

“Motherhood Protection”

and the

MINNESOTA BIRTH CONTROL LEAGUE

Mary Losure

IN THE MINNESOTA HISTORICAL SOCIETY’S ARCHIVES IS A LOOSE-LEAF NOTEBOOK FROM WOOLWORTH’S WITH MINUTES HANDWRITTEN ON LINED SCHOOLROOM PAPER. IT IS THE MAIN SURVIVING RECORD OF THE MOTHERHOOD PROTECTION LEAGUE, A SMALL, DETERMINED GROUP OF WOMEN IN MINNEAPOLIS WHO LED THE BIRTH-CONTROL MOVEMENT IN MINNESOTA. LATER THE LEAGUE GREW INTO THE MINNESOTA BIRTH CONTROL LEAGUE, THE FORERUNNER OF PLANNED PARENTHOOD OF MINNESOTA.

“MOTHERHOOD PROTECTION” WAS A POLITE NAME FOR A CAUSE THAT WAS UNMENTIONABLE AND NOT ENTIRELY LEGAL WHEN THE LEAGUE FIRST MET IN

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1928. Only 12 years before, the national movement's outspoken leader, Margaret Sanger, had gone to jail for opening a birth-control clinic in an immigrant neighborhood in Brooklyn. Access to contraceptives was restricted under the same laws, more than a half-century old, that governed obscenity. The 1873 Comstock law, named for anti-smut crusader Anthony Comstock, made it illegal to send birth-control information or supplies through the mails or to import any contraceptive device. Many states had similar statutes, known as "little Comstock laws," and Minnesota's made selling, manufacturing, or advertising contraceptives punishable by a \$500 fine, a year in jail, or both. The same penalties applied to anyone who provided information about "when, where, how, of whom . . . such article or medicine can be purchased or obtained."¹

The law in Minnesota and many other states contained one loophole: It allowed doctors to prescribe contraceptives "for the cure or prevention of disease." This meant that women who could afford to visit private physicians sympathetic to the desire to limit family size could obtain contraceptive devices. At the time, the method considered most reliable—and moral—was the pessary, or diaphragm, which required a doctor's fitting and full explanation of use. Poor women had little access to contraceptive information or devices.²

A copy of the Minnesota law that outlawed contraception—with "secretary's copy" written across the top in a small, neat hand—is among the papers of Jean M. Wilcox, a Motherhood Protection League (MPL) member and, later, secretary of the Minnesota Birth Control League. The wife of a University of Minnesota professor, Wilcox was a progressive activist and leader of the Women's International League for Peace and Freedom. Less is known about other league members. President Elizabeth H. Shafer appears in the 1923 *Dual City Blue Book* of the "best families" of the Twin Cities, but she left few other traces in the historical record. In general the min-

utes of the MPL give the impression of a small group of well-to-do women who had moved on from the struggle for suffrage, won in 1920, to work for social reforms. MPL secretary Katherine Sweet wrote in the minutes notebook in 1931, "Women with their strong social sense and keen sympathies are doing missionary work in bringing the good news to those less fortunate. People of advantages in education and wealth are limiting their families. Wouldn't it be fair to pass the word on to the laboring and underprivileged groups?"³

The minutes of MPL meetings from 1930 and 1931 show speakers' topics such as "The Psychology of Motherhood," "Motherhood Protection, a Christian Obligation," and "Intelligent Motherhood." By this time more than 50 birth-control clinics had already opened in 23 cities in a dozen states across the country. In Minnesota MPL members followed reports on national efforts to pass a bill that would allow doctors to circulate contraceptive information through the mail. MPL meetings ended with a musical offering and tea, and the minutes noted the hostesses: "Mrs. H. B. Wilcox presented 'The Progress of the Movement,' and Mrs. E. E. Rood sang a group of songs. . . . The meeting was adjourned to enjoy a delightful social hour," wrote Sweet on September 18, 1930.⁴

Despite its ladylike facade, the Motherhood Protection League was more than a social club. In 1931, for instance, members collected 500 signatures on a petition presented "as an expression of public opinion" to Minnesota's Council of Social Agencies, the powerful planning board for the group of private charities supported by the Community Chest, the forerunner of today's United Way. The petition, which asked the council to consider "means whereby contraceptive information might be given to those women in need of it," was tabled by the board without comment. (Two years before, the league had asked the council to open a birth-control clinic, a request also tabled.)⁵

¹ Linda Gordon, *Woman's Body, Woman's Right: A Social History of Birth Control in America* (New York: Penguin Books, 1983), xv–xvi, 231; David M. Kennedy, *Birth Control in America: The Career of Margaret Sanger* (New Haven: Yale University Press, 1970), 23, 243; *General Statutes of the State of Minnesota*, 1891, sec. 6234, p. 507–8. In 1916 or 1917, Sylvie Thygeson and two other women had briefly operated a small, discrete birth-control clinic in St. Paul; see Sherna Gluck, *From Parlor to Prison—Five American Suffragists Talk About Their Lives* (New York: Farrar, Straus and Giroux, 1976), 50–54.

² *General Statutes*, 1891, sec. 6234, p. 508; Gordon, *Woman's Body, Woman's Right*, 67, 308–9.

³ Minutes, Mar. 19, 1931, Motherhood Protection League and Minnesota Birth Control League notebook (hereafter, league notebook), Jean M. Wilcox Papers, Minnesota Historical Society (MHS), St. Paul.

⁴ Gordon, *Woman's Body, Woman's Right*, 270; Minutes, Sept. 18, Dec. 18, 1930, Mar. 19, 1931, league notebook.

⁵ Minutes, June 10, 1931, league notebook; Board of Directors meeting, minutes, Sept. 30, 1931, box 14, and Coordination Committee meeting, minutes, Feb. 11, 1929, box 21—both Planned Parenthood file, United Way of Minneapolis Collection, Social Welfare History Archives, University of Minnesota, Minneapolis.



League headquarters, second floor of the Walker Building, Hennepin Avenue and Eighth Street

Failing to convince established charities of the need for a clinic, league women took the logical next step: They started one themselves. In the fall of 1931, under a new name, the Minnesota Birth Control League (MBCL) opened a clinic in downtown Minneapolis on the second floor of the Walker Building at Hennepin Avenue and Eighth Street. The clinic was to provide, “under proper medical supervision and by means not contrary to law, the best contraceptive information.” The clinic opened quietly. According to MBCL minutes, “Mrs. [Bernard] Harris asked how much publicity was desired, and it was decided there should be in the press only notices of general meetings.” Furthermore, “The list of people on the advisory board was not to be published and no announcement of the opening of the clinic.”⁶

The clinic began with one physician, Dr. Eleanor J. Hill, a nurse, Florence Leversee, and a secretary, Evelyn Friday. Hill, then in her sixties, had been one of the first women to graduate from the University of Minnesota with a medical degree and was a Minneapolis school physician and head of a prenatal clinic at North East

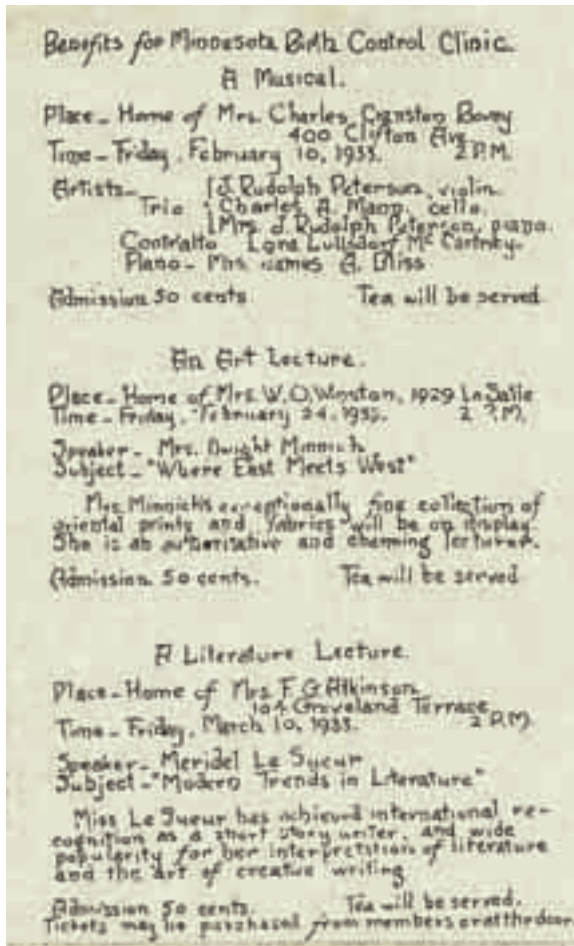
Neighborhood House. Three-quarters of the new birth-control clinic’s patients were referred by social agencies such as the Family Welfare and Infant Welfare Associations; others heard of it by word-of-mouth. Open Tuesday afternoons, Wednesday evenings, and Saturday mornings for a total of eight hours each week, the clinic afforded “not only relief from economic strain but from physical and spiritual strain as well,” summarized a 1932–33 MBCL report.⁷

Most clients were “young mothers who have already borne as many children as their health and income can justify.” They were able to pay no fees or only a small amount. Because of prevailing moral codes, only married women living with their husbands were accepted. Contraception was given to patients “in need of such advice and entitled to it by state law . . . for the prevention and cure of disease.” Records showing purchases of diaphragms and spermicidal jelly strongly suggest that this was the usual method prescribed, probably because many people considered condoms a contraceptive for sinners. Clinic operating expenses for the year were less than \$5,000.⁸

⁶ Minutes, Oct. 6, Nov. 18, Dec. 19, 1931, league notebook; Articles of Incorporation, MBCL, n.d.—both in the Wilcox papers.

⁷ Clinic records, box 20, Planned Parenthood of Minnesota Records, Social Welfare History Archives; *Minneapolis Star and Journal*, Dec. 13, 1946, p. 21; MBCL Clinic and Financial Report, May 1, 1932–May 1, 1933, n.p., Wilcox papers.

⁸ MBCL Clinic and Financial Report, May 1, 1932–May 1, 1933, n.p., Wilcox papers; clinic records, box 20, Planned Parenthood records; Kennedy, *Birth Control*, 211, 222; Gordon, *Woman’s Body, Woman’s Right*, 310. Minutes of a meeting on June 8, 1933, note that “Dr. Hill described the technique taught in the clinic for the benefit of the new members, exhibiting a diaphragm pessary.” Case histories show only one instance of an “extremely dull” patient whose “poor medical and physical handicap” led to prescription of a contraceptive for her husband; 1935 file, Wilcox papers.



Flier announcing benefit musical performance and lectures for the Minneapolis clinic, 1933

Supporting the venture were membership fees paid to the MBCL, donations, and what the board “humorously described as . . . Ladies’ Aid Methods” of fundraising: benefit teas, musicals, bridge games, plays, and concerts. On one occasion, tours of the Salisbury-Satterlee bedding factory netted the league \$46. Members were urged in one 1933 fundraising letter to “do your bit to forward this basic social work” by selling tickets to events “planned to appeal to the major interests of women in their leisure hours—music, art, and literature.”⁹

Surviving MBCL minutes and reports to members make it possible to trace the slow but steady growth of both the national and local birth-control movement. In 1934 minutes note that although the obstetrics and gynecology section of the American Medical Association endorsed the movement, the larger body, “being partly political,” still refused to study the “controversial problem.” In September 1935 the MBCL’s first regular newsletter proudly reported that Minnesota could claim four birth-control clinics: in Minneapolis’s downtown and in the Phyllis Wheatley Settlement House, in Rochester, and in St. Paul. Women in Iowa and South Dakota also organized state leagues at this time, partly through the efforts of Ruth Houlton, former executive secretary of the MBCL and fieldworker for a national organization. By mid-1935 the number of contraceptive centers across the country had grown “spectacularly” to more than 200. That winter, women in Duluth, Hibbing, and Bagley opened what were now called “maternal health centers,” in part through the efforts of the state fieldworker. By fall 1936, for the first time, one unnamed county authorized medical funds to cover birth-control supplies for dependent patients, and a record average of 350 patients were visiting the Minneapolis clinic monthly.¹⁰

As the movement grew, it attracted the support of socially prominent women such as Eleanor Lawler Pillsbury, wife of Pillsbury Company board chairman John S. Pillsbury, Nelle Pendleton Pillsbury, wife of their son Charles S. Pillsbury, and Elizabeth Bradley Heffelfinger, wife of Frank Peavey Heffelfinger of Minneapolis’s Peavey grain firm. Members of politically and economically powerful families, these women were strong civic and cultural leaders in their own right. Elizabeth Heffelfinger, for example, later became a Republican Party national committeewoman, the state’s first female grand-jury foreman, and a delegate to the United Nations. The prominence of these leaders helped the highly controversial movement withstand strong pressure from opponents, especially religious leaders. Rosalie Heffelfinger Hall recalls that her mother “made a lot of enemies—it

⁹ Secretary’s report, MBCL annual meeting, 1933, and minutes, Dec. 13, 1933, league notebook—both Wilcox papers.

¹⁰ MBCL minutes, Feb. 16, 1934, and MBCL newsletter, Sept. 10, 1935, Apr. 1, 1936—all Wilcox papers; letter to members, Nov. 30, 1936, MBCL file, Social Agencies Collection, Minneapolis Public Library. Doctors staffing the Minneapolis office in this period included Catherine McGregor, Elisabeth Merrill, Eva Shaperman, Marjorie Wulff, Ann Arnold, Marian Grimes, Milton Abramson, Nora Winther, and Ruth Nystrom, while Dr. Hill also volunteered at a branch clinic at Phyllis Wheatley, which primarily served African-American women. In Rochester’s city hall, Dr. Edith Hewitt served as physician beginning in February 1935. St. Paul’s facility opened April 17, 1935, in the Hamm Building, with the volunteer medical support of doctors including E. C. Hartley, James J. Swendson, M. Norman Moss, and Roger S. Countryman.

didn't seem to bother her. She knew what she stood for."¹¹

Throughout most of the 1930s the MBCL's president was Dorothy B. Atkinson, the aristocratic daughter of the president of Hamline University and wife of a Washburn-Crosby milling-company executive. The Atkinsons lived in a 40-room mansion on five acres atop Lowry Hill overlooking downtown Minneapolis. A Wellesley College graduate and trustee and a national officer in the American Association of University Women, Atkinson helped establish college fellowships for women and campaigned to build the Minneapolis Public Library.¹²

In her daughter Mary's memoir, Dorothy emerges as a strong-willed, somewhat remote figure. The extent of her power and influence is illustrated by an incident preserved in her family papers. In 1936, on a trip to Poland as a delegate at the International Conference of University Women, she was detained at the border for unwittingly violating currency regulations. She was freed after U.S. Secretary of State Cordell Hull sent a personal telegraph on her behalf. The *New York Times* ran articles on the case, noting that "Mrs. Atkinson said she had declined to eat food provided by the jail during her two days imprisonment and had lived on chocolate."¹³

Leaders such as Atkinson and Heffelfinger were strong, outspoken women, sometimes autocratic but passionately devoted to the movement. "We thoroughly believe in our cause. We cannot fail," Atkinson once wrote to the members. Her sister-in-law Betty Bridgman remembers, "She took a

lot of abuse, much of it anonymous, over the telephone. . . . She was a very strong person; she just couldn't have stayed in that cause if she weren't."¹⁴

"I have vivid and fond memories of Mrs. Atkinson," John Cowles, son of MBCL board member Betty Cowles, recalled. His mother and Atkinson "were good friends. She was maybe five or ten years older than my mother, a big noisy woman who tended to speak her mind, which my mother liked a lot. She was even more outspoken than my mother." Cowles also recalled that his mother maintained her membership in the conservative Colonial Dames because its social standing helped legitimize her fight for birth control and other highly controversial causes.¹⁵

Because of the well-to-do background of many MBCL members, league news often appeared on newspaper society pages under headlines announcing luncheons and teas. Accompanying photos show women in hats and well-tai-

lored suits with lace-trimmed collars, ruffles, or fur boas.¹⁶

Most of the women who visited the MBCL's clinics lived on the other end of the economic spectrum, especially as the Great Depression deepened. Glimpses of their lives emerge from letters the women sent to the league. To inform members and interest others in joining, the MBCL excerpted these letters and case histories in its monthly bulletin, which began publication in 1937. They illustrate in personal detail the women's desperate desire for contraceptive infor-



Dorothy B. Atkinson,
league president, 1936

¹¹ List, MBCL officers and board members, and financial reports, 1932–34, both Wilcox papers; *Minneapolis Star*, June 23, 1953, p. 17; Rosalie Heffelfinger Hall, telephone interview by author, Jan. 9, 1995.

¹² Mary Atkinson Mitchell, "Growing Up at 'Overlook,'" *Hennepin County History* 48 (Fall 1989): 11; Claire Lynch, Dorothy Bridgman Atkinson Rood entry, Minnesota Biography files, MHS.

¹³ Mitchell, "Growing up at 'Overlook,'" 11–20; telegrams and clipping, *New York Times*, Aug. 26, 1936, Dorothy Atkinson Rood and Family Papers, MHS.

¹⁴ Dorothy Atkinson to MBCL, July 27, 1934, Wilcox papers; Betty Bridgman, telephone interview by the author, Jan. 5, 1995.

¹⁵ John Cowles, telephone interview by author, Jan. 30, 1995.

¹⁶ MBCL clipping scrapbook, Planned Parenthood records.

¹⁷ MBCL Minutes, Jan. 21, 1937, Board of Directors meeting, Wilcox papers.



Nurse caring for mother and newborn, 1920s

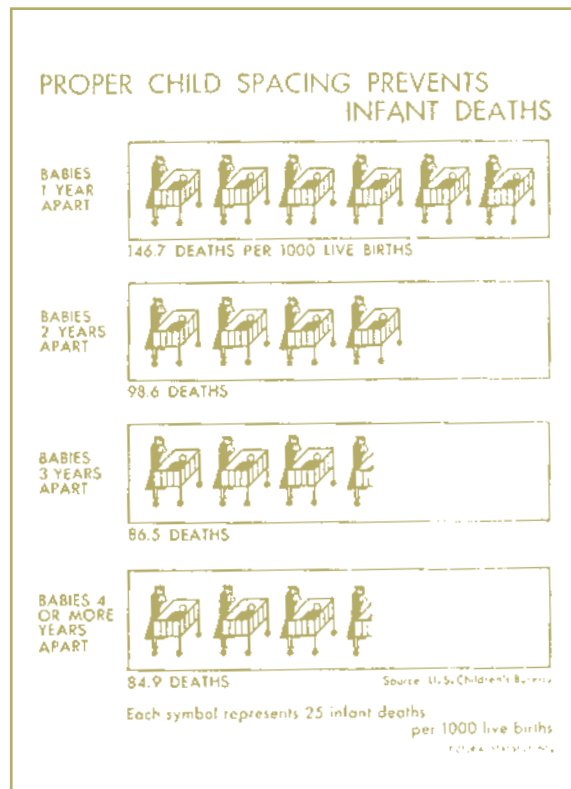
mation and supplies.¹⁷

One case history reads: “Patient is 33 and has been married 9 years. She has one child, born in 1934. She has had 15 abortions, all self-induced. Four times she has been hospitalized at General Hospital for severe hemorrhages following abortions. She came to the Center immediately following her last hospitalization. Her husband is a machinist making \$18 dollars a week.”¹⁸

Another history reprinted in the same bulletin reads: “Patient, 41, has been married for 15 years. She has had 8 pregnancies, all resulting in deliveries. The first child died in infancy, the second was still born. The other six children and parents live in a four-room house. The husband is an unemployed carpenter, working on a WPA project for \$60.50 a month. Someone working with him gave him information about the birth control clinic and he came in to make an appointment for his wife.”

The file for 36-year-old “Mrs. X” was reprinted in another bulletin, along with excerpts from letters she wrote to the clinic. “Husband lost job in the summer of 1938. Family moved to a county

Page from a pamphlet advocating benefits of family planning, 1929



¹⁸ Here and below, MBCL Monthly Bulletin, undated, pamphlet collection, MHS.

north of Minneapolis located in the most desolate part of the state, that area of sand hills and marshes, burned stumps and scrub poplars. In September, 1938, Mrs. X asked if it would be possible for us to send her supplies even though she could not pay for them. Her letter read, 'If thanks and appreciation could pay, you would have an endless fountain. Our food supply goes so shy here that everything else must be secondary. So I say, meaning it very deeply, "God bless the work you do." Thanks.'"¹⁹

In May 1939 Mrs. X wrote another letter. "Never before in the nearly sixteen years of having children have I had a baby two years old without being expecting another. Our home life is gradually changing for the better. Tho we are still trying to feed our 8 children and meet all expenses, with 6 children in school, on \$44 a month, and sometimes going a little hungry to do it, still my health is better both physically and mentally." "My baby is 2½ years old and I am still not pregnant," wrote Mrs. X in September. "Words can't express how I thank you for your help." A report published after the league's first year of operation described its work as "fundamental relief" that "strikes deep into the root of social distress," surely an accurate assessment in this case.

Not all the league's goals were as admirable, at least by modern standards. In common with birth-control groups nationwide, the Minnesota Birth Control League was associated with the eugenics movement, which advocated sterilization of people who were mentally retarded or insane. One of the goals listed in the league's certificate of incorporation was "passage of adequate legislation for the sterilization of the mentally unfit." Included in its surviving records at the Minnesota Historical Society are tables showing 693 "feeble minded, insane, or epileptic" people had been sterilized in Minnesota institutions as of January 1, 1933.²⁰

One of the league's vice-presidents was Dr. Dwight E. Minnich, a University of Minnesota zoology professor and prominent eugenicist. His 1938 speech to the tenth annual meeting of the

MBCL was reported in the *Minneapolis Star* under the headline "Sterilization of Unfit Urged for Better Race." Minnich was pictured with a story that began: "A school census to determine defectives, segregation or sterilization of the unfit and equalization of the birth rate among various ability levels of the population were suggested Tuesday by Dr. Dwight E. Minnich, Chairman of the Zoology department of the University of Minnesota, as methods of developing a better race." The article noted that Dr. Minnich "praised the birth control movement for bringing information to the lower classes and thereby furthering the equalization of the birth rate between the classes."²¹

While the MBCL's involvement with eugenics is a skeleton in its closet often cited by critics today, it is important to remember that the American Eugenics Society, founded in 1926, once had a respected membership and sound scientific credentials. Eugenics had not yet been discredited by the atrocities of Nazi Germany, and its supporters included prominent clergymen, educators, doctors, Ivy League college presidents, and anthropologists. The birth-control movement, on the other hand, was struggling for respectability. Not yet fully accepted as medical science, it was considered by some to be as scientifically questionable as rejuvenation and homeopathy. In many league members' minds, association with influential scientists like Minnich and Dr. Charles Fremont Dight, the founder of the Minnesota Eugenics Society, strengthened the league's credentials and furthered its main aim, which was to make birth control widely available.²²

Although the MBCL always struggled for public acceptance, its most active opposition came from one source, the Catholic church, which was a powerful opponent of the movement across the nation. In 1935, St. Paul Archbishop John Gregory Murray made national news when he ordered all Catholics in the archdiocese of St. Paul, which included Minnesota, North and South Dakota, and Montana, to withdraw mem-

¹⁹ Here and below, MBCL Monthly Bulletin, undated, box 20, Planned Parenthood records.

²⁰ MBCL Articles of Incorporation, n.d., and tables of state birth-control and sterilization laws and statistics—both Wilcox papers. Margaret Sanger herself wrote in 1919, "More children from the fit, less from the unfit—that is the chief issue of birth control," and most birth-control reformers were attracted to eugenics because they had this interest in common; see Gordon, *Woman's Body, Woman's Right*, 281.

²¹ Social Welfare Committee, minutes, Dec. 13, 1933, MBCL file, Social Agencies Collection, Minneapolis Public Library; *Minneapolis Star*, May 11, 1938, p. 8.

²² Gary Phelps, "The Eugenics Crusade of Charles Fremont Dight," *Minnesota History* 49 (Fall 1984): 100, 108; Morris Fishbein, *The Medical Follies; An Analysis of the Foibles of Some Healing Cults* (New York: Bonie and Liveright, 1925).

bership from any birth-control or sterilization organization or face excommunication. The order, which was read on August 18 at all Sunday masses in the archdiocese, was Murray's response to the recent acceptance of the MBCL into the conference of Minnesota social workers. It applied to doctors, nurses, social workers, lay members, and employees of organizations that recognized or promoted birth control or sterilization.²³

Quick to engage the opposition, Sanger replied, "If Catholic prelates follow the example of Archbishop John Gregory Murray, Catholics will have to withdraw completely and irrevocably from civic, public and professional life." Noting that the American Gynecological Society, the American Neurological Society, and the Obstetrical Society of the American Medical Association now endorsed the principles of birth control, Sanger warned, "Catholics will soon have to emigrate from America to some less enlightened country." Murray promptly counterattacked: "There is little difference between birth control organizations and the [John] Dillinger mob. Both were organized to commit murder," the archbishop told the Associated Press.²⁴

The archbishop also appears to have quietly monitored the local activities of the MBCL. His papers in the archives of the archdiocese contain a copy of a birth-control clinic's admittance form, along with records of clinic statistics and birth-control literature sent to him by concerned parishioners. A 1935 letter to the archbishop accompanying the admittance form reads, "Enclosed please find one of the blanks and slips given out to patients, chiefly on relief, by Visiting Nurses and Baby Welfare Nurses, now known as Community Health Nurses. . . . This is the information I told you I would try to secure for you." Apparently referring to the fact that it was still illegal to dispense contraception except for health reasons, the informant continued, "This is very seldom a health measure, more a financial."²⁵

Murray also played a role in the church's national lobbying effort to preserve the laws restricting access to birth control. A 1934 letter to him from Archbishop of San Francisco Edward J. Hanna reads, "It is almost certain that we will have to present arguments against birth control at a House or Senate Committee hearing early in



Archbishop John Gregory Murray, a leader of the opposition to the league

the next Congress. Any suggestions as to a more effective presentation of the case will be welcomed by your Administrative Committee." A letter sent to Murray the next year by the Catholic Welfare Conference reported that the bill relaxing the strictures against birth control was not voted out of committee. "This means the bill is dead. The action is a gratifying surprise to us," the general secretary noted.²⁶

Opposition by the church also appears to be the reason the MBCL and its successor, Planned Parenthood, were for decades denied membership in Minneapolis's Community Chest and Council, which funded a wide variety of charities. From 1944 to 1958, Planned Parenthood repeatedly applied for membership, but a council memo summarizing a 1954 meeting with Archbishop Murray noted,

His Excellency spoke in a friendly tone but with a finality that could not be misunderstood. He explained that birth control is a moral and ethical sin. The history of the Church has always been one opposing this and their position is crystal clear. Under no condition could they be a

²³ *Minneapolis Journal*, Aug. 10, 1935, p. 3. See also letters to Murray in response to order; birth control folder, Archbishop John Gregory Murray Papers, Archives of the Archdiocese of Saint Paul and Minneapolis, St. Paul.

²⁴ Associated Press clipping attached to letter sent to Murray; National Committee on Federal Legislation for Birth Control, press release, July 1935; unidentified Massachusetts clipping—all Murray papers.

²⁵ Kathryn McGovern, R.N., to Murray, Jan. 16, 1935, Murray papers.

²⁶ Edward J. Hanna to Murray, Dec. 22, 1934; Rev. John J. Burke to Murray, Feb. 27, 1935—both Murray papers.



Dorothy Atkinson (left), Elizabeth Heffelfinger (right), and other league women with a map of birth-control strongholds

member . . . if another group such as Planned Parenthood participates in a policy-making position. Their membership would be just as offensive to him as if the Communists applied for membership in the Chest and Council. . . . If they do come in, then he has no other position than to order the Catholic agencies out.

Two weeks after the meeting with the archbishop, members of the Community Chest and Council's screening committee decided, "In view of the opposition of the Catholic group, membership would cause disunity, and it would be to the greater good of the community to decline their application." (Planned Parenthood finally gained

membership in 1959.)²⁷

Lack of support from the Community Chest plagued the MBCL from its early years. In 1932, meeting minutes noted, "A strong plea for financial support was made . . . since we do not receive any money from the community fund." Some 70 percent of clinic patients were "entirely dependent on the community for sustenance," and only 2 percent were able to pay the \$6 cost of their clinic visits. The next year secretary Jean Wilcox reported to members at the annual meeting that the league's work "may be briefly summed up as a desperate effort to keep the clinic open under the combined strain of a constantly increasing demand for its services and a decreased revenue

²⁷ Terrance L. Webster, memo regarding visit of John Pillsbury Jr. and Terrance L. Webster with Archbishop Murray, Dec. 16, 1954, and Screening Committee meeting, minutes, Dec. 30, 1954, Community Chest and Council of Hennepin County—both box 200, Planned Parenthood file, United Way coll.; *Minneapolis Star*, Aug. 26, 1959, p. 1C.

²⁸ Minutes, Oct. 21, 1932, league notebook; secretary's report, MBCL annual meeting, May 23, 1933—both Wilcox papers.

from contributions.”²⁸

These difficulties, Wilcox said, “cemented the membership together in a common purpose,” and despite its financial difficulties, the league began organizing branches and clinics across the state. Members used personal contacts to enlist prominent and influential members of each community targeted for a clinic. In late 1933, for example, Dorothy Atkinson credited the organization of the Duluth branch “the birth of our first child”—to “the initiative, enthusiasm, and organizing ability” of Elizabeth Heffelfinger. More than 100 letters had been mailed to “representative men and women in Duluth. There had been splendid response.” Similarly, league minutes for 1934 note, “Mrs. Painter reported a personal contact in Hibbing, while there on other business, with Mrs. Bowen, the wife of the chief surgeon in the Hibbing Hospital. She is much interested in having a birth control clinic on the Iron Range, since Duluth is too far away.”²⁹

Minutes of MBCL meetings suggest the ongoing struggles and setbacks that faced league members. In February 1934 Wilcox wrote, “In Wayzata some obstacles have been encountered from the Seventh Day Adventists and the Catholics, but notices for a meeting are being sent out.” She continued, “Mrs. Helmholtz of Rochester reported the willingness of the medical profession to cooperate.” But in St. Paul, she noted, “The only group with the courage to sponsor a meeting is the Jewish Family Welfare with Mrs. [Helen] Grodinsky at the head. . . . Mr. Atwater, head of the Community Chest in St. Paul, is in sympathy, but no money can be available from that source.” In December 1934, opening of the Duluth birth-control clinic was delayed because of Catholic opposition there. League minutes note in February 1935 that “Mrs. Harvey Garver has taken over the chairmanship in Duluth, but work is hampered by the Catholic Bishop.”³⁰

In the fall of 1935 Dr. Rae T. LaVake joined the league to direct its clinic policies. A Minneapolis obstetrician and gynecologist, a founder of Minneapolis’s Abbott Hospital, and professor at

the University of Minnesota medical school, LaVake made the Minneapolis clinic a demonstration center to teach doctors how to fit and prescribe contraceptives. By the fall of 1936, LaVake had identified private doctors in 72 of Minnesota’s 87 counties who were willing to provide free care for “dependent women” referred by county relief workers or other social agencies.³¹

The league’s executive secretary, Elizabeth Beeson, also traveled around the state to encourage local relief agencies to refer patients to doctors who provided contraception and to convince county commissioners to use county funds to purchase birth-control supplies. Beeson reported to the league in 1936 that only four counties were willing to pay for supplies for patients on relief; this left the league with the burden of paying the cost of contraceptives for the rest of the state’s poor women.³²

“Unfortunately, we live a rather hand to mouth existence,” Atkinson wrote in a 1936 letter to members. “Perhaps we should be discouraged, but quite the contrary is the case, as some recent new and some enlarged contributions have been made, and we *do believe* in what we are doing. . . . We are working to have contraceptive information available to all mothers who desire and need it—given to the self sufficient by their own physicians, and to the indigent by public health clinics, publicly financed.”³³

By late 1936, the aura of illegality that had hampered the MBCL began to lift. A landmark federal-court decision, *United States v. One Package of Japanese Pessaries*, largely neutralized the federal statutes against birth control. In this test case concerning the importation of contraceptive devices, Judge Augustus Hand ruled that the Comstock law was not intended “to prevent the importation, sale, or carriage by mail of things which might intelligently be employed by conscientious and competent physicians for the purpose of saving life or promoting the well being of their patients.” This change encouraged the American Medical Association in 1937 to recognize contra-

²⁹ Secretary’s report, MBCL annual meeting, May 23, 1933; minutes, Dec. 13, 1933, league notebook, and Mar. 1, 1934—all Wilcox papers.

³⁰ Minutes, Feb. 16, Dec. 19, 1934, Wilcox papers.

³¹ MBCL newsletter, Sept. 10, 1935, Apr. 1, Sept. 9, 1936—all Wilcox papers; *Minneapolis Star*, Mar. 7, 1975, p. 16A. By 1938 the Minneapolis clinic also offered screening for cancer, making it one of the nation’s first to do so; letter to members, Mar. 29, 1938, Wilcox papers.

³² Elizabeth Beeson, report, Oct., Nov., and Dec., 1936, and MBCL newsletter, Sept. 9, 1936—all Wilcox papers.

³³ Atkinson to MBCL, Nov., 1936, MBCL file, Social Agencies Collection, Minneapolis Public Library.

³⁴ *United States v. One Package of Japanese Pessaries*, 86 F. 2d 737 (1936), in Kennedy, *Birth Control*, 215, 249.



League executive secretary Elizabeth Beeson talking with a clinic client, 1937

trol League records show that every year nearly 500 Minneapolis mothers are brought to General hospital in desperate illness because they have taken desperate measures. . . . Hundreds of other worried and overburdened wives submit themselves to the dangers of illegal operations. . . . The average woman who submits to an operation is married and the mother of four children.”³⁶

“None of it is necessary,” Atkinson told the *Star*. “Had physicians given these mothers birth-control information so they could plan their families, the dead would be living and the ailing would be healthy.” Atkinson cited clinic statistics showing almost 1,300 illegal or self-induced abortions among its nearly 2,400 patients in its first nine years.

Although progress was slow, by 1939 the cover of the MBCL’s annual report could read, “Our Goal, to have Contraception Included in the Public Health Program.” This aim would

ception as a legitimate medical practice.³⁴

Despite important victories, the league itself continued to struggle. During July 1937 the Minneapolis clinic shut down for a month for lack of funds. “Eventually,” wrote Atkinson to league members, “the clinic must and will take its place in the city with other organized charities, but in the meantime, far-visioned citizens must support it.” League medical director LaVake agreed, writing in the national journal *Birth Control Review* that “whatever support you obtain must be through quiet, personal contact.”³⁵

To build support, MBCL members argued that funding for contraceptives would in the long run save public money as well as prevent abortions. A lengthy 1937 *Minneapolis Star* article about the league reported, “Minnesota Birth Con-

have been unthinkable when the league began 10 years earlier, but by the late 1930s, it had gained considerable respectability. The endorsement by the American Medical Association, the changed legal climate, and the decreased role of the controversial Sanger all contributed to the change. In 1940 Eleanor Roosevelt declared her approval of family planning, and within the next two years the United States Public Health Service, concerned that vital war industries not be hampered by unwanted pregnancies, quietly began allocating federal funds to birth-control programs.³⁷

The American Birth Control League changed its name to Planned Parenthood in the late 1930s, and the MBCL followed suit in December 1940 to become the Minnesota League for

³⁵ Atkinson to MBCL, Oct. 18, 1937; Rae T. LaVake, “State Public Health Programs,” *Birth Control Review* 22 (Dec. 1937–Jan. 1938):35, offprint—both Wilcox papers.

³⁶ Here and below, minutes, Oct. 21, 1932, league notebook, Wilcox papers; *Minneapolis Star*, May 1, 1937, p. 20.

³⁷ MBCL Annual Report, 1938–1939, Planned Parenthood records; Kennedy, *Birth Control*, 258, 266–67.

From MBCL letter to members, March 29, 1938

One paper, the *Carlton County Vidette*, carried a cordial editorial about our work. . . . Within a week we received 18 inquiries from mothers in the country.

One mother wrote, "I have read a little about Birth Control Aid, though I do not fully understand . . . so I am writing to find out more about it. . . . I have a family of four children and we are poor people and if its possible that I can get information or a chance to know what I can to direct the size of my family by having my babies only when I want them, as I am worried that I will have a big family and that we can't afford to take good care of them like we should, besides I am not very strong."

[Another mother wrote,] "Is there any such Doctors that can give instructions to poor families as to how to direct the size of their families. We are only living on relief. We don't own any land, not even a house. We are renting the place we are living in. My husband works on WPA and his

wages are \$44.50 a month, and we just about get along on that. It costs us over \$4.00 a month for milk. We buy 2 quarts each day, and the rent is got to be paid for every month, fuel, and food, so it don't leave any money for anything else. So you will know why I want to know how I could keep from having such a big family. I hope you will answer my letter and give me good news about my request."

Visiting nurse consulting with mother and young children, 1920s



Planned Parenthood. From a few dozen women meeting for tea and conversation, the organization had become a network of clinics and doctors providing birth control to women across Minnesota.³⁸

Planned Parenthood's role as a provider of abortions would come later, as would its vocal, sometimes violent opposition. The hatted, white-gloved ladies of the Minnesota Birth Control League waged a quieter, more genteel battle than the ones fought today, but with the same stubborn

will. Rosalie Heffelfinger Hall remembers her mother crusading for birth control when she was seven-months pregnant with her fifth and last child, telling women it was their right to decide how many children they wanted and when. "She never talked about abortion; that wasn't part of the plan. It was birth control and not getting pregnant, educating women that they didn't have to have more babies than they could take care of. She always promoted the choice: that women had the choice to do a lot of things, to have better lives

³⁸ *Minneapolis Morning Tribune*, Dec. 13, 1940, p. 9.

³⁹ Hall interview.

The newspaper photos on p. 367 and 369 are from the Minneapolis Star, May 1, 1937. The other images, including those on p. 362 and 364 (bottom) from the Jean M. Wilcox Papers, are in the MHS collections.



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