On the morning of January 22 1973, the Supreme Court announced its decision in two abortion cases: *Roe v. Wade* from Texas, and *Doe v. Bolton* from Georgia. By a 7-2 majority, the court struck down Texas’s restrictive law for violating both the ninth and fourteenth amendments’ implied protection of personal privacy.

The *Roe v. Wade* opinion, written by Henry Blackmun, reviewed the history of abortion laws in the United States, noting that abortions before quickening, that is, discernible fetal movement, had not been prohibited until the mid-nineteenth century. He wrote that, while the American Medical Association (AMA) had pushed for that prohibition to protect women’s lives, now, a hundred years later, medical technology had progressed to such a point that early abortions were safer than childbirth, so that the justification for the ban no longer existed. The AMA, the American Public Health Association, and the American Bar Association all now supported lifting it.

Blackmun traced the right to privacy, citing cases as far back as 1891, including *Griswold v. Connecticut* in 1965 which gave married people the right to contraception, and *Eisenstadt v. Baird* in 1972, which extended that right to single people. Both of these decisions were based on a constitutional right to privacy in matters of sex and procreation. Blackmun concluded that, “the right to personal privacy includes the abortion decision but that this right is not unqualified and must be considered against important State interests in regulation.” He noted that the fetus before birth had never been considered a person in a legal sense that neither medicine philosophy nor theology had agreed on when life begins.

The Court explicitly stated that a woman does not have an absolute right to abortion. She may not do what she wants with her body. Pregnancy is different from other sexual privacy issues because of fetal development. The State has an interest at two key points: after quickening, for the mother’s health and safety, and again at viability, when the fetus can live outside the womb, to protect potential life.

Then Blackmun went on to describe the State’s changing interest as it relates to gestational trimesters. During the first trimester, approximately before quickening, “the attending physician, in consultation with the patient, is free to determine, without regulation by the State, that in his medical judgment the patient’s pregnancy should be terminated…” In the second trimester of pregnancy, after quickening but before viability, the State may, in the interests of the health of the mother, “if it chooses, regulate the abortion procedure in ways that are reasonably related to maternal health.” In the third trimester, approximately after viability, in the “interest of the potentiality of human life,” the State “may, if it chooses, regulate, and even proscribe abortion except where it is necessary, in appropriate medical judgment, for the preservation of the life or health of...
the mother.” Blackmun wrote that this decision “vindicates the right of the physician to administer medical treatment according to his professional judgment up to the points where important State interests provide compelling justification for intervention… the abortion decision… is inherently, and primarily, a medical decision, and basic responsibility for it must rest with the physician.”

In *Doe v. Bolton*, the Court struck down Georgia’s therapeutic abortion reform law that required hospitalization, approval by a committee, and two concurring physicians. Between the two cases, the Court invalidated the statutes of thirty states that limited abortion to those necessary to protect the woman’s life or health, and the therapeutic reforms of abortion fourteen states that had been enacted since 1967.

The breadth of the Court’s decision was astonishing even for those who had been fighting for abortion rights. To many it seemed to have come out of nowhere, though, in fact, it was the logical outcome of a progression of rulings by courts throughout the country. It was the result of a concerted effort on the part of many people, from various regions and segments of society. Legal scholars, those who had brought and argued court cases, professionals, activists who led broad-based community education efforts and those who lobbied legislators all played a part. And in quiet clergymen’s offices, hectic women’s liberation centers, and countless women’s living rooms, women desperate for an abortion had found understanding and immediate help.

Radicals recognized that *Roe v. Wade* and *Doe v. Bolton* were a culmination of efforts to change society’s attitudes regarding abortion. Since the thalidomide tragedy of the early 1960s the media had publicized abortion. Over the past six years leading national professional and religious organizations had backed repeal. The women’s movement had brought abortion into the streets, with demonstrations and speak-outs, mobilizing thousands of women. Through the movement, women were beginning to identify themselves as a class and abortion as a class issue, part of a challenge to male authority and essential for their own liberation. By the early seventies women’s violation of abortion laws was no longer seen as a shameful secret, but as a woman’s right. Clergy active in referral networks used their moral position in society to defy the law. Women’s liberation groups, without the clergy’s protective standing, helped thousands of women get abortions.

On the other hand, *Roe v. Wade*, as much as it was a culmination, also undermined the grassroots efforts to confront the social authority that had kept women in their place and the medical profession firmly in control of women’s health. Abortion had become a catalyst for criticizing the omnipotence of doctors. As one of the women who came through Jane wondered, “If they’re lying to us about how dangerous and complex abortion is, what else are they lying to us about?” Faced with unsympathetic and patronizing medical treatment, women were demanding control of their own health care, demanding information, forcing a shift in power between doctor and patient.
Unfortunately, *Roe v. Wade*, written emphatically in terms of physician’s rights, not women’s rights, revalidated the medical profession’s control of women’s reproductive health. The Court had bent the laws regarding abortion just far enough to reassert the authority of the State.

The night of the Supreme Court’s decision, Jane members held an impromptu celebration at Julia’s, snacking of the spread of exotic cheeses and breads that Julia had quickly assembled. The celebration was more subdued than jubilant. Although their reaction of the decision was ambivalent, the overwhelming feeling of Julia’s living room that night was one of relief. They would no longer have to risk their freedom and women’s lives. They had accepted responsibility for themselves and other women and had discharged that responsibility competently and caringly. Once abortions were legally available, they would no longer have to be terrified of injuring someone or worried about going to prison. The pressure was exhausting. They had made it through and soon they could stop. A few people were far from exhausted. Grace, who had been in the group less than two months, felt “so disappointed that Jane was ending. I remember kind of not saying anything because everybody else was just ecstatic.”

She was not the only one less than thrilled. Lois, on the day of her own abortion a year before, had watched the abortionists at work and thought, I want to do that. Now she felt that “it was a selfish thing with me that, when it became legal, I felt like I had been cheated. I was so close to learning the procedure. Damn, I almost did it. I was so glad it was legal. My God, we don’t have to hide in corners anymore, abortions aren’t a social taboo, but I felt personally cheated.”

For several years service members had talked about starting a women’s health clinic. The Chicago Women’s Liberation Union had tried to organize one and early in 1972 a few Jan members had met to work toward that goal, but nothing ever came of their efforts. At Julia’s, the night the *Roe v. Wade* decision was announced, the discussion of setting up a clinic to provide health education, birth control, and health care resurfaced. Miriam noted, “If we do a clinic, we’ll have to come up against stuff that will be a bitch, like licenses and malpractice insurance.” Having operated outside the law, they thought those things were meaningless. The only accreditation they valued was their own competence and meeting women’s needs. Jenny smiled, “The service is a hard act to follow.”

Underlying their relief at the Supreme Court decision was a nagging doubt. What had women really won? The right to more callous treatment by the medical profession? Women would still be objectified as patients, alienated from abortion as a life-determining experience. They would be acted on, not acted with. Jane members knew that the medical profession was not going to use the opportunity to educate women. *Roe v. Wade* had won the war, but the battle for decent care and respectful treatment was still a long way from over.
Roe v. Wade did not take effect in Illinois immediately. The state was still under an injunction issued by the Supreme Court in early 1971, after a federal district court ruled Illinois’s law unconstitutional. It would be weeks or months before the legal issues were resolved and abortions available in Chicago. Even after the injunction was lifted, the women who came through Jane, poor women and teenagers, were not going to be served by private doctors in their Michigan Avenue offices. It might be some time before clinics opened that served these women. In the meantime, Jane had to keep working. The calls from desperate women never stopped.

On March 2, 1973, the courts lifted the Illinois injunction. Regulations and guidelines for clinics were debated, but private doctors began performing abortions; clinics would open soon. “If not Jane, then the butcher” was not a valid contention anymore. Members dropped out of the service, but the calls from desperate women did not stop; more of that work fell on fewer Jane members.

On March 9, the case against the seven Jane members who had been arrested the previous May was dismissed and the court records ordered expunged. Donna read the Abortion 7’s statement to the press.

… We feel abortion should be available to all women in Chicago who desire it. But in fact abortions though legal are expensive, available only in a few places and restricted to the first trimester. Even more important for the woman who fights through the obstacles, the attitude of society and of the professionals she deals with often make an abortion an unhappy experience. There should not be any legislation on this issue; it would be as inappropriate as laws governing appendectomy. Hospitals and doctors who are waiting for guidelines from the legislature are only avoiding their obligations to their women patients.

To insure abortions being not only medically safe but comfortable and human, these things must be done:

- Outpatient abortion clinics – freestanding as well as hospital-attached be set up
- Cost of an abortion be cheap - $100 maximum – and covered by Public Assistance and all other health insurance
- Abortions be available without restriction in the second and third trimester.
- Paramedics, not only M.D.’s, be providing this service.
- Supportive counseling done by women be part of each procedure.
- Consent to the operations coming only from the pregnant woman—not hospital boards nor her parents nor her husband.

That spring a doctor who had long worked for abortion reform contacted Jane. She was planning to add abortions to her clinic’s services and wanted to explore the
possibility of Jane managing that department. She brought her lawyer to a meeting. When service members asked if she intended to allow Jane women to do the abortions, she said yes, while her lawyer vigorously shook his head no. “Absolutely not,” he said. “Within the law that would be impossible.” The women in Jane declined her offer. They did not want to revert to the role of handmaidens to abortionists, whether or not they were physicians, and have to put up with behavior and procedures they did not approve of, but could not control.

Instead, they wanted to continue to share what they had learned and expand their skills. They began planning for a women’s health center, based on a self-help model that emphasized education, and held the first meeting at Julia’s for women interested in stating a clinic. Her living room was packed with not only Jane members but also women from all over the city. Over the next six months the group evolved into the Emma Goldman’s Women’s Health Center, a well-woman health clinic. The services they eventually provided included gynecological exams, Pap smears, breast self-exams, pregnancy tests, diaphragm fittings, gonorrhea cultures, hematocrits, vaginitis diagnosis and treatment (using the teaching microscope Nick had given them, women saw what the clinic workers was looking for in diagnosing their infections), and eventually they learned to fit cervical caps. As public speakers, they continued to promote their view of woman-centered health care.

The service held a special meeting to decide Jane’s future. Julia came back for that meeting and spoke forcefully for closing the service: Now that abortions are legal, whatever protection we had from the police will be gone. The city might have tolerated Jane’s existence as a safety valve, but that benign neglect is going to end. Once abortions are available through outpatient clinics, the service might be considered a financial threat to doctors and clinics. That would put them in greater jeopardy. For all those reasons it was too dangerous to continue.

Nora, the group’s former midwife, who had returned from Colorado in the fall, was furious that Julia, who still had a powerful influence even though she was no longer a member, had returned to argue for closing Jane. Nora was the most vocal proponent of continuing the service: What we offer is unique. No one will get this quality anywhere. Although she agreed with Nora on that score, Kate was annoyed. Nora was no longer willing to do any medical work. What right did she have to demand that other people do something that she herself would not do? If you want something done, then you should be willing to do it.

Most of the women sitting around the living room floor that night were just plain tired out. Since her son’s death in September, performing abortions had become an emotionally wrenching experience for Cynthia. She needed to stop. Another abortionist’s marriage was crumbling. Several members were barely speaking to one another. None of them disagreed that abortions provided by medical professionals would not measure up to Jane’s standards. Women would probably be subjected to the same insensitive medical care they always got, but, for the members of Jane, the
benefits of continuing did not outweigh the costs and risks. They had had a mission: while it was illegal, they had made sure that abortions were available. They had completed their mission. As soon as the first legal clinics opened, Jane would fold.

The last Call-Back Jane listened to the disappointment in women’s voices when she told them Jane was out of business and offered referrals to Chicago clinics. Only a few women showed up to clean out the apartment they had rented that fall on the North Side. As they moved furniture and packed up their supplies, they bitched about the lack of interest. No one remembers scheduling a last work day. No one remembers working a last work day. There was no fanfare, no fireworks. Jane was gone.

In its four-year history Jane members estimate they performed over eleven thousand abortions.

On May 20, Sally hosted an end-of-Jane party at her elegant Frank Lloyd Wright house in Oak Park. The invitation read:

You are cordially invited to attend
The First, Last and Only Curette Caper
The Grand Finale of the Abortion Counseling Service
RSVP Jane 643-3844

Everybody who had ever had anything to do with Jane was invited, all the former members and the people who had offered their houses or apartments for Fronts or work places. Jenny talked Nick into going to the party. Still guarding his identity, he was reluctant. It was the only time he saw the majority of the women who made up the service. He had half expected wild-eyed revolutionaries dressed in motorcycle jackets and combat boots. Instead, gathered on Sally’s brick-walled terrace in the sunshine, was a group of ordinary women in sundresses and shorts, eating and talking. They did not fit the image he had in his mind. They looked too normal, too straight. He thought, This is really strange: all these straight women doing this illegal thing.

In the middle of the afternoon Sally picked up her guitar and, to the tune of John Prine’s “Your Flag Decal Won’t Get You Into Heaven Anymore,” sang a song she had written especially for the occasion, her ode to Jane:

I woke up one bright morning
About the middle of May.
I had some kids and a good old man,
Things were going my way.

But I looked at my calendar
And there I read my fate.
Five pounds here and a bigger brassiere—
I was about seven weeks late!

Chorus:

643-3844 is a number you’ll adore
The women in the service
Know what you’re calling for.
They’ll give you an abortion
No matter what the reason for.
And 643-3844 is a number you’ll adore.

I sidled up to my best chum
I tried to tell her why—
I was getting fat and my breakfast sat—
And then I started to cry.

“Don’t you worry, don’t you fret,”
She said to me so plain.
“I’ll give you a telephone number
And you can tell it all to Jane.”

Chorus:

I called this lady on the phone.
She sounded really great.
She asked my name and telephone
And then my l.p. date.*
“A counselor will call you,
Just put your mind to rest.
We’d like $100
But we’ll take your best” (quietly)

Chorus:

It’s another bright May morning
My problem’s all resolved.
But my heart is heavy laden
‘Cause I hear that Jane’s dissolved.

No more o.o.t.’s, 6pp’s
3ks, abs, or misc.*
‘Cause when you dial the number
The message sounds like this—
Chorus

643-3844 can’t help you anymore
We’re already out of business
From your dirty legal war.
We gave you an abortion
No matter what the reason for.
But 643-3844 can’t help you anymore.

*These are the abbreviations Jane used on the index cards:
l.p.: last period
o.o.t.: out-of-town women
pp: number of previous pregnancies
ks: number of children
abs: number of previous abortions
misc: number of previous miscarriages