

Eradicating induced abortion? Lessons from 20th Century France

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In France, for two decades – roughly from the late 1930s to the late 1950s – induced abortion was not only prohibited, it was well and truly the target of a war (Cahen, 2016). What can 21st century citizens learn from this historical episode?

From moral rejection to public policies

The moral perception of induced abortion (referred to simply as abortion in the following) has varied greatly over time and space from the earliest known traces of the practice in ancient times. In the Christian world – the Roman Catholic Church especially – many centuries of theological debate revolving around the beginning of life and the ontology of the fetus divided the authorities until a definite and stable position was found. It was not until the late 19th century that the Catholic Church expressed an unconditional condemnation of abortion, which was part of its broader view on procreation and medical progress (Betta, 2006). However, even ecclesiastics were aware of how difficult it was for ordinary households to respect all the religious requirements about sexuality and reproduction. Priests tended to close their eyes on many intimate arrangements (like the emblematic “Onan’s crime”) and, until the early 20th century, usually avoided any mention of abortion in their pastoral activities (Sevegrand, 1995). In France, after the post-revolutionary civil laws of 1791 and 1810 banning abortion, the state’s approach to abortion was generally similar to that of the Church regarding withdrawal or the Ogino-Knaus method (a method that Pius XII eventually recognized in 1951): it was considered opportune to avoid a campaign which would use up considerable resources for an uncertain result. It was tacitly understood that the realm of procreation was one of the most difficult to regulate, due to what Sarah Hanley, analysing early-modern rules governing pregnancy and birth, would later call a “counterfeit culture” (Hanley, 1989). If the number of convictions was low in the 19th century, this was not only because abortions were rarely detected and the juries often indulgent; it also reflected the state’s principle that the “tranquillity of families” should not be needlessly disturbed .

The French anti-abortion crusade

A notable change took place around the time of the Great War, however. The emergence of a powerful moral and pronatalist crusade gave rise to growing involvement of bureaucracies and civil servants, a wave of forensic investigations and medical suspicion, along with a wide array of judicial and extra-judicial penalties. While countries such as the United Kingdom, Denmark or Sweden were becoming increasingly tolerant of abortion, officially for eugenic reasons, France entered a combative phase. In the interwar period – that of unprecedented low fertility in France (roughly 620,000 annual births after 1935 and a TFR below 2.10, compared with 910,000 and 2.9 in 1901) – hardly more than a hundred people were actually convicted each year for abortion in French courts, whereas the annual number of “crimes” ranged between 300,000 and 1,000,000, according to the activists’ rough estimates. After the radical change of attitude in the 1930s, however, 26,000 cases were tried between 1940 and 1949. This resulted from the unprecedented mobilization of the police and physicians, as well as various official or unofficial agents supported by Vichy’s authoritarian regime, and then by post-war governments. The anti-abortion crusade also involved health propaganda, family (including antenatal) benefits and the propagation of a “pro-family culture” which were maintained after 1945.

What results?

Yet, the outcome of this crusade – in terms of “saved lives” (i.e., avoided abortions) – was probably close to zero. Historical documents reveal that most of the clear-sighted stakeholders of the time, including some of those who considered abortion as incompatible with their own (personal) moral values, had already warned that it would be utopian to combat such a social phenomenon, short of implementing total(itarian) social control. They knew that when confronted with events, risks or conditions that threatened their life or livelihood, most individuals managed to bypass the law, sometimes in the most ingenious and unexpected ways. The range of historically documented instruments and abortifacients is wide: herbs, everyday utensils, gynaeco-obstetrical instruments, hormones, etc.

Among them, the “Chaumel dilators” provide a telling historical example. Despite the official ban on abortifacients or obstetrical instruments, these glycerine-based fusible sticks could be legally bought in drugstores, as “treatments for gonorrhoea”. One of the great advantages of these thin and non-rigid dilators was that they left no trace, so that their use could not be detected. In the late 1940s, an estimated 2% of women who aborted are thought to have resorted to this technique (Dourlen-Rollier, 1963).

Some conclusions

As with *Mifepristone* or *Misoprostol* pills today (Rossier, 2014; Sheldon, 2016), people quickly learn how to divert pharmaceutical products for abortion purposes. Multiplying bans and penalties pushes “violators” into using their capacity for innovation and adaptation. It also stimulates illegal behaviours, backdoor business and shadow networks, as shown by the example of Prohibition in the US, and the consequent flourishing of bootleggers and organized crime.

It is therefore often wiser to move from opposition to regulation, as was the case in France in 1975. Simone Veil’s 1975 Law, permitting abortion, is not only a result of feminist mobilization, it is also the expression of a new paradigm in public health and bio-political regulation, namely the transition from criminalization to medical and social care. While it constitutes a major historical step forward, the medicalization of abortion has not put an end

to moral stigmatization, nor has it guaranteed simple and universal access to this service. These limits are still evident today.

The “individual choice” argument has been a crucial element in the fight for reproductive rights. But its connotation of “freedom of choice” should not overshadow the fact that for many women, and not only in France up to 1975, there is just no valid alternative to terminating an ongoing pregnancy. The policy choice that faces societies is not really between “abortions or no abortions”, but between legal or illegal abortion, the latter being nothing but a social hypocrisy, which encourages underground (if not criminal) activities, stigmatizes women, and jeopardizes their health and sometimes also their lives.

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