Taking Matters Into Their Own Hands: Social Workers and Adoption Practices in United States
Maternity Homes

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Defense Date: April 3, 2019

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Introduction

The country was changing fast. . . from music to morality. The sexual revolution was coming. . . but it was a time before oral contraceptives were widely available, before legalized abortion. . . the baby boom wasn’t just built on married couples. That led to maternity homes. . . packed with unwed young mothers. . . all over the United States. The common refrain from the mothers we interviewed was this: they say they were forced to give up their newborns for adoption. . . with no alternatives.1

United States’ society and culture witnessed significant changes during the twentieth century. Throughout the 1900s, the Americans transitioned to a more liberal construction of certain issues like gender norms, sexuality, and race, than previous centuries. During this period, minority groups, particularly women, made efforts to advocate for their rights and establish a more active and equal role in society. From the mid 1800s through the early 1900s, women fought for their right to vote, and won suffrage in 1920.2 The roaring twenties gave birth to a new type of girl, the flapper, who embraced a totally different lifestyle than previous women, allowed women to assert a sense of independence, and challenged traditional views of women.3 During World War II, women took on new roles as laborers to help keep war production afloat in the absence of men, allowing women to assume traditionally male roles and occupations. The 1960s saw the sexual revolution, where women really challenged traditional constructions of femininity and embarked on a journey of sexual empowerment.4 Throughout this century, women challenged and transcended traditional gender roles and expectations at almost every juncture.

1 *Dan Rather Reports*, 715, “Adopted or Abducted?,” hosted by Dan Rather, aired on May 1, 2012, on AXS TV, 4.
Historically, Americans perceived a woman’s sexuality as a direct reflection of her own morality. For women, sex was supposed to be explicitly reserved for marriage and creating a family. Men generally wanted women to remain ‘pure,’ and viewed women that were not virgins at the time of marriage as ‘damaged goods.’ In contrast, men perceived themselves as innately sexual beings. They did not correlate their own sexuality and morality, and as such, did not reserve sex for marriage, but thought of it as a pleasurable activity and an important element of masculinity. In the period between the 1940s and 1970s, the United States began to embrace a more liberal view of gender and sexuality. They too started to see sex as something more than a means of procreation, and many women no longer reserved sex for marriage, but for a person or time that felt right.5

While women’s perception of their own sexuality expanded and challenged pre-existing norms, men and the rest of American society still held them to the antiquated standard of purity and morality. Without access to oral contraceptives or abortions, pregnancies were much less preventable than they are today. Americans encouraged and celebrated pregnancy within a marriage. Outside of a marriage, however, pregnancy “almost always was disastrous,” as it provided direct evidence of a woman’s immoral activity and cast her out from society.6 This culture also minimized a man’s role in pregnancy, and placed the blame and moral consequences entirely upon women. Simply stated, men could freely have sex without having their morality or character degraded, while women could not.

From the late 1800s onward, maternity homes began opening to take in ‘fallen women,’ including unwed mothers and other women deemed deviant by society. By the 1940s, maternity

5 “The Pill and the Sexual Revolution.”
homes took in a significant portion of the young women that became pregnant outside of wedlock. Maternity homes appealed to these women and their families because staying at the home allowed women to conceal their pregnancy while under the care of professionals. Typically, a young woman’s parents would send her to a maternity home to protect her and her family from the shame of her immoral sexual activity. The reality of the experiences of women in maternity homes, however, was not simply concealing pregnancy. Instead, fear and abuse largely characterized the experiences of women in maternity homes. Women went to maternity homes to avoid the societal shame of an extramarital pregnancy, but once at these homes, women felt more shame than the outside world could have given them.

Beginning in the 1930s, maternity homes transitioned from evangelical employees to mainly employing professional social workers, as pregnancy and children fell under the new umbrella of social welfare. Many of these social workers, however, did not foster an objective view of the residents. Instead, they perpetuated antiquated ideas of female sexuality and morality and thought of these women as immoral and unfit mothers. Their emphasis on encouraging unwed mothers to relinquish their babies “maintained conservative values that condemned premarital sex while tacitly acknowledging the increasing willingness of young people to flout such conventions.” Many employees of maternity homes treated residents with little dignity. They left women alone for extended periods of time during labor and misinformed them of the birth or adoption process. Additionally, they acted upon their prejudice against unwed mothers and belief that these women were immoral and unfit mother and broke them down emotionally until they surrendered their child for adoption. If mothers still did not give in in spite of these

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tactics, employees often signed the paperwork themselves, resulting in fraudulent adoptions. The abuse and illegal activity seen in maternity homes during this time is unfathomable, and the testimonies of these women only scratches the surface of their truly traumatic experiences.

In this paper, I will argue that employees in maternity homes between the 1940s and 1970s disregarded standards set by United States law, social work regulations, and the missions of the homes themselves, and instead acted upon their own prejudices against unwed mothers and forced young unwed mothers to surrender their babies for adoption. Additionally, employees had the opportunity to treat women with respect and dignity but elected to punish them for their immoral activity instead. The actions of these social workers resulted in millions of women losing their babies, along with inducing life-long feelings of guilt, confusion, and sadness. The conditions of maternity homes during this period did not arise from standards set by the homes, social work, or United States law, but from employees within these institutions’ own initiative.

Several scholars attempt to define and explain this issue. In her book, *Fallen Women, Problem Girls: Unmarried Mothers and the Professionalization of Social Work, 1890-1945*, Regina Kunzel analyzes social work as a profession and its relationship with unmarried mothers. The book adds to literature on the evolution of social work as a profession. Using case records, dissertations, books, and articles, she places social work within the framework of maternity homes by detailing the struggle of social work to displace evangelical management of these homes. Her overarching argument states that benevolent evangelicals created maternity homes with the intentions of helping unmarried mothers by keeping them in homes, viewing them as victims of male supremacy, sympathizing with their situation, and assisting them in

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taking on the role of wives and mothers. Social work eventually prevailed on the basis of supposed professional expertise over the benevolence of evangelical workers. These workers saw themselves as professional experts and denounced the accepting and sympathetic practices of evangelicals. They transformed the view of unmarried mothers from victims of adverse conditions and male supremacy to women that were a ‘social problem,’ giving way to the circumstances seen in maternity homes during this time period. This book serves to place the Baby Scoop Era in the context of the professionalization of social work and firmly establishes the role of social workers in women’s experiences in maternity homes.

Michael W. Sedlak, in his article, “Youth Policy and Young Women, 1870-1972,” analyzes the ‘fallen woman’ concept in a different light than Kunzel.9 His first section, “Evangelism and the Maternal Bond, 1870-1930,” discusses the establishment and nature of evangelical homes for young women who were victims of “unscrupulous men who took advantage of them and then abandoned them.”10 The following section, “Transforming the Urban Missions, 1930-65,” argues that the second phase of the history of wayward young women came with the professionalization of social welfare and educational services, backed by the federal government.11 Like Kunzel, Sedlak also establishes that social work redefined unmarried motherhood as a social problem resulting from the loose morals of young women. The last section, “Aunt Martha’s Decline and the Impact of Federal Policy, 1965-72,” describes the decline in popularity of these maternity homes due to increased social acceptance of out of wedlock pregnancy and decrease in numbers of out of wedlock pregnancies.12 Sedlak’s article

10 Sedlak, 451.
11 Sedlak, 453.
12 Sedlak, 457.
provides a detailed history of maternity homes and the roles they took on in different time periods, and also discusses the role of the government in social work and these homes.

In her book, *The Girls Who Went Away*, Ann Fessler particularly dives into the stories of young women sent away to maternity homes. Throughout her life, Fessler found and collected oral histories from over 100 women that were sent away to maternity homes during the Baby Scoop Era. Fessler herself was almost 56 years old by the time she finally met her mother, a ‘girl who went away’ to a maternity home and gave Fessler up under pressure from social workers. Having a clear personal investment in the issue, Fessler thoroughly analyzes the context surround adoption in the United States between 1945 and 1973. What Fessler investigates that other authors fail to consider is the social context of the time period: post World War II glorification of the perfect family unit. For a variety of reasons, married couples experienced infertility, and looked to adopt in order to create this ‘perfect family.’ Maternity homes and social workers alike saw the married, stable family as perfectly fit parents, and looked to fill the growing need for adoptable children by taking them from women they deemed ‘unfit’: the unmarried, young, biological mother. This book analyzes the societal pressure of young motherhood, and how the entire industry of taking children from their mothers and giving them to ‘more fit’ parents became commonplace.

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Maternity Homes

Law particularly pertaining to children is a relatively new concept in the United States. Before the 1890s, the United States only legally recognized illegitimate children under bastardy laws. These laws did little to promote children’s wellbeing, and instead, placed a metaphorical scarlet letter upon them, ensuring that their illegitimate status followed them for life. In the early 1900s, however, the United States witnessed its first Child Welfare Movement, so much so that the 1910s earned the nickname, “the children’s decade.” In 1912, the United States founded its Children’s Bureau and began to promote welfare of children through policy and legislation, paid particular attention to the illegitimate child.

Even before the Child Welfare Movement, agencies began opening homes for women and children throughout the United States. Throughout the early 1900s, evangelical maternity homes opened throughout the country in attempts to provide unmarried mothers with support so that they would not have to surrender their child for adoption. Generally, these homes were religious in nature with their driving force being “evangelical enthusiasm,” and promoted a Christian attitude towards wayward women. This often included daily sermons or bible study, as well as employment of evangelical people within the homes. Homes operated around the principle of keeping mother and child together at all costs and viewed young unwed mothers as victims of a male-centered world.

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15 Kinzelman, 36.
16 Kinzelman, 36.
The Salvation Army opened the United States’ first maternity home in 1886, and many more opened soon after. Originally called ‘rescue homes,’ maternity homes helped young women under unfortunate circumstances. These homes welcomed ‘fallen’ women, such as prostitutes, and later shifted their primary focus to unwed mothers. The founders of these homes sought to provide “hospitality, kindness, evangelism. . . and temporary homes and employment. . . for women and young girls who have led profligate lives or having been betrayed from the path of virtue are sincerely willing to reform.” This mission embodies the belief that ‘fallen’ women were worthy of respect and reform, and presents rescue homes as the perfect place to do so. At the time, people generally believed that unwed mothers were victims of the evils of society, and worthy of aid and reform.

The Salvation Army was not the only agency that opened maternity homes. Another prominent system of maternity homes were those associated with the National Florence Crittenton Mission. In 1893, Charles Crittenton, in partnership with Kate Waller Barrett, founded the National Florence Crittenton Mission (NFCM) in honor of his daughter, Florence Crittenton, who died of scarlet fever at age four in 1882. Crittenton traveled across the country in a private railroad car nicknamed the ‘Good News Train,’ to open Florence Crittenton homes. By 1897,

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Crittenton opened fifty-one homes in the United States. Like the Salvation Army, the NFCM also looked to provide women with an option outside of prostitution, but focused primarily on unwed mothers from the start. NFCM homes looked to give young mothers a place to raise their children shielded from the judgement of society, as well as providing her with training and skills necessary to thrive outside of the home. Policy at these homes strongly opposed the separation of mother and child for adoption, based upon the belief that children belonged with their mothers, not in institutions. Additionally, Crittenton and Barrett saw motherhood as a means of reform for wayward women, and they thought that their homes were the perfect place to train young women to be good mothers. Women generally spent a minimum six months in the home after giving birth, during which time, they received support, medical care, and training with the goal of becoming financially stable and properly equipped to care for their baby.

Barrett felt very strongly about the importance of keeping mother and child together and emphasized this in Florence Crittenton Homes. She felt called to rescue ‘fallen’ women after an incident where a young woman came to see her husband, a minister, late one evening. The woman had spent the evening out in the rain and made it to Barrett’s home dripping wet and cold, holding her fatherless child. Looking at her own child and the woman’s child, Barrett wrote, “there are two babies laid side by side, my boy and hers, both with equal possibilities. . .

both equal in the sight of God; and yet in the eyes of the world, how different.” Not only did Barrett feel called to help the woman, but she also recognized the social stigma that would follow her and her child. She knew that society would look down upon this fatherless child, but not her own, simply due to his illegitimate status.

From that moment on “there entered a God-given purpose in [her] heart... that [the woman] should have a chance.” Throughout her lifetime, she fostered the philosophy of “doing all possible to keep mother and child together” and ensured that practices in Florence Crittenton Maternity Homes aligned with this idea. She implemented regulations that aimed to fully serve both mother and child, including requiring mothers to stay in the home for six to twelve months after the birth of their baby to ensure that they were fully comfortable and suited to care for their children. Additionally, mothers received proper education and job training during their stay in the home to prepare them to work and provide for their child. Barrett, along with members of other missions like NFCM, saw unwed mothers as “less fortunate sisters” worthy of redemption and protection. Barrett embodied and promoted the core values of the NFCM on every level.

From its birth, the maternity home movement was rooted in benevolence. The rise of social work as a profession in the 1930s changed the nature of maternity homes significantly. The transition from religiously oriented employees to social workers in maternity homes resulted in a shift practices towards young unwed mothers. Previously, employees of the homes saw young unwed mothers as troubled victims of a male-centered society in need of support. Now, new employees believed these women were responsible for their pregnancy on behalf of their

27 Baumler, 52.
28 Kunzel, 9.
29 Jeannette Pai-Espinosa, response to Dan Rather Reports, April 29, 2012.
30 Kunzel, 10.
own immorality and delinquency and needed punishment for their actions more than reform. This shift in employees completely changed the conditions in maternity homes that had originally been guided by a philosophy that cast unwed mothers as ‘fallen women’ worthy of aid and reform.

With the rising popularity of maternity homes, policies and education for employees in these homes came about in tandem. As maternity homes employed more social workers, the Child Welfare League published its first set of guidelines for adoption practices in 1938 and presented these guidelines to maternity homes and their employees as a model for how they should operate. These guidelines provided safeguards for the child, the adoptive parents, and the state. One safeguard for the child declared that “the child was not to be unnecessarily deprived of kinship ties,” a guideline intended to protect the child from being prematurely or unnecessarily separated from its natural family unless no other options were available.31 At this point, social workers in maternity homes, in accordance with these guidelines, believed that keeping the child with its natural family was the best option.32

At its founding, the NFCM implemented policies within its homes prohibiting women from relinquishing their children for adoption, based upon the belief that mother and child belonged together. The NFCM also emphasized the importance of motherhood in a woman’s total rehabilitation and reformation.33 In 1942, a Florence Crittenton Home brochure featured a segment on policy and what the home provided for its residents. It stated that the “girls. . . are encouraged to keep their babies.”34 Expanding upon that notion, it described how society should

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32 Carp, 26.
33 Sedlak, 456.
34 Wilson-Buterbaugh, The Baby Scoop Era, 47.
watch over and befriend these women, and that the home aimed to provide them with support and training every step of the way. It stressed that the best course of action for a child was remaining with its natural mother, and that caring for a baby would strengthen a mother’s character.  

### Gender Norms and Social Stigmas

Gender norms in the United States shifted dramatically throughout the 1900s. From the women’s suffrage movement in the early 1900s to the civil rights movement in the 1960s, the twentieth century witnessed unforeseen activism for rights and equality. The years during World War II and those following challenged gender norms on a new level. Over 12 million men fought in World War II, leaving their homes and families behind to serve their country. Success in the war heavily depended upon production of war material and food, fields in which men traditionally labored. In the absence of men, the country called women to fill in and help maintain war production. During this state of emergency, the government changed its view of women, and now saw them not as wives and mothers, but as potential recruits for the wartime labor force. As soon as the war ended, however, women were expected to return to their domestic roles even more than before the war began. While the war expanded women’s roles through participation in the work force, it was not enough to permanently change traditional

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38 Campbell, 73.
gender roles. As such, social workers in maternity homes could hold on to and perpetuate antiquated gender norms and ideals in the postwar years.

From a young age, American girls felt pressure to conform to traditional femininity. At this time, many women blindly accepted the idea that “being subordinate to men [was just] a part of being feminine.” American society ingrained this idea into women’s heads so much that they believed inferiority was something they would just have to accept as part of being a woman. One woman reflected that in 1944, Santa brought her five-year-old daughter a doll house to discourage her from growing up a tomboy and instead pursue “feminine interests.” The mother herself had grown up as a tomboy, and sought to protect her daughter from the judgement and shame she felt as a child for not being feminine enough. The fact that simply playing outside instead of playing with dolls was grounds for judgement reveals the pressure placed upon young girls to embody aspects of femininity.

In the wake of World War II, Americans emphasized the primacy of family and children more than previous eras. In her book, A Strange Stirring: The Feminine Mystique and American Women at the Dawn of the 1960s, Stephanie Coontz quotes a Gallup Poll conducted in the early 1960s that asserted: “American housewives are content . . . because they ‘know precisely why they’re here on earth.’ Unlike men, women do not need to ‘search for a meaning in life. . . Practically every one of the 1813 married women in this survey said that the chief purpose of her life was to be either a good mother or a good wife.’” This poll projected the common idea that

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40 Campbell, 234.
41 Coontz, 2.
women exist to serve men in the role of wives and mothers, and also reveals how this idea pervaded women’s minds to the extent that they actually believed it was true.

Books and magazines also projected these gender norms. The following message found in a 1956 cookbook titled, *To The Bride*, clearly lays out the ideal aspirations for women at the time:

Soon you will reach that day for which you have planned and dreamed since you were a little girl. . . . Your Wedding Day!! What wonderful dreams you have had. . . . About him . . . about the home you would share . . . about the children you will have some day. . . . Now, all of those wonderful dreams are about to come true. And you are about to assume the most important role of your life. . . . The composite role of sweetheart, wife and mother.42

This inscription perfectly synthesized post World War II gender norms: the highlight of a woman’s life is supposed to be her wedding day. She should spend her whole life dreaming of her future husband, getting married, purchasing a home, and having children. Additionally, as a bride, women are preparing to assume the “most important” role of their lives.43 The author asserts that the most important thing a woman can be is a “sweetheart, wife and mother.”44 The culture of this era did not encourage young women to aspire to anything more, such as a career, and instead, relegated them back to the home to assume their traditional role as wives, mothers, homemakers.

The reversal of expanded women’s rights from the war to the post war years is evident in maternity homes. After the war, maternity homes invested in training unwed mothers to develop strong feminine skills and qualities. Homes did not offer vocational or educational courses, but did offer a wide variety of courses in ‘feminine areas,’ such as glamor, charm, beauty, sewing,

43 Hurst, 3.
44 Hurst, 3.
cooking, and even flower arranging. While these courses did give women activities to fill their days in the home, they were explicitly ‘women’s activities,’ and projected the idea that women should be partaking in certain activities, like sewing and cooking, but should not pursue their education or a vocation.

The social stigma surrounding unwed motherhood at this time stemmed directly from traditional gender norms. The post-war emphasis on reasserting traditional gender roles perpetuated the stigma surrounding female sexuality and promiscuity, particularly in terms of extramarital sex. Young women in maternity homes especially fell victim to this stigma, as pregnancy out of wedlock served as physical evidence of ‘deviant’ sexual behavior. In the late nineteenth and most of the twentieth century, unwed motherhood was an aberration, and young mothers were subject to judgement and mistreatment from outsiders. As one woman reflected:

To be unmarried and pregnant in the 1950s was to be in the deepest kind of trouble. First of all, there was the shame; a kind of shame that’s unfamiliar to girls now: a profound and overwhelming feeling that you were bad and dirty in the deepest part of you; that you’d done something irredeemable. Then there was the terrible quandary of what to do. If you even knew about abortion—and many young women didn’t—you knew it was a dark, dirty, and exceedingly dangerous business. You probably had no idea how to go about getting one, and the fear of being found out made it hard to ask. If you were anywhere near a large urban area, and you were resourceful, or had good help, you might be able to find you way to a Florence Crittenton Home, or one of the other places where unmarried girls could go to have their babies and give them up for adoption.

Clearly, being unmarried and pregnant at this time was not ideal. The stigma surrounding unwed pregnancy contributed to overwhelming feelings of shame and guilt for mothers. Many women reported feeling that “[they] were bad and dirty in the deepest part of [themselves]” simply

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45 Solinger, 50.
46 Harvey, 22.
because they had sex outside of marriage. Another woman recalls the stigma surrounding pregnancy out of wedlock, noting that it was:

No accident we called it ‘getting caught.’ The phrase has a mean shrinking ring that captured the way we felt about sex outside marriage: that it was a sneaky, illicit game, and that you took your chances when you played it. ‘Getting caught’ only applied to girls, and it implied that they deserved to get caught. Pregnancy was the punishment for sex outside of marriage.

The fact that so many saw pregnancy as “punishment for sex outside of marriage” only intensified the stigma surrounding pregnancy out of wedlock at the time: it was immoral, it was wrong, and pregnancy was a just punishment. Men, of course, rarely felt such shame, as sex and morality did not intertwine for men in the way that they did for women, and men were not burdened with the consequences of their actions in the same way. While men and women clearly played equal parts in a pregnancy, people decided that only women were responsible for the immorality of pregnancies out of wedlock and should be shamed in consequence. For women in maternity homes, this resulted in abuse and maltreatment from employees as ‘punishment’ for sex outside of marriage.

Unwed mothers were aware of the pervasive stigma surrounding their situation. They knew that they would take the blame for their pregnancy and not the baby’s father. They would be seen as immoral and a disgrace to their families. Lydia Manderson, who spent her pregnancy at a Salvation Army home in California, knew that being in her situation “meant that [she] was promiscuous and the baby was ‘illegitimate.’” Additionally, she noted that the word

47 Harvey, 22.
48 Harvey, 21.
49 Harvey, 21.
illegitimate brought a lot of images to mind, particularly “lower-class, trashy families.” Not only did people associate illegitimacy with poor morals, but also lower socioeconomic status. This goes to show how an illegitimate pregnancy affected every aspect of women’s lives and implies that people of a lower class generally had poor morals compared to upper-class members of society.

With this stigma in mind, Lydia felt that her own existence was “shaming [her] baby.” The stigma was so prevalent that even though she knew she was not promiscuous, immoral, or trashy, she still felt that way. Claudia, who got pregnant on her seventeenth birthday in 1967, does not remember having any conversation regarding options for her baby during her stay at St. Mary’s home for unwed mothers in Dorchester, Massachusetts. Instead, she remembers constantly saying to herself: “You’re gonna give that baby to good people, decent people, people who can take care of [the child] because you are so bad and so flawed for just having this happen, and there’s no way you could possibly provide what a child would need.” As with Lydia, the stigma was so ingrained in Claudia’s mind that she wholeheartedly “believed [she] was flawed.” The stigma drove unwed mothers’ perception of themselves and their pregnancy, as well as how people viewed them within society.

The stigma surrounding unwed motherhood not only brought shame upon mothers, but also their families, who were also guilty on the notion that they must have failed to raise a good girl. Mary, who began working in adoptions in 1960, agrees that “unwed mothers were very much

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51 People staff.
52 People staff.
53 Fessler, 59.
54 Fessler, 59.
looked down on. It could even rub off on their whole family.”\textsuperscript{55} Having a child in this situation was “a public humiliation, evidence of parental, especially maternal, failure in the form. . . of the latchkey kid headed towards juvenile delinquency or the unwed mother.”\textsuperscript{56} Confronted with this painful reality, many families saw maternity homes as the only option to protect both themselves and their daughter from judgement, shame, and humiliation.

Additionally, the absence of legal and easily accessible abortion in conjunction with the pervasive stigma left many women feeling lost and confused, unsure of their options and resources. During this time, “single motherhood was not a viable choice if you were white and middle-class: the stigma was simply too crippling to live with.”\textsuperscript{57} Young women knew they needed to figure out a discrete way to deal with their pregnancy, and many looked to maternity homes to do so. Scared, confused, and not sure what to do, maternity homes seemed to provide the ideal option for unwed mothers: a place to hide and ride out their pregnancy to avoid the shame that would inevitably be brought upon them and their families.

\textit{Changing Practices}

By 1947, maternity homes started to phase out religiously oriented employees who wanted to keep mothers and babies together and introduced a new wave of professionally trained social workers who typically embraced different ideas regarding these women.\textsuperscript{58} By the early 1940s, social workers largely believed that adoption was better than “‘keeping mother and child together’ . . . Rejecting the idea that all women who had borne children were suitable mothers,

\textsuperscript{55} Rather, 9.
\textsuperscript{57} Harvey, 22.
\textsuperscript{58} Wilson-Buterbaugh, \textit{The Baby Scoop Era}, 48.
social workers maintained that they must individualize each case . . . and decide which women should or should not put their infants up for adoption.”59 Unfortunately, social workers often did not individualize each case, and instead, broadly deemed unwed mothers unfit without investigating their personal situation or opinions about the situation. Policy and education for social workers did little to discourage this practice.

By 1951, policy in homes had undergone a total transformation. A policy statement from Chicago’s Florence Crittenton Anchorage stated that “the baby must be given in for adoption for [the] protection of himself and [the] mother.”60 In contrast, a Florence Crittenton brochure from 1952 reflects this shift and inconsistency in policy between homes. Consistent with the original philosophy, it states that “the mother is under no compulsion, either to leave her baby with us or to take him with her. There is no priority for either.”61 Issued one year after the Chicago Anchorage asserted that the baby must be surrendered for adoption, this statement contradicts the previous, indicating that the home had no interest in coercing women to surrender their babies for adoption and would support the women regardless of their decision. The brochure also states, however, that the mother “is not always well qualified to make this last decision.”62 In contradiction with the previous statement, which undoubtedly places the decision in the hands of the mother, this statement now opened the door for coerced adoptions by suggesting that the mother was not qualified to decide her own child’s future. Just fifteen years earlier, homes encouraged women to keep their babies. Now, many homes required women to surrender their children for adoption. The inconsistency in policy within and between homes also suggests that

60 Sedlak, 456.
61 Fessler, 150.
62 Fessler, 150.
homes operated under their own initiatives and did not adhere to an agency-wide set of regulations or policies.

In 1953, the Children’s Bureau came out with a publication titled, “To Better Children’s Chances.” This publication emphasized that child welfare services were social services especially for children, and stated that the “first effort of a child welfare worker is to keep the family together.” Only once it had been established that this is impossible should the worker look to other options, such as adoption or foster care. This standard was consistent with what the Child Welfare League proposed fifteen years earlier in 1938. Most social workers in maternity homes, however, did not even consider keeping the family together. Their only goal was to place the child with a family more deserving of a child than its mother.

In 1955, the United States Department of Health, Education, and Welfare also issued a report that addressed the rights of unwed mothers at a Children’s Bureau conference. The report clearly stated that “the mother of a child born out of wedlock has the same rights, moral and legal, as the parent of a legitimate child.” By 1960, however, the Committee on Adoptions upheld a different position, and stated that “the most suitable plan for the unmarried mother has been found, in most instances, to be the relinquishment of the child so that it may be placed in adoption. A child kept by the mother may suffer from lack of support that a father, family, and other relationships provide.” This statement reinforced traditional ideas of female inferiority by insisting that the child would inevitably suffer without a father and insinuating that male influence was necessary to properly raise a child. Additionally, this statement not only highlights

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a shift in standards and practices towards unwed mothers, but also further reveals the inconsistency of policy surrounding these situations.

Well-educated social workers sought to rectify the unacceptable ideas and practices that plagued the minds of social workers in maternity homes. Jane Wrieden, a leading Salvation Army social worker at the time, distributed a paper titled “The Meaning of the Maternity Home” to the United States Children’s Bureau in 1956, in which she argued that maternity homes should be a place of acceptance, security, and group living for unmarried mothers. She explained that “by unmarried mother, [she meant] a person with all the dignity of a human personality who comes to our attention because she is pregnant out of wedlock. [She did] not mean a category, a statistic, or a social or psychological phenomenon, or a resource for adoptable babies. [She meant] a person.”65 A seasoned social worker, Wrieden recognized the corrupt practices within maternity homes. After interviewing one hundred social workers, she concluded that many social workers did not fully comprehend the meaning of a maternity home experience for unwed mothers.66 She defined a ‘good’ maternity home as “one having a sound philosophy and clearly stated flexible policies; adequate casework and groupwork with psychiatric and psychological consultation; adequate plant, facilities, and location; provision for adequate medical care; effective public relations and sound financing.”67 Unfortunately, as testimonies will later reveal, most maternity homes did not fall under this definition, but far from it.

Even during the early stages of this shift, Kate Barrett’s son, Robert Barrett, who became the president of the NFCM in 1925 after her death, recognized the harm social workers could

66 Wrieden, 23.
67 Wrieden, 24.
inflict upon unwed mothers in maternity homes years before homes fully integrated them into the system. Witnessing the beginning of the shift in the nature of maternity homes, he strongly opposed placing social workers in the homes. Concerned that they were not properly equipped to handle the fragile cases of unwed mothers, he stated:

I do not think that . . . the great majority of social workers (especially young, unmarried women) are competent to handle the problem of the unmarried mother and her child. A master’s degree in social work does not always qualify a young woman to deal with the intricate problems of social behavior. . . . An unwed mother must not be rushed into the decision to give up her baby for adoption until every other avenue has been explored and every other door opened.68

Robert, involved with maternity homes since birth, not only recognized the harm that social workers could do to unwed mothers in these homes, but also warned of the general lack of training among them.

In further attempts to set guidelines for adoption practices in maternity homes, Joseph H. Reid, executive director of the Child Welfare League of America from 1953-1978, delivered a paper titled, “Principles, Values, and Assumptions Underlying Adoption Practice” to a captive audience of social workers from all across the United States at the National Conference of Social Work in May of 1956. This paper is one of many documents used to educate social workers at the time and reveals practices that the Child Welfare League of America and the profession of social work considered normal and acceptable. One of the principles listed in this paper stated that “as a practice, there needs to be casework determination of the needs of the child, the natural parents, and the adoptive parents before a sound adoptive placement can be made.”69 This principle established in writing that the needs of not only the child, but also the natural parents

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and the adoptive parents should be evaluated through casework throughout the adoption process. Expanding upon this principle, the paper also noted that “the natural parents must be free from duress or pressure in making the decision.”

In these principles, Reid clearly asserted that adoption must be a collaborative process aiming to best meet the needs of the child, the natural parents, and the adoptive parents, without pressuring any of these parties into making a decision.

Reid also dedicated a section of this paper to values, where he attempted to define the values of social workers involved in adoptions. Here, he acknowledged that many of the values that social workers foster “have grown out of historical accidents and the community and culture in which we live.” These ‘historical accidents’ refer to the stigma surrounding unwed pregnancy and motherhood. In the section dedicated to unmarried mothers, he clarified that social workers often held more conservative opinions of unwed mothers than the general public or opinions that more closely aligned with their own beliefs and prejudices than accepted practices. He continued to describe how the “pendulum of social work attitudes” towards unmarried mothers swung erratically over the past several decades, and that the “scarlet letter of Hawthorne” that branded unmarried mothers years ago still existed.

Professionals also acknowledged the issue of supply and demand for babies and speculated the influence this demand had upon employees facilitating adoptions. Margaret Thornhill, a Special Consultant in the Division of Social Service, collected data that revealed the demand for babies well exceeded the supply by an estimated ratio of around ten requests to one placement. This high demand for babies from married couples in conjunction with social

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70 Reid, 223.
71 Reid, 224.
72 Reid, 227.
workers preconceived idea that unmarried mothers were inherently unfit created the perfect conditions for social workers to justify coercing women to surrender their babies for adoption. These practices resulted in a particularly high rate of relinquishment for women in maternity homes. In 1955, 72% of children adopted by nonrelatives were born to unmarried mothers. In accordance with Thornhill, Joseph H. Reid also noted that “adoption has changed from a dubious, seldom-used method of providing care for children to an extremely popular one in which the present problem is a too short supply of the kind of infants in demand.” Social workers looked to place babies from unwed mothers with married couples they believed to be more deserving.

While the profession of social work increased in popularity, many social workers found themselves employed in maternity homes without advanced education or training in the field. The stigma surrounding unwed motherhood intensified at the same time that women began liberating themselves sexually, and as such, the number of pregnancies and need for maternity homes increased. Homes opened left and right to accommodate the number of unwed mothers, and these homes needed employees to manage them. Thus, agencies often threw social workers into homes with little training to fill the need for employees. In 1950, fifty percent of caseworkers and forty percent of child welfare workers in non-institutional public welfare programs did not have advanced or graduate education in social work. Even Jane Wrieden felt that many social workers lacked the proper education or training to work in maternity homes. She believed that adoption workers needed to have extensive experience with case work on top of a graduate degree from an accredited institution, and that many employees in maternity homes

74 Thornhill, 181.
75 Reid, 222.
did not have the proper training or experience necessary to do their job and adequately serve residents.\textsuperscript{77}

In a public apology issued in 2012, Jeanette Pai-Espinosa of the NFCM acknowledged that starting in the 1940’s, homes strayed significantly from the original philosophy they fostered from the 1880’s onward. She stated that the Crittenton agencies today are “aware of, saddened by, and regret the experience of mothers” in their homes.\textsuperscript{78} She clarified that “these practices were not required, supported, or endorsed by any National Crittenton directive and as independent agencies or homes each had the ability to determine its own priorities and operating policies.”\textsuperscript{79} While her apology served as an admission of guilt on behalf of the NFCM, she did intentionally make it clear that the practices were not those dictated by the NFCM, but by employees of individual homes. The practices of ill-trained social workers in these homes were of their own initiative and reflected their own personal beliefs and ideals.

It is evident that many social workers in maternity homes lacked proper education and the ability to remove their personal biases from their work. Social work as a profession was a relatively new to begin with, and as such, the field lacked firmly established training requirements and education standards. Since the advent of professional social work, many people without any formal training have been misrepresented as social workers.\textsuperscript{80} Due to the rapidly increasing need for employees in homes, however, social workers found themselves in positions they may not have had the training for, and acted in a way that did not reflect the guidelines or standards set by the homes or professional social work.

\textsuperscript{77} Wilson-Buterbaugh, \textit{The Baby Scoop Era}, 56.
\textsuperscript{78} Jeannette Pai-Espinosa, response to Dan Rather Reports, April 29, 2012.
\textsuperscript{79} Jeannette Pai-Espinosa, response to Dan Rather Reports, April 29, 2012.
\textsuperscript{80} Gail Woods Waller, response to Dan Rather Reports, 2012.
Social workers often allowed their own biases or values to interfere with their work with unwed mothers. Mary, a social worker involved in adoptions at the time, admits that social workers and other professionals involved with unwed mothers believed in this stigma: “

‘Probably best to put the child up for adoption’ . . . was the belief of the persons who did the counseling. . . and I don’t think they made an extra attempt to be totally objective.”

Reid acknowledged that “social workers hold certain ideas of what is good for children. These represent their own values, which may or may not be consistent with the values of others, and often are, in fact, in conflict with them.”

While prominent social workers and people involved in children’s welfare attempted to promote proper education and practices of social workers in maternity homes, unfortunately a large portion of social workers took matters into their own hands. The practices they employed within maternity homes were highly judgmental and punitive towards unwed mothers. For example, in 1965, psychiatrists Phillip Solomon and Morris Ward Kilgore stated that “every unmarried mother is to some degree a psychiatric problem. . . the victim of mild, moderate or severe emotional or mental disturbance,” effectively classifying all unwed mothers as mentally ill without any sort of evaluation. They did not seek to evaluate the mental health of unwed mothers, rather, just assumed that they were all mentally disturbed. Social workers in maternity homes fostered this view of unwed mothers, and likewise came up with unsupported diagnoses for residents to justify maltreatment.

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81 Rather, 13.
82 Reid, 23.
Jane Rowe, an adoption social worker, based her practices around her belief that “women having out-of-wedlock children tend to be rather disturbed people.” Rowe not only declared an entire group of people as mentally disturbed with no evidence, but also equated unwed pregnancy to a psychological disturbance, reinforcing the idea that women should not be having sex for pleasure. Rendering unwed mothers mentally disturbed also implied that women who had sex out of wedlock in general also suffered from mental disturbances. Without a pregnancy, there was no physical evidence to serve as proof, and these women flew under the radar. Psychiatrists and other professionals also contributed to this stigma, even going as far as to suggest that women purposely became pregnant, and that their intentional pregnancy served as evidence of their disturbed psychological condition. Professionals clearly looked to place blame upon the mother by whatever means possible, even based on shaky evidence.

In terms of shaky evidence, professionals also used the fact that mothers did not seek an abortion or contraceptives to further blame women for their pregnancy. Some even believed that the fact that a woman did not prevent or terminate her pregnancy served as concrete evidence of a psychological condition. The leading social work theorist in unwed motherhood at the time, Leontine Young, encouraged this belief, stating, “we know that the pregnancy is purposive because the girl doesn't consider contraception and doesn't want an abortion.” In one of her cases, social worker Helene Deutsch wrote: “The fact that she expected the man to take full

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responsibility for contraception shows that here her infantile narcissism won the upper hand over her proud self-reliance."  

Deutsch made this assessment of her client in 1945, fifteen years before the FDA approved the first oral contraceptive and twenty years before the Supreme Court gave married couples the right to use birth control in *Griswold v. Connecticut*. The only contraceptives available at the time were male condoms, yet somehow, the woman was still responsible for preventing her pregnancy. In the late 1950s, psychologist Stephen Fleck studied one hundred unwed mothers at the Florence Crittenton Home in Seattle, Washington. From this study, he concluded that in most cases, the women wanted to be pregnant because they did not get an abortion. *Roe v. Wade* did not legalize abortion until 1973, meaning that Fleck believed that women who did not seek out an illegal, often dangerous, abortion, the only valid conclusion was that she wanted to be pregnant.

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Table 12. Plans for the Baby at Time of Discharge, by Race: January-June 1962

<table>
<thead>
<tr>
<th>Plans for Baby</th>
<th>Total</th>
<th>White</th>
<th>Negro</th>
<th>Other</th>
<th>No Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>2981</td>
<td>2713</td>
<td>196</td>
<td>46</td>
<td>26</td>
</tr>
<tr>
<td>Kept by mother</td>
<td>340</td>
<td>260</td>
<td>65</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Released to private agency</td>
<td>1214</td>
<td>1155</td>
<td>40</td>
<td>14</td>
<td>5</td>
</tr>
<tr>
<td>Released to public agency</td>
<td>692</td>
<td>636</td>
<td>43</td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>Released to FC</td>
<td>79</td>
<td>78</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Independent placement</td>
<td>11</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Pending</td>
<td>158</td>
<td>144</td>
<td>11</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Baby did not live</td>
<td>53</td>
<td>49</td>
<td>1</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>No report</td>
<td>434</td>
<td>383</td>
<td>35</td>
<td>10</td>
<td>6</td>
</tr>
</tbody>
</table>

at the time the card was filled out. For the 257 girls who received counseling only and the 228 who left the maternity home before delivery, plans for the baby would usually not be known. These two groups account for more than the 434 for whom plans were not reported.

A comparison with the same period of 1961 shows that the proportion keeping their babies was the same in both years but the number released to social agencies for adoption increased from 63 percent of the total in 1961 to 67 percent in 1962. This increase occurred largely in the number released to private social agencies. The number of independent placements dropped from 34 in 1961 to 11 in 1962. Even though Florence Crittenton member agencies encourage placement through a licensed adoption agency, some homes accept for service a girl planning independent placement in the hope that she may change her mind. However, three agencies specify that they will not admit mothers who are planning independent adoptions.

Considering the general shortage of adoptive homes for Negro infants, it is not surprising that one-third of the Negro mothers had to keep their babies compared with 10 percent of the white mothers. Also, a smaller proportion of Negro than of white babies were released to private agencies for adoption.
Figure 1 depicts a table produced by the Florence Crittenton Association of America. This table reflects data collected from Florence Crittenton homes from January-June of 1962. The data reveals that out of a total 2,981 mothers, only 340 kept their babies. In the following analysis, the association notes that adoption increased from sixty-three percent in the previous year to sixty-seven percent. This rate of adoption is markedly different from previous years and supports the discussed transition from encouraging women to keep their babies and pressuring them to surrender their babies for adoption. Between 1890 and 1930, “perhaps two babies in ten were adopted.”88 While the table does not indicate a reason for the continued increase in adoptions, it can be speculated that it was due to the shift in practices in the homes.

This table also sheds light upon racial inequalities in maternity homes. The table notes that only 196 African Americans resided in the Florence Crittenton Home during the collection period, compared to 2713 whites. This dramatic difference in numbers is not because more whites found themselves pregnant out of wedlock, but because maternity homes did not see African American babies as ‘adoptable’ as white babies. It notes that “considering the general shortage of adoptive home for Negro infants, it is not surprising that one-third of Negro mothers had to keep their babies compared with 10 percent of white mothers.”89 This statement reveals the true nature of coerced adoption in maternity homes. Employees coerced white women to surrender their babies for adoption because of the substantial number of couples looking to adopt white babies. They did not coerce African American women, however, because there was not a growing market for adoption of African American babies. Social workers specifically targeted

88 Sedlak, 456.
white women, as the demand for their babies outnumbered the supply.

Throughout the 1960s, many maternity homes distributed a pamphlet titled, “When You’ve Made a Mistake,” to their residents. The pamphlet aimed to convince women that adoption was the only choice for their baby. The pamphlet offers three sections, the first, second, and third choices for the mother. The first choice the pamphlet offers is to marry the baby’s father. “Maybe this man or boy is really in love with you and you two can marry and live happily ever after with your baby. Sound like a fairy tale? Sadly enough, it is a fairy tale.” The paragraph goes on in attempts to convince the mother that marrying the baby’s father will not work out, and explicitly states, “don’t marry him! It isn’t worth it! For you, or for your baby.” The wording of the pamphlet clearly tries to scare young mothers and persuade them to believe that marrying the baby’s father is a bad idea. It paints the picture in the minds of young women that their marriage and lives will be miserable, that their husbands will hate them, and that the baby will undoubtedly suffer from her selfish choice to marry its father.

The next paragraph of the pamphlet, the second choice, is equally as frightening and persuasive as the first. It reads, “the only other way to keep the baby yourself is to give up your family, your friends, your church, your school, and move to another city. You can buy yourself a wedding ring, build a life around a dead soldier husband or a husband killed in an automobile accident. But you won’t be able to go back home, even for a visit, and take your baby with you.”\[90\] This statement confirms the lack of acceptance of unmarried mothers at the time, to the extent that they advised them to wear a fake wedding ring and make up a fake husband. Additionally, it states that the only two options for keeping the baby are marrying the baby’s

\[90\] Dunleavy, 1.
father, which has already been classified as an invalid option by the first paragraph, or abandoning their entire lives and families to raise the baby in secret. The pamphlet offers no options in between the two radical ends. Additionally, it tries to make the reader feel sad at the thought of never seeing their families or friends again at the cost of raising their baby.

The third choice the pamphlet offers women is “Your Best Choice.”\textsuperscript{91} The title alone presents the paragraph in a completely different manner than the previous two. It reads, “forget your aching heart, and give the baby up for adoption....A terrible price to pay for the mistake you made? Yes! But to give your baby a normal home-life, the love of a mother and father, it’s a price worth paying...”\textsuperscript{92} The message here is clear: regardless of your feelings or circumstances, giving the baby up for adoption is the best choice. It also should be noted that it refers to adoption as the price to pay for the “mistake you made,” implying that it is the woman’s fault that she became pregnant and that she alone must deal with the consequences.\textsuperscript{93} It also suggests that the biological mother would be incapable of providing the baby with a “normal home-life” solely based upon the fact that they are young and unmarried. The rest of the paragraph uses language intended to make the mother feel guilty for depriving her child of such a wonderful life with a different couple.

The final lines of the pamphlet, titled, “Where to Get Help,” lists maternity homes and agencies for women to visit. It finishes with, “agencies are waiting for you with counselors to help make sure your mistake does not stay with you all the days of your life.”\textsuperscript{94} Again, the pamphlet renders the woman’s pregnancy the result of her own mistake, a mistake that will bring

\textsuperscript{91} Dunleavy, 1.
\textsuperscript{92} Dunleavy, 1.
\textsuperscript{93} Dunleavy, 1.
\textsuperscript{94} Dunleavy, 1.
shame and guilt upon her for the rest of her life. The pamphlet uses no positive language towards any choice except giving the baby up for adoption. It is clearly engineered to scare the woman into thinking her only option is adoption, as the consequences presented for the other two options seem drastic. The fact that homes widely distributed this pamphlet to unmarried mothers particularly proves that this agency intended to convince this group of mothers to give their babies up. It also aimed to degrade them and make them feel like they were unfit to be mothers. It is indicative of the conditions at the time and provides a glimpse of the degradation and emotional abuse women experienced within the homes.

Clearly, homes at this time no longer prioritized supporting mother and baby together, but instead, sought to make sure that the baby did not fall under the care of its immoral and unfit biological mother. This societal belief fostered by employees resulted in young mothers being coerced or forced to put their babies up for adoption in these homes. During this period, employees of maternity homes forced millions of women to give up their babies in these homes. Maternity homes from the late 1940s through the early 1970s were completely different in nature than their founders intended them to be.
Law

United States law and policy surrounding adoption during this period is fuzzy at best, but what is clear is that the law did not require or support the actions of employees in maternity homes. While some laws applied nationally, each state also developed unique legislative framework regarding adoptions. For example, some states required adoption petitions to be filed in the petitioner’s state of residence and accompanied by a home visit to the perspective adoptive parents, but other states had no such regulations. Reflecting upon the legislation issued throughout this period, there are many inconsistencies and shifts in standards. As such, it is clear that adoption law was inconsistent at best and poorly regulated. Variations on a state-to-state basis combined with the fact that there was absolutely no agency designated to enforce adoption laws and regulations created room for employees to bend or ignore the rules and take matters into their own hands.

The United States did not see a need for legislation specific to children until the mid 1800s. In 1851 Massachusetts implemented the first statute recognizing adoption legally, the Adoption of Children Act. Prior to this statute, illegal adoptions often took place in efforts protect the mother from the shame and hardship of raising an illegitimate child. This statute recognized adoption as a legal process and classified it as an operation centered around the welfare of the child, rather than benefitting the parents or other adults. This reflected the newfound interest in children as their own entity as well as the growing interest of citizens in some states to create legislation specific to them. The act quickly took root throughout the rest of

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95 Thornhill, 182-3.
96 Thornhill, 183.
the United States, and during the twentieth century, numbers of adoptions increased dramatically.

The law also did not explicitly define the nature of a parent’s right or interests regarding their child. The United States Supreme Court did suggest, however, that the Fourteenth Amendment guaranteed the right to marry, establish a home, and bring up children. Building upon this interpretation, the court also established the level of parental consent necessary for the adoption of children, declaring that the biological parents must consent to a child’s adoption for it to be valid.

In 1921, the Supreme Court found in Stafford v. Stafford that the best interests and welfare of a child are presumed to be best served in the care of the natural parent. This ruling recognized the natural parents as the most fit caregivers for their child unless proven otherwise. In 1927, the Supreme Court ruled in Commonwealth v. Ball that “while the rights of parents are to be protected in such cases, the welfare of the child is the ‘paramount consideration.’” Expanding upon the ruling in Stafford v. Stafford, this case legally prioritized the rights of the natural parents while also emphasizing the importance of the child’s wellbeing. These two rulings together suggest that United States policy believed that a child belonged with its natural parents unless placement with its natural parents would put their wellbeing in jeopardy.

In Skinner v. State of Okl. Ex Rel. Williamson (1942), Supreme Court Justice William Douglas delivered the opinion of the court, which stated that the right to have offspring is “a right which is basic to the perpetuation of a race.” The court ruled that facilitating adoptions

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99 Jones, 292.
100 Stafford v. Stafford.
101 Commonwealth v. Ball.
based upon the supposed unfitness of young women as mothers was unconstitutional. A person cannot be deemed unfit and deprived of their child on that basis by just anyone—the court must assess the situation and officially determine unfitness. In *Giacopelli v. Florence Crittenton Home* (1958), the court reaffirmed the previous ruling in *People ex rel. Aldred v. Kurtz* (1954), that “a parent has a right to the custody of his child against all the world,” unless the parents forfeited that right or the welfare of the child is in jeopardy. The ruling noted that fitness of a parent is to be presumed unless unfitness is proven with clear evidence.

Ignoring this ruling, many employees of maternity homes deemed women unfit with no evidence to support this determination aside from their marital status. Under the fourteenth amendment of the United States Constitution: “No state shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States; nor shall any state deprive any person of life, liberty, or property, without due process of law; nor deny to any person within its jurisdiction the equal protection of the laws.” Social workers convinced many women that they had no right to their child in order to facilitate her surrender of her child for adoption. This practice is in direct violation of the fourteenth amendment, which clearly states that citizens cannot be denied the privileges or immunities of the United States, including reproduction, without due process.

*Meyer v. Nebraska* (1923) guaranteed parents and guardians the liberty to direct the upbringing of children under their control. Prior to surrendering their child for adoption, many mothers pleaded to social workers that if they must surrender, that they would at least ensure that

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103 Giacopelli v. Florence Crittenton Home, 450.
104 Giacopelli v. Florence Crittenton Home, 450.
105 U.S. Const. amend. XIV. Sec. 1.
their child went to a home with certain qualities and characteristics. At this point, the child was still under the control of the mother, which placed decisions concerning the child’s upbringing in her hands, not the social worker’s. Christine, an unwed mother in a maternity home at the time, remembers her social worker promised that her child would go to a family that was “college educated, degreed. . . much older. . . own[ed] their own home, [and had] high incomes.” In reality, however, the couple was “just a couple of years older, and neither one had a college education. . . they also divorced when [the baby] was fourteen.” Christine explicitly stated the type of home she wanted her child to be raised in, and yet her social worker ignored her wishes entirely. In cases like Christine’s, social workers violated the law by going against the wishes of the mother while the child was still legally under her directive.

While maternity homes and adoption agencies did not make laws, they did enforce rules that had no legal backing. They deemed mothers unfit based on their marital status without any due process of the law and used this as justification for forcing or coercing women to surrender their babies. Their actions deprived women of one of the many privileges of being a citizen of the United States, one of which being reproduction, without due process. Social workers chose to take the law into their own hands by forcing women to surrender their babies based upon their own judgement of their fitness as mothers. Social workers denied women the right to their child based upon their own ideas and beliefs, not standards set by United States law.

107 Fessler, 151.
108 Fessler, 151.
Many women have spoken out about their experiences in maternity homes through books, documentaries, and articles. Their stories confirm illegal activity, abuse, and reveal the true nature of maternity homes at the time. Carla Clary resided at St. Anne’s Maternity Home in downtown Los Angeles in 1967. In remembering her time spent at St. Anne’s, she couldn’t “think of anything more traumatic than being dropped off at a facility where you know no one, and no one really cares about you…no sympathy, no counseling, no, ‘you’ll be okay, we’ll get through this, we’re here to help you.’ No.” She describes her experience there as a “concentration camp. That’s the way I felt. I was—had no control over anything. You were told when to get up, when to eat, what to eat, where to go and when to go to bed.”

Women in maternity homes were not only treated like prisoners, but were also ill-informed of their medical status, options regarding the child, and general information during their stay. As Chris Laplume, an ex-resident of St. Mary’s Maternity Home in Dorchester, Massachusetts, recalls, there was “not one minute of counseling. Ever. I didn’t even know what was happening to my body, never mind counseling about giving up the child and what was gonna happen to her. This was the right thing to do, that I should give this child for adoption. This is how it was done.” Chris did not receive information on the medical aspect of her pregnancy, let alone what would happen to her child. Maternity homes kept women in the dark for the majority of their pregnancies, leaving them afraid and confused.

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109 Rather, 3.
110 Rather, 3.
111 Rather, 12.
When asked about the types of counseling offered to these women, employee Mary corroborates Chris and Nancy’s stories. She admits that if women had access to counseling, options other than adoption were “mentioned, but it wasn’t expected that [they] were gonna pay attention to that.” Kathy Aderhold, a resident of a Salvation Army Maternity home in Omaha, Nebraska, felt that the girls were treated “like cattle” in the home. She describes how they were “just, you know, told what to do and pushed here and pushed there and eat here and lights off at 10:00. It was like being in jail. . . We were prevented from making phone calls. . . all of our mail was censored.” Another woman states that “the agency made it ‘very difficult’ . . . for her by withholding information.” Mary even agreed that the homes wrongly withheld information from their residents: “There were cases I felt they withheld information that should have been shared, but that was my personal opinion. And because I was in a position of no power I kept that opinion to myself for the most part.” Here, Mary not only confirms that homes withheld information from women, but also scratches the surface of the internal dynamics of these homes.

Even though Mary recognized that homes withheld information from women, she did not feel that she was in the position to speak up and say something about it. The fact that an employee involved in maternity homes at the time admits that she felt there was foul play and felt that she was not able to bring it to light suggests that these homes placed pressure on their employees to keep quiet about their practices. Mary also admits to maternity homes forging documents and paperwork. At her maternity home, if the backgrounds of babies didn’t match the requests of adoptive families, their backgrounds would “get colored” by employees. By

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112 Rather, 12.
113 Rather, 11.
114 Rather, 11.
115 Rather, 13.
116 Rather, 14.
‘colored,’ she means embellished, as employees often changed babies’ race or lied about their parents to make them more attractive to adoptive families because the demand for ‘adoptable’ babies with attractive backgrounds well exceeded the supply.\textsuperscript{117}

Troy Dunn, a professional locator who helps women reconnect with children they lost at maternity homes, describes fraudulent paperwork in the adoption process at this time as “so common it [was] almost standard practice for some places.”\textsuperscript{118} He notes that employees falsified any and all aspects of documents, from dates and place of birth to background, as Mary mentioned. “I can’t tell you how many times I had to call someone up and tell them, ‘Guess what, you’re eight months older than you think you are.’ Or, ‘You are one of a set of twins.’ Or, ‘You weren’t born in Toledo, you were born in Cincinnati.’”\textsuperscript{119} He remembers that employees often rationalized their illegal activity and believed that it was best for everyone involved. Not only is falsifying documents illegal, but it also significantly reduced mothers’ chances of reconnecting with their lost child. Without a second thought, employees took pieces of these children’s’ identity away from them, and simultaneously made it more difficult for their birth families track them down or vice versa.

Along with a lack of information, shame and isolation characterized Kathy Aderhold’s experience giving birth in a maternity home. She remembers: “I was completely alone for my entire labor, which was very long and very difficult. It was 29 hours. They—um, didn’t answer the call bell when I rang for help. They pretty much ignored me. And that’s what they did with all of the girls. And if we did cry out they would say, you know, ‘Be quiet. Nobody wants to hear

\textsuperscript{117} Rather, 13.
\textsuperscript{118} Rather, 20.
\textsuperscript{119} Rather, 20.
you.’”  

Going through labor and giving birth for the first time is a stressful enough for a young woman, let alone having to go through it alone. Leaving young girls alone to struggle through labor certainly constitutes a level of emotional abuse. According to the United States Office on Women’s Health, emotional abuse includes “insults and attempts to scare, isolate, or control” a person, which was clearly the case here. Along with having to give birth alone, employees of the home also ignored women during labor, and told them to be quiet because nobody wanted to hear them. In accordance with Kathy’s testimony, Nancy Horgan remembers her birth being “humiliating,” and that she was “dropped off at the hospital entirely on [her] own.” After spending the evening in labor alone, she “was taken to a big room and strapped to the delivery table.” She mentions that she could see the reflection of her child being born through the lamp over her head, but when hospital staff noticed that she could see, they tipped the lamp away—“the child was for them to see, not for me.” These two women not only had to endure the excruciating pain of labor all on their own, but also had their feelings invalidated and ignored by home and hospital staff.

While these testimonies portray the birth experience of many women in maternity homes, prominent figures in the community of social work did not encourage or recommend this sort of treatment. Margaret Thornhill, a psychiatric social worker, stressed that “every mother who relinquishes her child for adoption. . . needs medical. . . and social services. These services

120 Rather, 15.
122 Rather, 15.
123 People Staff.
124 People Staff.
125 People Staff.
cannot be given in isolation.” As evidenced by the testimonies of Kathy and Nancy, however, it is clear that many maternity homes and hospitals did not meet this standard. Chris Laplume had a similar experience at St. Mary’s, where employees strictly forbade residents from spending time with other pregnant women, particularly married pregnant women. They placed the women into separate rooms, where they were unable to communicate or interact with one another. “I don’t know if they thought it would wear off—but—we were put in a room by ourselves and labored by ourselves.” Isolating women in homes and during labor was a commonly used tactic by employees, but not one that any accredited member of the field condoned or recommended.

At a Children’s Bureau conference, Jane Wrieden emphasized the importance of maternity homes being a place of security for unwed mothers, but did not “mean a wall around an enclosure to separate a person” from the rest of the world, but “a bridge between two points.” Ideally, women in maternity homes would be well integrated into the community of the home, counseled, and prepared for the next steps in her life. In reality, women left homes anything but prepared for their next steps in life: confused, shattered, and traumatized. Social workers in the Children’s Bureau certainly did not recommend or support isolation tactics, but social workers in maternity homes ignored these guidelines and isolated women anyway. Again, they erroneously allowed their own beliefs and ideas to drive their work with unwed mothers.

Connie, who spent her pregnancy at the Emily Dickinson Opportunity School, remembers meetings with her social worker being “embarrassing,” and that her social worker “never discussed keeping [her] baby. . . or any rights [she] might have had at the time.”

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126 Thornhill, 180.
127 Rather, 12.
128 Wrieden, 25.
is a consistent pattern of professional employees making women feel shame and embarrassment throughout their pregnancies. Leslie Pate Mackinnon remembers her six-week checkup with her OB/GYN, who assured her that everything was fine with the baby but wanted to provide Leslie with counseling. He informed her that she should never tell her future husband that she had had a child, because “no one wants damaged goods.” The doctor clearly perpetuated the stigma surrounding unwed mothers, implying that their pregnancy rendered them damaged goods, tainted by immorality. At another convention of the Children’s Bureau, Lucile Boole noted that the social worker’s first effort should be: “Toward gaining enough information to assure the patient that there are sources of help open to her, to offer services to alleviate some of her worry, and to help make plans for herself and her baby. The right of the patient to formulate and execute her own plans is acknowledged.” However, as previously discussed, many social workers had little interest in alleviating worry for the mother or allowing her to formulate her own plans. Instead, social workers instilled fear and shame in women, and convinced them that they had absolutely no right to their child.

There is also evidence that employees of maternity homes used physical means to force women to consent to the adoption of their child. Cynthia remembers telling a social worker that she loved her baby, wanted her baby, and would under no circumstances be signing adoption paperwork. After five futile hours of relentless verbal coercion, the social worker “stood up, called [her] a ‘little slut,’ took [her] hand in her hand and signed the adoption papers.” Cynthia had no intentions of relinquishing her child for adoption. She spent hours telling her social

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130 Rather, 15.
132 Rather, 14.
Donovan

worker that she loved her baby and wanted to keep her baby. Unsatisfied with that answer, the social worker elected to take matters into her own hands, forcibly and fraudulently signing the adoption paperwork.

United States adoption legislation clearly rendered adoptions obtained by fraud or duress invalid and voidable. In 1945, an amendment passed that stated:

A consent to adoption or a surrender to a licensed child welfare agency for the purpose of adoption by a parent or parents including any who are minors executed and witnessed or acknowledged in accordance with the provisions of Section 3-6 of this Act shall be irrevocable unless it shall have been obtained by fraud or duress and a court of competent jurisdiction shall so find. The consent of a parent who is a minor shall not be voidable because of such minority.¹³³

This amendment established that an adoption is irrevocable unless obtained under fraud or duress. Most adoptions from these testimonies fall under this category. Additionally, a Supreme Court case in 1961 directly addressed the forced and coerced adoptions in maternity homes. Karr v. Weihe, a mother sought to challenge the adoption of her child, which she argued was fraudulently obtained. The mother, Mrs. Karr, gave birth to her child at eighteen years old. She had never been to a hospital and was unfamiliar with the laws of adoption. Mrs. Karr signed the adoption paperwork less than 96 hours after the birth of her child, under the influence of drugs and without proper information about the adoption process. The court ruled in favor of Mrs. Karr and declared the adoption fraudulent due to the circumstances surrounding the adoption, the mother’s condition just hours after giving birth, and her lack of information and understanding of the adoption process. This ruling established circumstances that rendered adoptions fraudulent: lack of information, state of mind after giving birth, and time between birth and signing the

¹³³ Adoption Act of 1945, Ch. 4, III. Rev. Stats., 1957, par. 3-7.
paperwork. Most experiences of women in maternity homes include at least one of these elements.

Even before the court handed down this decision, Congress passed The Adoption Act of 1959, which added more specific stipulations on consent in adoption. The act stated that “no consent or surrender shall be taken until the passage of 72 hours of the birth of the child.”\textsuperscript{134} This meant that adoptions conducted and facilitated by maternity homes or other agencies could not take place until at least 72 hours after the birth of the child, giving the mother time to recover from birth and thoroughly consider her decision. This ruling protected the mother from making a decision in an altered state of mind and gave her time to spend with her child and consider her decision. The ruling also protected the mother from immediate pressure to surrender her child, giving her 72 hours before being legally allowed to consent to surrender her child.

Testimonies prove that many adoptions did in fact take place in violation of these regulations. Nancy Horgan reveals that social workers and hospital employees simply denied her visitation or access to her baby. After Nancy gave birth to her son, Chris, she asked to see him daily. After several days of refusing to sign adoption paperwork, the head of the hospital came to see Nancy. Nancy told the head of the hospital that she couldn’t “keep [her] from him. He’s mine,” to which she responded, “unfortunately he is, and let’s hope it doesn’t happen again.”\textsuperscript{135} A nurse then placed Nancy into a wheelchair and pushed up to the window of the nursery, where she again asked to hold her baby. The nursery attendant responded, “No. Are you done?,” and took Chris away.\textsuperscript{136} The hospital employees deliberately violated Nancy’s right to her own child, and took Chris away from her after she explicitly stated that she wanted to keep her baby.

\textsuperscript{134} People ex re. Karr v. Weihe, 374.  
\textsuperscript{135} People Staff.  
\textsuperscript{136} People Staff.
In a similar fashion, social workers in maternity homes also took Yvonne’s baby away from her against her will in 1968. They allowed her “no contact with him in spite of [her] pleas because the people in charge were sure that [she] was going to eventually be forced to give him up for adoption even though [she] had not given them any definite promise to do so.” Like Nancy, employees wrongfully denied Yvonne access to her baby. The hospital released Yvonne when her baby was twelve days old. She immediately went to work to make money so that she could raise her son, and her mother even agreed to babysit while she was at work. She called her social worker to inform her that she would be able to keep her baby and asked where and when he could be picked up.

I remember being thrilled that this was finally going to be over, that life was going to go on at last, that there would be no more badgering by this woman about my decision. The following day the social worker called and informed me that if I thought I was going to pick up my son I would have to show up with money to pay my hospital bill, his hospital bill, [our] doctor bills, the maternity home bill, the charges for the ‘counseling’ she had given me and all costs for my son to be in foster care. The meter would continue to run until everything was paid in full, at which time I could finally bail out my poor little baby. She said this knowing full well that on her advice my father had taken me to the county welfare office to apply for welfare to pay these expenses and the application was approved. I cannot remember the exact amount she demanded but remember it being more money than I could ever imagine making.

Yvonne’s social worker abused her power and created monetary barriers to prevent her from taking custody of her child when all other tactics failed.

Women also recall their experiences in maternity homes as a form of indentured servitude. Laura Beall, who was 16 years old and pregnant in 1972, mentions that at maternity homes, “you would become basically the maid, the nanny, the cook and um, for about $10 a

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Karen Wilson-Buterbaugh remembers having to serve mixed drinks at parties during her stay in a maternity home. “You know, 17-years-old and very pregnant, wearing maternity clothes and I was serving drinks to their friends at parties that they would host and they would talk about me, I was their conversation piece. Their little unwed mother. It was humiliating.” Another woman lived with a wealthy Catholic family during her pregnancy, and describes “this is her word, ‘their slave’ of sorts during her pregnancy.” Mary, an employee at the time, “would not be surprised if there weren’t a significant number [of homes] that did meet that description.” Homes relegated mothers to the status of poorly paid employees, and did not treat them with respect or regard them like expectant mothers.

There are cases where doctors and employees treated women with a degree of respect and dignity. Priscilla, who stayed at a ‘wage home’ during her pregnancy in 1964, fondly remembers her doctor, Dr. Barney Bowlin, and “will bless his name forever.” After delivering her baby, Priscilla woke up in a dark room with no concept of time or memory of giving birth. A few days later, a hospital volunteer brought her baby to her for the first time. As Priscilla held her baby, a nun burst into the room and “literally snatched [her] beautiful daughter out of [her] arms. [Saying] ‘You were not supposed to see this baby!’” At that moment, Dr. Bowlin entered the room, saying “For heaven’s sake, sister, let her see her baby! Let her ‘count the fingers and toes.’ She’s not in any condition to run away with her!” The fact that a doctor successfully stood up against a nun trying to prevent Priscilla from seeing her baby proves that people did not have to

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139 Rather, 10.  
140 Rather, 10.  
141 Rather, 10.  
142 Rather, 11.  
passively accept the wrong doings they witnessed. There were opportunities to speak up and make the right decision. Unfortunately, most professionals did not stand up for these women.

The horrors women experienced in maternity homes followed them for the rest of their lives. Many developed psychological, emotional, and physical effects. After surrendering her child, Nancy felt like she “was a horrible, horrible person,” filled with anger, hostility, and rage. She struggled to process her experiences, particularly in the absence of counseling or support. Before her time in a maternity home, Cathy “was always very happy, liked everybody, would talk to everybody, was a class officer in high school, a cheerleader. [She] was that kind of person.” She left the home a completely different person: sad, withdrawn, and hardened; she even equates giving her child up for adoption in that way to a death in the family. Experiences in the home and the loss of their child haunted many women and left them with feelings of sadness, confusion, and grief. Priscilla felt like her “heart was broken [and she] was bereft.”

These emotions stuck with women throughout their lives and shaped how they perceived their lives, children, and motherhood later on. After having her second child, Priscilla “was too protective and hysterical for fear that [she] would lose her. . . [She] also had a nagging sense of insecurity, low self-esteem and self-loathing.” While professionals expected women to simply move on and forget about their experience, the experience of relinquishing a child in general was difficult to forget, let alone under the circumstances seen in maternity homes. Many women pinpoint their time in a maternity home as “the most altering event of [their] whole [lives].”

146 Fessler, 211.
147 Fessler, 209.
148 Fessler, 209.
151 Fessler, 209.
Diane went through the motions of traditional courtship and marriage to please her family, but “everything was a lie:” she did not want to get married, and “the last thing [she] ever wanted to be was pregnant.”\textsuperscript{152} Glory felt like “a whole part of [her], the emotional, compassionate part. . . was simply dead.”\textsuperscript{153}

Women also developed physical ailments in response to their traumatic experiences. Barbara had a nightmare after giving birth where she rode a freight elevator and frantically searched a hospital for her daughter.\textsuperscript{154} This nightmare recurred until she found her daughter at age twenty-two. One year after giving her baby up, Connie started having migraine headaches, so much so that she ended up being hospitalized for a three-month long migraine. The headaches persisted until Connie located her child. Sheryl developed a nervous tic in her voice once she entered the maternity home and struggled to speak thereafter. After a neurologist pinpointed the root of her tic, she understood that she had “been crying all these years through [her] voice,” because she could not at the time.\textsuperscript{155}

On top of the overwhelming feelings of grief and physical effects, women felt like they could not express their feelings and grieve properly. They felt like the loss of their child was “never to be mentioned. . . never to be grieved, it was just to be denied.”\textsuperscript{156} A study on biological mothers’ grief and adoption conducted by Terril L. Blanton and Jeanne Deschner suggested that “the method of adoption used is a significant factor in the grief experienced by biological

\textsuperscript{152} Fessler, 210. \\
\textsuperscript{153} Fessler, 220. \\
\textsuperscript{154} Fessler, 221. \\
\textsuperscript{155} Fessler, 225. \\
\textsuperscript{156} Fessler, 208.
mothers.”157 This method of abuse and coercion certainly induced irreversible feelings and altered women’s lives permanently.

Conclusion

Beginning in the late 1800s, Americans began to recognize children and mothers as a social problem worthy of government intervention and protection. Even though adoption law and policy seemed inconsistent at times, it is clear that the United States government largely sought to protect mothers, children, and families. Likewise, social workers in maternity homes also disregarded the guidelines and recommendations set forth by regulations in the profession of social work and leading figures in the field. While it is evident that the founders of maternity homes had clear, rehabilitative intentions, the character that these homes took on between the 1940s and the 1970s was not consistent with those intentions. Employees within these homes disregarded the recommendations of trained social workers and United States law, and instead based their practices on social stigmas and preconceived notions surrounding unwed mothers. Recommendations and guidelines set by leading social workers did not encourage these practices. When women and families took their cases to court, the United States also deemed aspects of these practices unconstitutional.

By taking matters into their own hands, social workers changed the lives of these women and their children forever. Millions of women lost their babies during this time, and many spent the rest of their lives internalizing feelings of guilt, confusion, and loss. Social workers asserted their prejudice against unwed mothers in a way that reinforced traditional gender norms and

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made women feel guilty and immoral. Additionally, they singlehandedly decided which people
deserved to be parents and which did not. The practices of social workers went far beyond
violating U.S. Law or social work regulations. They violated basic human rights and subjected
women to psychological abuse in order to facilitate adoptions for ‘more deserving’ couples.
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