the legislation predating the Reagan administration's 1984 Mexico City policy was to refuse to provide any funding for groups (such as IPPF) advocating abortion.

Social conservatives were even bolder after the second major step of the rolling Republican realignment in 1994 with the historic win of both houses of Congress, a majority of the nation's governorships (giving Republicans large amounts of state-level veto power), and the rise of Speaker Newt Gingrich. The House in particular turned sharply to the right, with many more social conservatives, including the speaker, in leadership and the rank and file. The next iteration of abstinence-based programming was much broader in scope and implementation powers than AFLA had been. It was passed in the same manner as AFLA, as an amendment to the fiscal year 1997 budget reconciliation process by Speaker Gingrich. The speaker's action was taken at the behest of two conservative Oklahoma members, Representatives Tom Coburn and Ernest Istook.⁵¹

As noted by Saul, and by Doan and Williams, the 1996 legislation was intended to discourage promiscuity (sex outside marriage), irrespective of a woman's age. It also awarded \$250 million for five years to the program, administered through the Maternal and Child Health Bureau, established as part of Title V of the Social Security Act of 1935. In 1981, Title V had been changed to a block-grant program, and the abstinence-based only provision was Section 510 of Title V.⁵² In 1991, the Administration on Children, Youth and Families (ACYF) was created by President George H. W. Bush. Recipients of Title V funding could only promote abstinence and marriage but not contraception. A prominent actor in the conversion mechanism of ACYF was Wade Horn, head of the conservative Fatherhood Initiative, commissioner of the ACYF, and chief of the Children's Bureau at HHS during the George H. W. Bush presidency, from 1989 to 1993. From 2001 to 2007, Horn served as assistant secretary of the ACYF for President George W. Bush and as assistant secretary for Community Initiatives in HHS as well. At least one of his actions in converting the ACYF and Title V involved giving \$12 million to his former organization, the National Fatherhood Initiative, in a no-bid, five-year contract. Horn was identified as George W. Bush's point man on abstinence-based funding, welfare reform (Personal Responsibility and Work Opportunity Reconciliation Act), and Head Start.⁵³

CONCLUSION

Most elements of institutional theory, historical and discursive, have been shown to be applicable in this paper. First, clear discursive shifts from the first policy punctuation to the second are evident. While the passage of Title X in 1970 was not directly tied to a massive lobbying effort on the part of women, it is clear that *Roe v. Wade* was the outcome of lobbying by doctors, lawyers, and women who wanted a new framework on abortion policy. Thus, the discursive framework of the first policy period was shared by explicitly feminist groups such as NARAL and also the older demography-related groups such as the Rockefeller Foundation. The discursive framework of the second policy period was reminiscent of the Comstock era, in which anti-choice organizations hewed to a traditional view of

the family and of women's roles in it. Pro-choice organizations worked hard to counter this view through the use of public discourse, but by 1980 the state institutions had become more representative of conservative viewpoints than liberal ones. During the Clinton administrations of 1992–2000, pro-choice organizations worked to layer in feminist understandings of women's reproductive autonomy, especially around the issues of medical abortion, emergency contraception, and abstinence-based education. The layering concept of historical institutionalism is helpful in this regard because while the Clinton administration ultimately was helpful with the combination of emergency contraception and RU-486, it was less so with regard to Plan B. President Clinton also supported welfare reform and thus did not work to counteract the massive abstinence-based groundwork laid by members of Congress, which became a super-structure during the George W. Bush presidencies.

While the changes found in the first policy system were embedded in the health policy network through layering onto existing ones, those of the second policy system were clearly due to outright conversion from progressive understandings of women's roles to conservative ones. The conversion of funding mechanisms for contraception also involved policy drift since fewer women needing access to contraceptive and abortion services were eligible to receive public funding.⁵⁴ Other examples of conversion involved passage of Title XX of the Public Health Service Act to counteract Title X and the conversion of Title V of the Social Security Act of 1935 to conservative ends.

While feminist and pro-choice organizations had flourished nationally in the 1970s, the cusp of the policy punctuation on women's reproductive rights, they were consistently put in a reactive position in the 1980s and sometimes in the 1990s. This location was in part due to the conservative movement's success in establishing a wide-ranging network at the state level to constantly challenge previous laws and implement new anti-choice ones.

Note: Update on Plan B

It may be stated that without the Center for Reproductive Rights and federal U.S. District Court Judge Edward Korman of New York, women in the U.S. probably would not have over-the-counter (OTC) access to Plan B (the morning-after pill). In 2005, the CRR first sued the George W. Bush administration for violating its own timelines to address its overturning of the previous positive FDA recommendation for Plan B OTC. In 2006, the FDA approved Plan B for over-the-counter access only for women 18 and over. In 2009, the CRR successfully sued (and had the decision heard by Judge Korman) to lower the OTC age to 17. In 2011, Health and Human Services Secretary Kathleen Sebelius ruled against the Teva company's application to lower the age of over-the-counter access. In 2013, the third iteration of CRR-Judge Korman interaction

appeared to have been the charm when Judge Korman ruled that there should be no prescription-only status on Plan B for women of reproductive age. In April 2013, the FDA, under Dr. Hamburg, ruled that the prescription-only access age would be lowered to women under 15. The U.S. Justice Department has a pending appearance before Judge Korman as of May 2013.

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