Seizing the Means of Reproduction: An Illegal Feminist Abortion Collective—How and Why it Worked

Pauline B. Bart
University of Illinois at Chicago

ABSTRACT: This paper describes an illegal feminist abortion collective [the Service] through whose efforts 11,000 abortions were performed between 1969 and 1973 when abortion was legalized. An analysis of interviews from 32 members of this lay group indicates how and why the collective was so effective in providing what is usually a physician-controlled medical procedure. After describing the structure of the organization and the process by which women obtained the abortion, including pre-abortion counseling and post-abortion follow-up, two sets of reasons for the collective's effectiveness are presented. The first five reasons derive from the interview themselves; they deal with the organization's social and historical context, its illegality, its charismatic leaders, its member satisfaction and its financial self-sufficiency. The next nine reasons deal with factors that make the Service a relatively typical democratic collective organization. The most important of these factors is its lack of concern for organizational survival per se. This account supports the Rothschild-Whitt model for collective democratic organizations. It also suggests that counseling is important both for the providers and for the receivers of abortions.

The unique female capacity for reproduction has always been regulated. In no society and in no era have all women had control of their reproductive capacity, been free to have children or not, to contracept or not, to abort or not. Yet, everywhere and in all times, women have attempted, with varying degrees of success, to obtain such control. The history of abortion furnishes us with one dramatic example of this basic social control of women.

Jane, or, the Service began in 1969 as an abortion counseling and referral service, a work group of the Chicago Women's Liberation Union. Some of these women went on to do more than counsel and refer—they

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assisted the illegal abortionists. By the winter of 1971 they took over
the entire process themselves. They decided to provide abortions for any
woman, at any stage of her pregnancy, with or without funds.

This paper examines how and why this particular group was effec-
tive in meeting its goals. The answer lies, in part, in the nature of al-
ternative institutions (Zald & Ash, 1964; Rothschild-Whitt, 1976, 1979;
Lindenfeld & Rothschild-Whitt, 1982) in contrast to bureaucratic organi-

Method

Who Was Interviewed?

To study Jane, I interviewed 32 women: all the counselors who could
be located plus all the women who did a task in addition to counseling
(except two who moved out of the area and were not abortionists). I in-
cluded in the sample women who had relocated to California; Washing-
ton, DC; Massachusetts and Nebraska.

Originally the women I approached did not wish to be interviewed,
because they were antiprofessional and antiacademic. However, when
it became clear that I had been a feminist activist in Chicago and did
not have a "professional" demeanor (a negative word in the Women's
Health Movement), they agreed. Since I did not have a grant, they
decided I had not been co-opted and could be trusted. Some women even
requested interviews, and everyone who was asked, including women
originally reluctant, ultimately was interviewed.

It was not possible to interview the women who obtained abortions
unless they spontaneously spoke to me because Jane women had burned
most of the records. There are conflicting stories about why this was
done. When a group of records was found by some Jane women during
this research, the majority of those asked decided that I could not have
access so as to protect client confidentiality.

The Interview

The first interviews were unstructured. Later, I developed a focused sched-
ule grounded in the responses I had received and issues which emerged,
particularly issues on which there was disagreement (e.g., whether the
Service was "really" a collective). The interviews lasted from forty-five
minutes to two hours with a return visit to some of the key women.
Almost all interviews were conducted at the women's homes, furnishing additional data on their interactive styles with me, with their own and neighborhood children, with neighbors and with other household members. Some women prepared lunch or dinner for me if the interview was at midday or in the evening. Unfortunately, when I mentioned to one of the women that "Jane women are always feeding me," she told the others—thus their feeding was no longer data on their nurturance—it was a self-fulfilling prophecy.

Women who had been interviewed earlier in the study were reinterviewed so I could ask them the added questions. Moreover, I discussed with some of the women questions raised by colleagues. I circulated drafts of papers on Jane among some of the members and included their comments and criticisms. I had promised them input into the study as part of the arrangement when they agreed to be studied. The applicability of the various dimensions of the Rothschild-Whitt model was also discussed and agreed upon by two key members of the Service. The coding categories for the interviews, like the questions themselves, emerged inductively.

Who were the subjects and how did they evaluate their experiences with Jane?

The interviewees reported that when the Service started, the clients were mainly middle-class students, but once abortion became legal in other states, middle-class women went to those states. Since Jane would not turn anyone away for lack of funds, their clientele became "mainly poor Black women from the projects." However, women receiving abortions through Jane ranged from policewomen to Weatherwomen.

Several Jane members had abortions through the Service, both before they joined and during their tenure. With one exception, they were satisfied with the procedure. Three women (two of whom were not Jane members) disclosed they had had abortions through Jane and through legal channels, and that they preferred Jane. One of these women approached me after I had spoken about Jane at a meeting, said that she was glad the story of the Service was being publicized, and agreed to be interviewed. There were no discrepancies between her account and the interview data from Jane members.

This woman's gynecologist recommended Jane after telling her he would not perform the abortion she wanted. He told her that the women "were together and knew what they were doing." She had group counseling, which was not a "probing kind of interview," and noted that she was treated like an adult. Because of the counseling session and her
Obtaining an abortion through Jane: how woman-controlled abortion worked

Let us now follow a woman through the 10 steps she took to obtain an abortion from Jane.

1. A woman needing an abortion could get Jane's phone number from the Chicago Women's Liberation Union or personal networks or even Chicago police officers. She could call and leave her name and number on a message machine.

2. The messages would be collected every two hours and the call would be returned by a woman assigned to that task, called Callback Jane. She would take a medical history and advise the woman that a counselor would call her.

3. The woman would be assigned to a counselor by the administrator "Big Jane." The counselor had the woman's medical information.

4. The counselor would see the woman either individually or in a group, depending on the counselor's preference. The purpose of counseling was to demystify the abortion process; the woman was told exactly what to expect. In a group the women could offer each other support.

5. The woman would then receive the appointment time, date, and address where she was to go.

6. The woman would go to an apartment called "the Front" with her significant other(s). The Front was set up so that nonmembers would not know where the procedures were taking place. It was described by one woman as "a mob scene" because of all the people there; another said "working the front" was a "very heavy job." Another woman said it was "like being a stewardess with a radical feminist consciousness." Some Jane women took
this opportunity to politicize the women.

7. The women, but not those accompanying them, were taken by a Jane driver to an apartment where the procedure including a pap smear actually occurred.

8. They were returned by car to the Front.

9. In order to prevent complications and to treat any which occurred, the woman would phone her counselor during the following week. If she did not call, the counselor would call her, since it was important for an illegal organization like Jane to avert problems. Protection for "mistakes" available to physicians was not available to them.

10. The process for second trimester abortions varied. Leumbach Paste was inserted when available. Otherwise, the amniotic sac was ruptured or the umbilical cord was cut to induce labor. The woman was told to go to a hospital when labor started. She was given careful instructions on how to manage the hospital so that she would be admitted without the hospital calling the police. She was told her rights and what she did not have to reveal. Since women were "hassled" in spite of that information, a midwifery apartment was established with Jane women who specialized in delivering "long terms." The women aborted in that apartment.

A major logistic problem was disposal of the embryos and fetuses. At night "runs" were made to supermarket disposal bins. Sometimes this task was assumed by men who were friends, lovers or husbands of the Jane women.

Women in the collective also served as assistants, giving shots, inserting speculums and dilating cervixes. All these jobs, except abortionist, developed from the beginning of Jane's history.

Why did it work?

I asked the women why they thought the Service was successful, and later culled from the interview transcripts five reasons which made sense to me and the informants. With the exception of the literature on movement organizations, notably Rothschild-Whitt's (1979) germinal work, sociological theory would not have predicted the success of Jane. Moreover, the history of many similar alternative organizations [e.g. Taylor (1976) and Peterson's (1976) studies of alternative health clinics] furnishes a veritable "trail of tears"—disappointed expectations and/or cooperation.
1. The Social and Historical Context. The most important reason for Jane's effectiveness was the strong, radical and feminist sentiment pervasive in 1969 when the Service was initiated. Police brutality vis-à-vis antiwar protestors at the Democratic Convention the year before had radicalized the liberal and radical communities, leaving them angry and disenchanted with existing institutions. Moreover, the sixties was a time of change. People were involved in political change, in changing what came to be called their lifestyles, and in seeking new experiences. (One Jane woman specifically argued that the Service would not have been possible during another time.) It was in this climate that the Women's Movement began to attain momentum in Chicago.

The first national Women's Liberation meeting was held in Chicago in November, 1967. While many of the Jane women were not initially feminists and some were not "political," they wanted to do something for and with women. Such opportunities were limited at the time. Since this was their first feminist activity, it was fueled by an enormous amount of energy, faith and hope, as well as anger towards men and patriarchal institutions. One woman said "This was our issue. It wasn't our men's and it wasn't our kids' schools. It was ours and the energy was terrific."

In this first phase of feminist activity no one had been "burnt out" and no one questioned sisterhood. Disillusionment over differences, conflicts, and "betrayals" had not yet appeared. Thus, the women were able to devote an enormous amount of energy to Jane.

The . . . rage was hard to deal with but it led to the making of a tremendous commitment of time and energy. It was just something that clicked because you were working with your friends and you were recruited by friendship, so there was a tremendous commitment to each other as well as to the issues and to the clients.

2. The Charisma of the Leaders. The interviews revealed general agreement on who the leaders were and that they were effective. As one member said in response to the question of why the Service worked: "One of the things was that the four leaders that I named were really quite incredible people; they deserve a hell of a lot of credit." Another said: "It worked because it had a lot of strong personalities and they were the driving force . . . ." A third woman referred to the "inner core" as "zealots."

Not everyone liked these "sociometric stars." Some called them "manipulative." The first Jane abortionist was perceived as a very
strong, talented and competent women whose only flaw was being too
conscientious. She was said to feel responsible for every woman unwill-
ingly pregnant in the entire geographic area.

Of the 32 women interviewed, 14 were students at the University of
Chicago, nine were housewives and eight were professionals (one occu-
pation could not be ascertained). The original members were primarily
housewives supported by their husbands and with enough free time to
organize the Service before there was enough surplus money to pay
them. Babysitting was performed by some childless members and also
was shared. When Jane women took over the Service from the profes-
sional abortionists and created paying jobs, it allowed the participation
of more women who were young, single and radical and who could de-
vote time to the Service only if they were paid.

The presence of so many housewives was also a function of the partic-
ular historical era. Most of those women would today be in paid em-
ployment or in school. In fact, currently only one of the women previously
in Jane is a housewife; while 15 are professionals. Ironically, Jane's suc-
cess may depend, in part, on the same resource that was responsible
for the success of so many other volunteer organizations in the United
States—women's unpaid labor.

3. The Illegality. Although some "energy" was lost due to what
women called paranoia about being infiltrated by the police or other
groups who might be hostile to their goals, engaging in illegal activi-
ties made the group cohesive in the face of a common enemy. More im-
portant, the illegality of voluntarily terminating a pregnancy convinced
Jane members that it was absolutely necessary to perform abortions. If
Jane did not perform abortions, the pregnant woman had no satisfactory
alternatives. Options were either dangerous or unavailable. One charis-
matic leader believed that the illegality was "the crux of it—the fact
that it was illegal made it override all the other political discrepancies—
swep all of us together."

Jane members followed the tradition of civil disobedience to unjust
laws which they had learned through participation in the civil rights
and peace movements. Although no one with whom I spoke had any
moral problem violating abortion laws, an interesting array of attitudes
towards illegality existed: some women were frightened, some ignored
it, and some liked the danger. A few women, however, had to leave the
collective because their husbands believed their own jobs would be
jeopardized by their wives' participation in an illegal group.

In addition to having vocabularies of motive to justify illegal activity,
the big step towards their dealing with and understanding the illegal-
ity of what they were doing was learning that the abortionists were not
physicians. After that knowledge had been obtained and accepted, following a great deal of discussion at their meetings, it was only a small step to doing it themselves. After all, if being an M.D. was not a prerequisite for doing good abortions, why couldn’t the women perform them?

Because the group was illegal, it was cohesive and efficient, according to the women. No time was spent in what they termed hassling with the licensing agencies or maintaining bureaucratic forms. When some of the women subsequently organized a legal women’s health center, they found bureaucratic restrictions to be constraining.

In 1973 police raided the place where Jane had performed the abortions that day. The police were tipped off by the sister-in-law of a woman getting an abortion. The captain was new and did not understand that there was an understanding not to disturb Jane. Seven Jane women were arrested and spent the night in jail until they were bailed out. Their lawyer informed them that the police had not previously intervened since Jane provided a necessary service for policemen’s wives, mistresses and daughters and for policewomen. (When a policewoman approached the Service for a needed abortion, there was some trepidation.) Further, unlike other illegal abortionists, Jane did not leave bleeding bodies in motels for the police to deal with. When charges were dropped against the seven who were arrested, the women believed that Chicago’s desire to avoid another political trial shortly after the Chicago Eight conspiracy trial was responsible. Whatever the reason, the laissez-faire policy of the police exemplifies the discretion of officials in the criminal justice system. Indeed the willingness of the police to ignore Jane’s illegal activities may be yet another reason why Jane worked. [Neither the interviewees nor Joyce Rothschild-Whitt mentions this factor. The women did not know the police policy, and all the groups Rothschild-Whitt studied were legal.]

Illegality is a difficult and dangerous context to duplicate, but one aspect of illegality can be consciously promoted in almost any organization: the salience of an external enemy. The more concrete, bounded, easily symbolized and evil (within the moral context of the group) the enemy, the better it will serve to promote cohesion within the group. The Sanctuary Movement hiding undocumented refugees from Central America meets this criterion of illegality. The dangers of distorting the reality of the enemy for purposes of promoting group solidarity may result in (1) incorrect strategies for dealing with the enemy, and (2) disaffection among participants who perceive the distortions as distortions.

4. The Satisfaction of the Participants. The perceived importance of and satisfaction derived from enabling women to have abortions sustained the commitment necessary to perform the tasks. Satisfaction, in
turn, is related to the necessity and utility of the work, due to the illegality of abortions. In contrast to other groups of people with equal good will, members of this group could actually solve problems—the women would walk in pregnant and leave no longer pregnant. All the members agreed on the importance of offering this solution. One woman stated "There's nothing so compelling and thus so concrete—that you get such goodies from—that's so real." Another women said:

... whenever there were personal problems or political disagreements they were always subordinated to the job at hand, because abortion was not something one could have political disagreements about ... No matter how much people had different politics in their work, middle-class housewives who were members of NOW and women who were radical hippie freaks, dopers, women from the Union [the Chicago Women's Liberation Union—socialist feminists] and who knows what else. There were students and nonstudents ... But it could never matter because ultimately you had to do the abortion. You can argue a real lot about demonstrations, you can argue a lot about posters, you can argue a real lot about canvassing, you can argue a real lot about what you're writing in your leaflets, but you can't argue about doing an abortion. You're going to do it or you're not and if you're going to then you do it.

Indeed some women mentioned that it was the very absence of a "correct political line" except on a woman's right to have an abortion that enabled the group to survive and continue to be effective.

The quality of satisfaction deriving from Jane's unique ability to solve the woman's problem is rarely obtainable in other organizations and prevented the dissolution of the organization. In contrast, a worker in a woman's clinic said: "basically, women can get their pap smears somewhere else and maybe it's not so nice on some fundamental level ... but that's all." In contrast, a worker on a woman's hotline stated that there was little she could do for the battered women who called since at that time Chicago had no battered women's shelters. Discrepancy between ideal goals and real contributions leads to worker "burn out" in many organizations, forcing high expenditure of organizational resources on the recruiting and training of new members. Burn out was also a problem for women on rape crisis lines who could neither stop rape nor change the woman to an unraped status as Jane could change women to an unpregnant status. Rape counselors could only ameliorate pain and offer alternatives of varying degrees of unsatisfactoriness. An organization that can define a concrete problem and solve the problem offers members great satisfaction which, in turn, sustains the organization.

5. Financial Self-sufficiency. Another reason for the Service's success is that the collective supported itself and could pay salaries. Although
no one was turned away for lack of funds, the average fee received was fifty dollars. While it was norm-violating for workers to be involved simply for pay, the fact that women could be paid enabled a group of women to put much time into the Service who otherwise would have had to work at what they termed "shit jobs." By earning money in productive feminist work they were able to lead totally radical feminist lives. In a movement where one tenet was "The personal is the political," that is, one's private life is relevant to one's public statements in analyzing one's behavior and achieving one's goals, the lack of contradictions in one's life was particularly valued. Financial self-sufficiency also ended the contradictions some women felt when supported by their husbands. Moreover, no energy was required for fund-raising or for grant-writing.

Financial self-sufficiency based on client payment has rarely been adopted as a goal by alternative organizations. Such a system smacks too much of the capitalist forms of organization these organizations are trying to escape. Alternative helping organizations traditionally have preferred to dispense free services free and rely entirely on voluntary labor and donations. Only when they come close to collapse, do they consider a fee scale based on the client's ability to pay. In this sense, Jane was fortunate in having to pay private abortionists at first and having to charge a small fee for that purpose. Since most clients could afford the fee, Jane workers could retain the fee in good conscience after eliminating the private practitioners.

These five reasons sum up those suggested to me in the interviews. Unfortunately, the social and historical context of organizational success is rarely, if ever, under an organization's control. Nevertheless, an organization must pay attention to its own placement in the historical context of political feeling. In addition, a subsequent organization formed the same way and doing the same thing may fail while the first succeeded because the participants will lack the enthusiasm and excitement of being "first."

Organizational theory

Jane displayed most of the characteristics of a collective organization as delineated by Rothschild-Whitt's (1979) theory of alternative organizations.

1. The Goal of Providing Safe, Humane Abortions for Every Woman who Needed One Was Not Diluted by a Concern for Organizational Survival. Classic organization theorists such as Michels (1949) and Weber (1968) claim that organizations usually come to see their own survival as their major goal. Thus, what was originally a means (the organiza-
tion) becomes transformed into an end in itself. After their original goal is met, agencies and organizations survive by redefining their tasks (i.e., goal displacement). For example, the March of Dimes took as its cause the conquering of birth defects once a vaccine for polio was available (discussed in Heller et al., 1984). Indeed, some organizations have a vested interest in the continued existence or even exacerbation of their "problem" in order to justify and expand their funding. Because Jane was an alternative institution with what Rothschild-Whitt (1976) calls both a transitory and a social movement orientation, it was less likely to experience goal displacement. Rather it disbanded after the Supreme Court decision in *Roe v. Wade* which enabled the collective to decide that the need for legal abortion referral could be met by other groups.

2. Authority Resides in the Collectivity as a Whole. The Jane women, by and large, espoused the philosophy of feminist anarchism and collective decision making. In collective organizations, authority is delegated only temporarily, if at all, and is subject to recall. Individuals comply with the consensus of the collective, which is always fluid and open to negotiation. Jane's commitment to consensus meant that although they sometimes had to spend more time than they would have liked hammering out the lines of their agreement, their eventual agreement allowed them to work smoothly under pressure.

3. Minimal Stipulated Rules. Although Jane members followed strict rules of medical procedure—e.g., if a woman was feverish, she was given an antibiotic—they had few formal rules of collective behavior. Their openness to the ad hoc decision making of each member allowed for (1) flexibility which was crucial in dealing with a varied population in an illegal setting, and (2) a degree of autonomy for each member that helped them maintain their voluntary commitment of time and energy.

4. Social Control through Homogeneity. In collective organizations, social controls are based primarily on personal or moralistic appeals and the selection of homogeneous personnel. Jane's membership was homogeneous: over one-half the women in Jane were between 20 and 30 years old, and all but two were white. Most were born and raised in urban areas, particularly Chicago. When The Service was operating, about one-half of its members were single and one-half married, with two divorced or separated. The ratio of Protestants to Jews was approximately 1:2, and four women were Catholic. The typical Jane worker had postgraduate education and her mother had a high school education. Fathers varied more: Although most had professional education, eleven had high school education or less.
Distressed by their own homogeneity, Jane workers, with only slight success, tried to recruit Black and Latino workers, the ethnic and racial characteristics of large segments of their clients. Although the women claimed ideological diversity, the diversity was within feminist and Left boundaries. They all agreed on the importance of abortion for women who chose it. Although they fought against it, the relative cultural homogeneity of the members of Jane was a blessing in disguise since it provided social cohesion.

5. Social Relations: The Ideal of Community. In the typical collectivist organization, ideal relations are holistic, personal, and ends in themselves. In Jane, women were "sisterly" toward the women obtaining abortions but not always sisterly towards each other. The ideal of sisterhood had two functions: it provided an effective model of interaction and it was a goal toward which the collective could strive. However, unlike the case of the free school Rothschild-Whitt studied that replaced the goal of education with the goal of community, in Jane the search for community never replaced the goal of providing safe, humane abortions. Friendship groups behaved holistically toward each other, but in the organization as a whole, relations were sometimes segmental. Little time was spent "processing" relationships because of the urgency of the task of providing abortions.

6. Recruitment. In collectivist organizations, recruitment relies on friendship, shared social-political values, admired personality attributes, and informally assessed knowledge and skills. Career advancement is not an inducement for joining the organization. The major pathway to Jane membership was through friendship networks. Some women became members after they or their friends had abortions with the Service.

Prospective members attended three meetings where they learned how to counsel first and second-trimester women, the physiology of abortion, and the organizational practices of Jane. How much was disclosed to them varied with what was termed the "paranoia" of the women presenting the information. At first some recruits were not told that the abortionists were not physicians, as implied in a pamphlet given to clients and prospective counselors (The Abortion Counseling Service, no date). When the recruits were later told that the abortionists were not physicians, and/or that the Jane women were performing the procedures themselves, they expressed some resentment at not being trusted.

New recruits were screened to locate women who both favored the availability of abortion and were willing to work illegally. Precautions were taken about disclosure, given the possibility of a hostile undercover policewoman trying to close the clinic. Recruitment procedures
insured a relatively culturally and ideologically homogeneous group that
could work together successfully in a condition of extreme individual
autonomy. They may have also helped to select membership with a high
energy level. Over one-half the informants stated that they had more
energy than the people they knew, while only two said that they had
less; eight said they needed six or fewer hours of sleep per night.

Transmitting Skills

All skills were learned by observing other women and performing
tasks under the supervision of women with greater skill. When the male
abortionist(s) had responsibility for medical procedures, the women in
the Service learned to: deal with doctors and hospitals, talk to the po-
lice, buy drugs and instruments, counsel effectively, and maintain a
democratic, efficient and sisterly organization. After the first 18 months,
the women evolved from counseling and referring to assisting and "fi-
nally, to doing the entire procedure":

We learned to give shots, to take blood pressure, to take and read Pap
smears for cancer. We performed abortions on pregnant 11-year-olds and
on pregnant 50-year-olds.

Skills necessary to perform abortions are not difficult to learn. One
woman said:

The thing itself [the curettage] was real easy. It's like making canteloupe
balls—the same motion with the curette . . . The motions for the curet-
tage themselves are not particularly delicate. They are quick and sure.
The greater precision was in the handling of the dilator. You had to feel
the woman's muscles through the instrument into your hand. That is a
very delicate procedure. So much of what you have to learn is sensitivity
to the woman's body and that is what is unlearned in medical school.

Women also learned by re-examining their own experiences:

We learned from identifying and understanding feelings in our own bod-
ies and then trying to relate them to another woman's problems and
feelings.

They did not use the term "patient"

... because patient is a word that the medical establishment uses. It im-
plies a subject-object relation and we always tried to get away from think-
ing of women who came through the Service as objects we were going to
do something to... we were all partners in the crime of demanding the freedom to control our own bodies and our own childbearing.

Birth control information was offered and all the women received copies of *Our Bodies Our Selves, The Birth Control Handbook* and the *VD Handbook*. However, counseling was considered the heart of the procedure and everyone was supposed to counsel. It was believed that you could tell by the woman's response during the abortion whether or not she had been counseled well. Women learned to counsel as they learned all the skills—primarily through an apprenticeship system in addition to the orientation sessions.

The basic information was the description depending on how many weeks they were. You either do a description of a D&C (i.e. dilation of the cervix and scraping or curettage of the uterus) or a description of the miscarriage (i.e. euphemism for the abortion). In the long-term you had to do both because we had to do the D&C after the miscarriage.

Personal motivations and fears were not probed unless the woman seemed to need to address these issues. One key person said that it was condescending to ask the woman if she was sure she wanted an abortion. She felt it was appropriate to ask if she had told her mother or what would happen if she didn't have the abortion. I asked another counselor how she knew if a woman had abortion-related emotional problems in need of discussion. She responded, "I guess you would have to watch it and it all depended on the woman."

All Jane members counseled, whatever their other tasks, so that their work would be grounded in the woman's experiences. One abortionist did not counsel and this omission was thought to cause her inadequate performance. She was ultimately fired by a group vote.

My informants also stated that dealing with incompetence was a major problem. Emotional intensity often characterizes collective work (Rothschild-Whitt, 1979). Because intense relationships are often emotionally threatening, collective members who fear conflict tend to soften or conceal criticisms. Although this happened frequently in Jane, the importance of the work itself—including the always present possibility of serious harm to the woman who had come to have an abortion—forced the workers to acknowledge incompetence. In this way, Jane was fortunate in having a clear and serious mission that forestalled arguments for maintaining incompetent persons as is done in other collectives.

Jane's informal assessment of knowledge and skills gave a premium to those who knew how to do well that which had to be done. At the time physicians were not trained to perform abortions, although they
did learn how to perform D&C's. Thus their credential was not valued in and of itself. Jane's method of assessing skill probably paid off both in terms of safety and humane procedures.

The following quote from one of the counselors demonstrates the enormous range of learning that Jane workers experienced:

When I joined the feminist movement someone said to me, 'Scratch any woman deep enough and you are going to find a feminist.' And being involved in Jane, especially in the counseling part where one has to talk to many women, and being up in the Front I found that under the skin it didn't matter if you were big or Black or white or green or small or fat or rich or poor. Women had to deal with the same problems and it radicalized me. In that respect, I truly believe this now, I feel that tremendous kinship to women and I find that I seek out women as opposed to men... But the thing that was the most interesting with my husband was that he suddenly gained a better insight into this. Because when we first started, we thought that only poor Black women were going to come and he saw people coming to our house and they were all kinds of people and all ages of people and this to him was radicalizing too... I also learned how my body functioned and that was, to me, one of the best things.

And I think I also learned about how to demand services from the medical profession because I knew about my body. I could now say, 'Hey listen... what's happening, tell me...' and I didn't take any of this 'little' crap stuff that doctors were giving, I wasn't their little girl and I don't know if this was Jane, if this was the feminist movement or being involved in NOW, I don't know. I do know, though, that it changed my whole outlook about myself...

In essence, women learned that they were competent. One woman eloquently captured the essence of the Jane experience and the philosophy of self help:

If it's necessary you can take the tools of the world in your own hands, and all that crap about how you have to be an expert to do anything, whether fixing your car or your vacuum cleaner or administering medical aid is just a ruse to make you feel incompetent in your own life. One thing we all learned is that if you want to learn how to do something, you can do it.

7. Incentive Structure: Normative, Solidarity and Personal Growth Incentives Primary; Material Incentives Secondary. Jane's appeal was to enacting symbolic values, such as a woman's right to control her own body. Moreover, all paying jobs paid the same, and many tasks, including counseling, were not remunerated at all. This characteristic of collective organization helped members focus on the intrinsic reasons they were doing the job, and this, in turn, helped them focus on their clients as individuals.
Because the Service was illegal, no one in Jane could use their experience in the organization to further their careers. All of the members' emotional energy was concentrated on doing the present job correctly. This present-oriented psychology, in turn, made it easier to pay attention to the emotional and physical nuances of each client. This, in turn, enhanced the care.

The individual autonomy and varied work that the organization provided had a major impact on the lives and self-images of the participants. In taking care of others, the Jane women fulfilled their own potential. One woman said, "my participation in the Service grew me into the person I was meant to be" (Cf. Bart and Schlesinger, 1982).

Jane women also reported sharp increases in their feelings of identification with other women. Such positive feelings towards other women was the result in part of participation in a female world, for the women's co-workers and clients were all female (Cf. Smith-Rosenberg, 1975).

8. Social Stratification: Egalitarian. Collective organizations and subordinate groups (e.g. women) prefer equality of members, and strictly limit reward differentials. Jane had a strong commitment to equality. Consistent efforts were made to flatten the decision making and status hierarchies, especially after the paid professional abortionists were no longer present. There was a hierarchy, albeit a relatively flat one. The women who performed medical procedures, particularly the abortionists, were central, unlike those who restricted their activity to counseling. Moreover, women ordinarily assisted before they performed D&C's. One interviewee who had become a medical student, clarified the link between self-growth and equality: "I will share any skill I learn with anyone who wants to learn it. If someone wants to know how to do open heart surgery and I have learned how, I will teach it to them."

9. Differentiation: Minimal Division of Labor. In collective organizations, administration is combined with performance tasks and the usual division between intellectual and manual work is reduced. Rothschild-Whitt found that differentiation is minimized through "role rotation, teamwork, or task sharing, and the diffusion or 'demystification' of specialized knowledge through internal education." In the Service there was an additional attempt to minimize differentiation between the collective members and the clients by having the latter perform tasks during the procedure.

Moreover, collectivist organizations generalize jobs and functions, stressing holistic roles. They demystify expertise and make an ideal of the amateur. In Jane, the goal was to have every member perform every task, with the major consequences for energy and self esteem that
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were mentioned above. Other organizations can reduce specialization, limited only by the differential commitments of members and formal legal requirements. The Service exemplifies Marx's belief that "Only in a community with others has each individual the means of cultivating his [sic] gifts in all directions; only in the community therefore, is personal freedom possible." (1985, p. 83).

Conclusion

Several levels of analysis accounting for Jane's success were presented in this paper. First there were the reasons the Jane members themselves gave. Second there was the sociological conceptual scheme with which I interpreted these reasons (e.g. referring to the leaders as charismatic). Third, there is organizational theory as revised for movement organizations by Rothschild-Whitt. The relevance of this latter approach became apparent after the data had been collected. The members of Jane did not have Rothschild-Whitt's organizational principles in mind when they put their group together. Yet these principles facilitated the effectiveness of the group.

Jane illustrates both the characteristics of a successful movement organization and the possibility of making abortion a less alienating experience for the women having them and for the medical personnel involved. Roth (1974) states that for many years we have been trying to teach professionals to love their patients and have been unsuccessful. He suggests, therefore, that we teach people who already love the patients the necessary professional and technical skills. The effectiveness of Jane demonstrates the perceptiveness of this remark. To use Ehrenreich and English's phrase (1973), these women seized the "technology without buying the ideology"; that is, they used antibiotics and medical equipment but did not adopt the hierarchical system or the sense of entitlement that characterizes physicians. Since abortion has been legalized in this country, some physicians and nurses have expressed guilt over abortions they were performing. No women in Jane expressed such guilt, probably because they all had to counsel women who wanted the abortions and, therefore, knew the importance for the woman's life of not having a baby at that time. Were all personnel engaged in abortion procedures also engaged in counseling, their world would be grounded in the women's experience. The economics of the medical system, of course, make the doctor's time more expensive and valuable than that of the counselor. As a consequence, the tasks are separated which may work to the psychological disadvantage of the doctors themselves in the long run.
When this research was begun, abortion was legal and poor women received third-party payments. Lack of funds could not prevent them from terminating an unwanted pregnancy. Now, however, third-party payments for abortions are almost nonexistent and a strong lobby supporting a "human life" amendment is trying to make abortions illegal again. Perhaps knowledge of the success of Jane will do more than expand the sociology of medicine, the sociology of social movements and organizational theory. Perhaps it will enable us to seize the means of reproduction.

Reference Notes

1. Philosopher K. Parsons (1978), examines the Service as an example of a moral revolution. Using Jane, she demonstrates the bias in traditional objective, "value free" philosophy. Participants in Jane were a subordinate group (women) and, thus, had a different perspective on morality and a stronger commitment to equality.

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