## Editor's Note

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Welcome to the second issue of *The Newcomb College Institute Research on Women, Gender, & Feminism.* This issue is devoted to undergraduate scholarship on the history of reproductive health. We are excited to showcase essays that draw upon manuscript collections from the Newcomb College Archives, newspaper articles, government documents, and recent scholarship on reproductive health and politics. The four essays in this issue began as research projects in a history course titled The History of Reproductive Health, which was offered in Spring 2014.

Gabriela Noa Betancourt uncovered the story of June Wall, a Newcomb College student who died after receiving a botched abortion in 1963. When she began her investigation, Noa Betancourt knew only that a student had died—she did not know the student's name, her class, or even whether she might find records that would link a student's death to the illicit procedure. Two significant lessons await readers of Noa Betancourt's essay. First, we see how an enterprising researcher can make meaning out of fragments of information through persistent, dogged, and sometimes-painstaking research. Secondly, read in the context of recent U.S. Supreme Court decisions that erode women's reproductive rights, Noa Betancourt's essay serves as a powerful reminder that in the very recent past, women died needlessly because they were denied access to safe and affordable abortions.

While conducting research on June Wall, Noa Betancourt learned that another Newcomb student who should have graduated with the Class of 1964 died after receiving a botched abortion. If you have information about this student, or if you would like to share your story about obtaining birth control or securing an abortion during your time at Newcomb College, please send me an email: <u>khaugebe@tulane.edu</u> so that I might connect you with other students who are eager to document the history of women at Newcomb College and Tulane University.

The turf wars between midwives and university-trained obstetricians have been well-documented by historians of medicine, who have demonstrated that American physicians, eager to corner the market on the lucrative childbirth industry, cast midwives as untrained and unsanitary during the late-nineteenth and early-twentieth centuries. Gradually, American women turned to male hospital-based obstetricians rather than the female midwives that their mothers and grandmothers had depended upon to assist with childbirth. Claire Crilley's research on the practice of midwifery in New Orleans reveals that the practice of midwifery continued in the Crescent City long after university-trained physicians had run midwives out of practice in most American cities.

Tamara Duckich's study of women's lobbying efforts in support of the Sheppard-Towner Act elucidates the hopes and anxieties that accompanied suffrage. Dukich's essay captures the ways in which supporters of the historic Sheppard-Towner Act, which funded pre-and post-natal care to millions of American women during the 1920s, drew upon political strategies that pre-dated suffrage to compel U.S. congressmen and women to take seriously women's healthcare as a political imperative. It is difficult to read Dukich's essay without wondering how a bipartisan women's interest bloc might influence the current politicization of women's health insurance provided through the Affordable Care Act.

Finally, while most historians of abortion in the pre-Roe era have focused on women's experiences navigating the unpredictable, sometimes-dangerous black market of abortion provision, Nicholas Lowe illuminates the experiences of physicians who risked prosecution in order to ensure that women received safe medical care. By analyzing newspaper coverage of these brave physicians' legal woes, Lowe uncovered the stories of men of color, émigrés, and men from the working class who empathized with the plight of young, poor women who were especially vulnerable to receiving unsafe abortions.

I hope you enjoy reading these essays.

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