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THE ABORTION MILL: AN INSTITUTIONAL STUDY

JEROME E. BATES

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The records of trial testimony at the New York Court of General Sessions and the files of the Kings County, New York, Grand Jury reveal the existence of two fairly complex social structures known as abortion "mills" and "rings." A mill might be defined as an abortionist or several abortionists working steadily in a fairly permanent location and aborting a dozen or so women daily. A ring may be viewed as a number of interacting abortionists or mills working intermittently at several occasionally changing locations and aborting an even more considerable number of women daily. The actors in the ring are totally or largely known to each other and clients are accommodated at the various locations depending on the pressure of referrals, the availability of operators at the moment of need, and the ability of the client to pay a sliding scale of prices.

So well organized are these social structures, that it is the author's opinion that they can most accurately be described and evaluated as deviant types of crevice institutions. What is an institution? A broad definition from a standard sociological work has been chosen for the term "institution":

The organized system of practices and social roles developed about a value or series of values, and the machinery evolved to regulate the practices and administer the rules . . . Institutions and laws are produced out of the mores. An institution consists of a concept (idea, notion, doctrine, interest) and a structure. The structure is a framework, or apparatus, or *perhaps only a number of functionaries set to cooperate in prescribed ways at a certain conjuncture*.¹

All institutions have a fundamental function of meeting some persistent need or want. It is the author's view that an abortion mill is probably a "deviant crevice institution." Let us now examine the structure, function, operation, integration, and component apparatus organized and maintained by the actors in the abortion mill.

FUNCTION AND STATUS OF MILL PERSONNEL

If the chief actor, the abortionist, is to run his establishment with the greatest possible efficiency and safety, he must have both business and medical assistants. The Court records of those physician-abortionists whose operations were large, organized and complex enough to fall into the mill category show that the business staff consists of a secretary-receptionist and a business manager.

The secretary is usually a young woman with qualities of shrewdness and loyalty.

¹ EDWARD BYRON REUTER, Editor, *HANDBOOK OF SOCIOLOGY*, New York, 1941, p. 129. Italics mine.

She is well paid (no record showed a salary of less than \$100 per week) and frequently she is given a percentage of the net profits. The success of the operation will be due in no small part to the secretary's ability to judge and handle patients. In addition to her clerical duties, she meets all prospective patients and sets the fee for the operation. The price of abortions is set in large part on what the traffic will bear. A shrewd, capable secretary has a knack of sizing up the financial status of an applicant for service. The woman's clothing, the label in her coat, her accessories, and her general demeanor are all evaluated by the secretary before she asks a fee. The secretary's ability to judge people and evaluate their social roles is of paramount importance in protecting the operation of the mill against intrusion by government investigators.

The business agent handles contacts with the landlord, payment of all salaries, bills, bribe money, and split fees. Another perhaps more important function is that of contact man between the abortionist and the various sources from which patients are referred. Some of the larger mills employed "runners" who served as intermediaries between the business manager and the sources of referral, thus increasing the volume and safety of the practice. The position of business manager is a highly confidential one and the majority of the defendants preferred to hire a relative or very good friend. Among the doctors examined by the Kings County Grand Jury, five employed their brothers as business managers.² A good many others hired brothers-in-law or sons of old friends. In every case at the Court, it was found that the business agent was either a person with a degree in law or with some legal training. The business manager usually works for a percentage of the *net* profits and hence it is to his interest to stimulate referrals and keep bribe payments at a minimum consistent with safety.

The medical staff usually consists of a practical nurse. In only one of the Court cases was the nurse found to be a graduate. Four defendants employed licensed practical nurses while the remainder trained girls, usually with a background of domestic service to act as their assistants. In all cases the medical assistants were found to be receiving salaries at least 25 per cent in excess of those paid by hospitals for similar work. In some cases, the medical assistants also received a small proportion of the profits.

SOURCES OF REFERRAL

The Court records, a number of physicians, and ten convicted abortionists interviewed by the writer are in agreement to the effect that there are three principal and two secondary channels through which patients are directed to abortionists. There is no agreement, however, as to the order of significance of the primary channels. Opinion is about equally split between the primacy of the local druggist and that of the general practitioner as the chief sources of referrals to the physician-abortionist. An abortionist of several decades experience gave the Grand Jury the following informative opinion:

The abortion specialist has so-called abortion feeders, they call them, those that feed the abortion patients to him The greatest source of the abortionist's business comes from the general prac-

² NEW YORK STATE, SUPREME COURT, KINGS COUNTY: A PRESENTMENT ON THE SUPPRESSION OF CRIMINAL ABORTION BY THE GRAND JURY FOR THE EXTRAORDINARY SPECIAL AND TRIAL TERM, New York, The Hamilton Press, 1941 p. 26.

itioner and the druggist around the corner. There is a drug store on every corner of America and they feed the abortion specialist his patients.³

There is general agreement that there is a greater tendency on the part of women who suspect an unwanted pregnancy to first seek relief in a drugstore than in any other way. Although many druggists attempt to satisfy such a customer by selling her a relatively expensive proprietary medicine supposed to have an ecbotic effect, it is also not uncommon for the druggist to refer the women to some abortionist whom he knows. Impounded records of convicted abortionists show that almost invariably there is a standing arrangement for a forwarding fee often as high as 50 percent. In no case known to the writer was the split fee less than 25 percent.

Through the cooperation of an informant in a large urban Police Department, the author had an opportunity to examine the records kept by the business manager of a very active midtown mill catering principally to salesgirls in two very large department stores. The minimum fee in this mill was \$100. Time and again the records, kept on 3" x 5" file cards, showed payments of \$50.00 to "D-1" and about as frequently the same amount to "D-2". The detective credited as arresting officer explained that other seized record material identified "D-1" and "D-2" as referring to unidentified contacts in the respective drug departments of the two department stores where the bulk of the clientele was employed. There were a few more listings of "D-3," "D-4," etc., up to a high listing of "D-12" in a total of over 300 file cards. This would seem to indicate that this particular mill was, among other sources, being "fed" by contacts in 12 local drug stores, none of which, when plotted on a map, were located over three miles from the mill.

The third primary source of patients lies in women formerly aborted at a mill and who pass along the information to relatives, friends and acquaintances in need of similar service. This type of referral is particularly gratifying to mill personnel who share in the net profits as no split fee is generally required.

The two secondary sources of referral discovered in the Court cases, confirmed by various informants and verified by the writer, are taxi drivers and bellboys. As any habitual traveler can testify, these two occupational groups are fertile sources of information to the stranger in town. This is particularly true if the inquirer desires some product or service the possession or use of which is contrary to local law or mores.

FIXING AND ADJUSTMENT OF FEES

A woman who goes to an abortionist's office is not in the same social or psychological position as a patient calling on a legitimate practitioner or even a woman about to make a cash purchase in a shop. Although she pays a fee, she is, in a very real sense an applicant for a favor. Especially is this true if this is her first experience with an abortionist. She considers her need to be extreme and her situation urgent if not desperate. She feels that she is in the only place she knows where any real solution to her problem can be found. She also is well aware of the illegality of the whole procedure and this serves to exacerbate her guilt-ridden and conflicted ego. The abortionist and his entire staff are well aware of her anxiety, fear and guilt.

³ New York State, Supreme Court, Kings County, *Ibid.*, p. 27.

Although there may be, and probably are, some abortionists who are motivated in their practice by other than monetary considerations, not one of the Court cases concerned a medical man or amateur type who consistently displayed any real kindness, understanding, patience or delicacy in handling their patients.

In many, if not most cases, the patient has been informed of the price by the person who referred her to the physician-abortionist. Notwithstanding this, the abortionist's secretary makes every effort either to raise the agreed on amount or, if the woman is not aware of any particular amount, to obtain as high a fee as possible. The author has read extensively transcriptions of trial testimony of aborted women concerning their entire abortion experience. This reading and the admissions of the defendants interviewed makes it quite clear that almost every abortion operation is preceded by haggling and bargaining.

In the transcriptions of Court testimony which I read, it was brought out that the contact with the secretary when the money is collected is one of the several unpleasant experiences of a woman patronizing an abortion mill. One feeder testified that if he happened to know the woman he was referring or had some personal regard for her, he would advise her to leave at home practically all money above the exact fee stated. He did this because he knew that there was little or no chance of his acquaintance leaving the abortionist's office with much above cab fare.

QUALITY AND CHRONOLOGY OF TREATMENT AND RECOVERY

The abortionist, unlike a physician in private practice, can fix his own hours. It is conventional practice to operate a mill from about 10:00 A.M. to 4:00 P.M. On Fridays and Saturdays the tempo of operations is speeded up for the dual reasons of the frequency of payday and the chance the patient has to remain in bed and recover over Saturday and Sunday. Evening operations are also performed.

The number of abortions performed daily in a mill is contingent first upon the efficacy of the doctor's technique, secondly, on the efficiency of his assistants and thirdly, on the number of recovery cots he can provide. Truly expert abortion specialists take the least time, performing the entire operation in from three to five minutes. This time does not include that consumed in a sepsis by shaving, scrubbing and douching the affected parts, which tasks are usually performed by the "nurse" in attendance. Such elementary aseptic techniques, which are mandatory in good hospital practice, are often omitted in the interest of speeding up operations and increasing the mill's profits. In 27 cases of women recounting their experiences in three different mills, only five or about 25 percent testified that they had been prepared in an elementary aseptic fashion for the procedure. Adequate testimony from doctors, complaining witnesses, informants and case records shows that anaesthetics are seldom used. Again this is related in part to the compelling desire for speed and also as a precaution against a medical accident resulting in complications or homicide. A whiff of chloroform can be dissipated readily throughout the system whereas a full narcosis with this drug would leave traces at autopsy. When used at all, intravenous or intrauterine injections are a conventional form of anaesthetic in many mills. In this fashion early ambulation of the patient is also assured.

The patient is often ready to leave the office a half hour after she enters. One

abortionist informed a probation officer that he had performed as many as forty-five abortions on Saturdays. He estimated that some expert abortion specialists operate on four thousand to five thousand women per year.⁴

It would appear that there exists a relatively small number of physician-abortionists who take what can only be described as pride in their work. One of these men has described the slow, painstaking, skilled nature of his practice as follows:

In my practice I average three operations a day. By working a six-day week, I complete approximately 18 operations in this time. This amounts to 72 operations a month. In my 16 years of specializing, I have successfully performed about 13,844 abortions.

This was without the loss of the life of a single one of my patients. I feel those figures are something of which to be proud. I feel—I'm sure—that the work I have been engaged in these past years has been a contribution to Society and has helped to straighten out the messed up lives of many people.⁵

Medical men are entirely in agreement that one of the greatest dangers in abortion procedures results from lack of proper care received by the patient following the operation. Many mills lack adequate space for sufficient cots upon which patients can recline for at least an hour or so after the operation. Also, because of the ever-present risk of detection, it is necessary to require abortion patients to leave the mill at the earliest possible moment after the completion of the operation. While the patient is resting, frequently another patient is being prepared and aborted. This means, especially on Fridays and Saturdays, that the cot or cots must be vacated after a brief period to make way for the continued influx of patients.

In contrast to the hour or so of bed rest provided by the mill operators, we find ethical gynecologists recommending at least a week of complete bed rest if not a longer stay in a hospital following abortion. Said the late Dr. Taussig:

In the post-operative care of abortions that have been completed artificially, we must advise a hospitalization with rest in bed from five to ten days depending on the period of gestation in which the abortion occurred . . . We should keep in mind that one of the most common causes of chronic invalidism after abortion is insufficient care and rest in the after-treatment.⁶

The fact that many patrons of the criminal abortionist do not obtain sufficient bed rest is not by any means entirely the fault of the mill staff. The testimony of numbers of aborted women at the Court shows clearly that the doctor or his nurse routinely advised them to "go home and rest for a week" and to refrain from sexual intercourse until after the re-establishment of the menstrual cycle. The fact that this advice is often ignored lies partly in the necessity for many aborted women to keep the operation a secret and also in their frequent economic necessity to return to employment quickly. Ignorance and overconfidence may also be factors involved.

Mill personnel interact also with taxi drivers. Driving a cab is often a strongly competitive occupation and the experienced cab driver is quick to detect a good "stand." This accounts for the fact that women leaving an abortionist's office often

⁴ New York State, Supreme Court, Kings County, *Ibid.*, p. 29.

⁵ ANONYMOUS, M.D. *A Doctor Speaks Out For Abortion*, PAGEANT, New York, August, 1948, Vol. XIII, p. 11.

⁶ FREDERICK J. TAUSSIG. *ABORTION SPONTANEOUS AND INDUCED: MEDICAL AND SOCIAL ASPECTS*, St. Louis, The C. V. Mosby Co., 1936, p. 171.

find taxicabs seemingly waiting for them. Indeed, testimony in author's case 102-H brought out the fact that the mill operator in question always insisted that ample cab fare be paid to his receptionist in advance so that there could be no delay in the patient's departure from the mill.

PROVISIONS FOR AFTER-CARE

There is little to be said on this subject as abortionists generally make no formal provision for after care aside from providing the brief use of a cot and the routine dispensing of advice described above. If a woman has patronized a mill, more often than not she does not even know a phone number to call in case of unpleasant sequelae. In a few cases which I read, the abortionist advised his patients that "if anything goes wrong" they should present themselves at the outpatient clinic of a general hospital, state that they were pregnant and had been in an automobile accident, had a fall, or fainted on the street. As spontaneous abortion can be followed by a fever, uterine bleeding and other symptoms common to those following illegal abortion, it is difficult for a legitimate practitioner to detect a criminal involvement if the patient presents a false history and no evidence of surgical damage is present.

The mid-wife who procures abortions is in a much more vulnerable position legally than the physician-abortionist. She is also more apt to have stronger, more intimate primary contacts with local patrons in a rather homogeneous sub-community. In short, she has a reputation to maintain and it is not surprising therefore to learn from the Court cases and the informants that she is necessarily more interested in providing after care should such prove needed. The quality of this care is inadequate as is reflected in part by the Court records which show that in abortions performed by mid-wives, 100% of the "source of complaint" came from febrile aborted women in hospitals to which they had been rushed by panic-stricken husbands, boy friends or relatives.

Testimony of the midwives involved in giving unsuccessful after-care revealed that their efforts were largely confined to prescribing doses of aspirin or quinine, administering alcohol sponge baths and insisting that the patient remain in bed no matter what her necessity to leave it.

The great majority of aborted women, if the operation is successful, are apt to be quite content to attempt to repress the memory of the unpleasant experience and resume their normal pattern of living. Should serious illness occur as a consequence, however, she is apt to be questioned by hospital authorities, police, or interested relatives. If she reveals the name of her abortionist, a formal complaint may be made against him. His arrest may follow although conviction for the offense is yet another matter.

THE EARNINGS OF ABORTIONISTS

There is a time-worn adage in criminal and law enforcement groups to the effect that "There's a fortune in abortion." The Court cases, the informants, the extensive trial testimony all provide ample proof of the adequacy of this folk-saying in the case of most practitioners.

While exact figures are somewhat understandably unavailable, not one of the

Court defendants suffered an economic loss by undertaking the illegal practice of medicine. Even midwives who, in 1936 reported an average income of \$100.00 per month, found themselves making about the same sum in a week by committing abortions at \$25.00 to \$50.00 per procedure.⁷ Licensed physicians who were tempted as Taussig says "to enter the golden but somewhat inglorious life of the abortionist," found the practice extremely lucrative notwithstanding the heavy overhead expenses previously set forth.

In the file jacket of author's case 86-5, a copy of a detainer filed against the defendant and served on the Warden of City Prison was found. This detainer, issued by the local U.S. Tax Commissioner, declared that the defendant was wanted by Federal authorities for failure to pay tax arrears, as well as "fines, fees and penalties in the amount of \$832,468.37." It will readily be seen that even a top-flight legitimate specialist would have difficulty making a gross income of the above amount in a lifetime of practice. No record was available to show what period of years the above tax bill covered or whether the defendant had previously filed false returns. It was verified, however, that the defendant had been graduated from medical school sixteen years prior to his first conviction for Abortion in 1936. His previous criminal record showed four prior appearances in Magistrates Court on charges of Abortion, all of which were dismissed for failure of the People to present a *prima facie* case to the effect that the defendant had committed the offense charged.

In the case of another defendant, it was verified through the contractor concerned that he had built (in 1928) a house costing \$165,000.00 in an elite section of Kings County, New York. This sumptuous dwelling still stands and is referred to in real estate circles as "the house that abortions built." The builder, prior to his first conviction for Abortion in 1938 had five appearances for the same offense in Magistrates' Court and was discharged on each occasion.

A quantity of expert testimony is available to the effect that the abortion specialist with a normal business earned (in 1941) about \$25,000. per year and that doctors whose clientele came from the higher income groups earned from \$150,000. to \$250,000. per year.⁸

Even a marginal type of abortionist who charges \$50.00 to \$60.00 for an operation, after he has split the fee with the feeder and deducted running expenses, receives about \$15 profit. This represents a far more profitable practice than the painstaking accumulation of \$3.00 office fees and \$5.00 house calls. As demonstrated *supra* there are specialists who perform about four thousand operations a year. This type of practice would net them about \$60,000 per year even on a modest scale of fees.

Suffice it to say that abortionists, like any other type of professional person, legitimate or otherwise, seem to succeed or fail in terms of the presence or absence of the usual criteria; namely, educational background, expert tutelage, suitable personality, good judgment, a reasonable amount of good fortune, assiduous attention to tasks

⁷ Midwives' legitimate earnings were verified as follows. By law each licensed midwife is required to report each confinement she attends to the local Department of Health in New York City. Since midwifery was and still remains a highly competitive profession, the average fees charged at a given period are commonly known to Department of Health personnel.

⁸ New York State, Supreme Court, Kings County, *Op. Cit.*, p. 33.

at hand, and so forth. Since we have postulated that the abortion mill is a *deviant* type of crescive institution, it would seem pertinent to examine now the specialized abilities, means and techniques necessary to preserve the structure of the mill from attack by social forces emanating from legitimate enacted institutions erected to reinforce and perpetuate moral and legal ideas hostile to the existence of the mill.

DEFENSIVE SOCIAL ADAPTATION

Since attack from any legitimate or predatory source threatens the social and economic adjustment of mill functionaries, one is not surprised to find them taking energetic counter measures both on a planned or emergent basis.

A source of every present anxiety to the operator of the abortion mill is the possibility that someone will betray him to the Police. Such reports can come from only a limited number of sources and the abortionist tries to anticipate every possible contingency. He well knows that a complaint as such is not greatly to be feared unless it is made with a good deal of substantial corroborating evidence. To reduce to a minimum the possibility that a complaint of this type can be made, the abortionist first depends heavily on a clever *modus operandi*. For instance, he seldom subscribes to a commercial linen and towel service even though he has more need for such accommodation than a legitimate practitioner. The reason for this is that if an anonymous complaint is made against him, the Police may decide to secretly subject samples of his used linen to biochemical analysis. Should all or most of such linen show the presence of fetal matter, the Police would have a fair inference that they were dealing with an abortionist. They might then apply to the Supreme Court for a permit to tap the doctor's telephone, citing their discovery as inferential evidence of their need for such a permit.

Some abortionists prefer to have no conversation with patients at all and to operate in a surgical mask behind an operating table screen following completion of preliminary negotiations and preparations by their nurse and secretary. In this fashion, the aborted women cannot legally identify their abortionist and cannot even say whether he was tall or short, fat or thin, male or female.⁹

Another source of danger and overhead expense to mill participants is frequently to be found in the heavy demands for protection money from members of the Police Department and District Attorney's office. For instance, in the late 1930's, one Assistant District Attorney in Kings County was sentenced to State Prison for accepting money to impede prosecution of abortion charges while a second Assistant District Attorney was disbarred following his indictment for Conspiracy, Bribery, and Asking and Receiving an Unlawful Fee.¹⁰

⁹ HENRY B. SAFFORD (M.D.) *Tell Me Doctor*, LADIES HOME JOURNAL, December 1952, p. 31.

¹⁰ The first of the above public servants, William F. McGuinness, pleaded guilty to two charges of accepting money from abortionists in return for impeding their prosecution and was sentenced to serve from 1½ to 3 years in Sing Sing Prison on March 30, 1939.

The disbarment of the second man, Francis A. Madden was predicated on his indictment for allegedly accepting a total of \$8,000.00 in protection money from two prominent abortionists. On November 13, 1940, the Justices of the Appellate Division, Second Department, announced that the report of official Referee, Isaac M. Kapper, recommending the disbarment of Madden was confirmed.

In order that the reader may be afforded a synoptic picture of the defensive technique of a typical large scale mill operator in dealing with a high ranking law enforcement official, I shall summarize the activities of Doctors Nussbaum and Blank in their dealings with Assistant District Attorney McGuinness. The following highly condensed summary was prepared from the files of the Kings County prosecution concerned.

Early in 1928 one William F. McGuinness applied for a position on the staff of Charles J. Dodd, then District Attorney of Kings County. His application was at first rejected because of several stains on his record and the existence of some dubiety concerning the nature of his character and conduct. Notwithstanding this initial rejection, William F. X. Geoghan who succeeded Dodd as District Attorney of Kings County appointed McGuinness to his staff in 1931.

Late in 1935, a New York City doctor was arrested on a charge of Abortion and, as frequently occurs, the case against him was dismissed in Magistrates Court for lack of sufficient evidence. Shortly after the dismissal, the doctor received a notice to appear before Assistant District Attorney McGuinness. After a preliminary discussion concerning an alleged complaint made by an employee of the doctor against one of the detectives in the District Attorney's office, McGuinness stated that he was looking for an abortionist to "take care of" a married woman whom he had made pregnant.

Previously, McGuinness had been to see Dr. Henry L. Blank, an abortionist in Kings County, but the fee quoted was too high. Through the intercession of the doctor, who had been a classmate of Blank's, the operation was performed gratis for McGuinness. A few months thereafter, McGuinness directed the doctor to inform Dr. Blank that his office was about to be raided. Dr. Blank later told the doctor that he "had taken care of" McGuinness for the tip.

George Blank, Dr. Blank's brother and business manager, met McGuinness in a restaurant and paid him \$200.00.

On May 25, 1938, Dr. Blank was arrested in connection with an abortion charge. McGuinness appeared at the Police Station as Assistant District Attorney assigned to the case. After taking several statements from Dr. Blank, McGuinness declared that there was no evidence of criminal conduct and ordered Blank's release.

The next day Dr. Blank expressed his gratitude for the favor by sending George Blank and another attorney to meet William F. McGuinness in a restaurant and by giving him the sum of \$50.00.

On March 30, 1939, McGuinness was indicted for accepting a gratuity of \$200. from Dr. Blank and also for accepting \$50.00 from a Dr. Nussbaum for impeding the prosecution of a charge of abortion against that physician. Shortly thereafter, he pleaded guilty to both charges and was sentenced to serve from 1½ to 3 years in Sing Sing.¹¹

The activities of McGuinness must be considered as being of a conspiratorial and protective nature. They were far more complex than mere blackmail as the gravamen

¹¹ The above synopsis represents a condensation of several hundred pages of testimony. In actuality, the various conspiracies were quite complex involving intermediaries, code words, gifts, entertainment and a surprising amount of haggling over amounts to be paid.

of that offense involves the mere refusal to report an illegal or immoral act in return for a fee or series of fees. McGuinness, however, not only failed to prosecute Dr. Blank but advised him of the pending activities of other law enforcement groups, maintained a hedonistic social life with him and otherwise aided and abetted his illicit practice.

Lower ranking law enforcement officers have been known from time to time to engage in a frank "shakedown" of abortionists. They have little to offer the mill operator other than a promise not to make an arrest and hence their activities fall into the category of blackmail or, legally speaking, Extortion.

Although my officially authorized informants in the Police and other law-enforcement agencies assured me that they had no direct knowledge of any illicit connection between abortionists and police officers, certain other unauthorized informants emphatically disagreed. Being personal friends of the writer and receiving positive assurance that their identities would not be revealed, they have severally and independently read the following composite account of methodology. They also pointed out, and the author agrees, that crime committed by police officers is in general perpetrated by relatively small numbers of such men and the integrity of the New York City force as a whole is excellent.

Detective Smith becomes aware of the lucrative practice of abortionist Jones and ardently desires a portion thereof. As a preliminary step, he locates a woman who cannot afford an abortion or who is willing for a fee to pose as being in need of one. The female decoy is then conventionally recommended to abortionist Jones by a former patient or a legitimate physician who cooperates with the police and a date is arranged for the operation. On schedule, the decoy arrives at the mill, pays the fee with funds advanced by Detective Smith and is curretted. As the outer door of the mill is opened for her exit, several detectives block her way and force her back inside.

As per instructions, the woman makes vociferous protests and insists that the purpose of her visit was entirely legitimate. In a few minutes, however, she appears to "break down" and "confesses" that she has just been aborted. At this point, one detective remains with her while the other detective takes the doctor aside. The doctor, having no means of knowing whether the raid is legitimate or otherwise, frequently decides that the safest course is to purchase immunity. Such purchase, according to the unofficial informants, has been known to cost as high as \$1,000. per raider.

There are several possible variations of the above scheme which are used. Also, it sometimes happens that after some months have passed, friends of the original raiders make a second visit and the pecuniary results thereof are distributed among all concerned.

In the opinion of Tolnai¹² the average operator of a busy mill pays a minimum of \$5,000.00 in protection money to the police each year.

A few abortionists who depend on high fees rather than quantity of patient intake avoid payment of bribes to predatory groups by associating themselves with physicians of spotless legal record who certify that each abortion is necessary to the life or health of the patient and hence is quite "legal." One such mill formerly operated

¹² B. B. TOLNAI. *The Abortion Racket*, Forum, Concord, New Hampshire, September, 1935, Vol. XCIV, No. 3, p. 177.

in the Murray Hill section of Park Avenue, New York City, and the fees charged varied from \$1,000. to \$2,000.¹³

The mill operator is also the target of extortionate demands from other unethical professional men. One such case was uncovered by a Grand Jury in Kings County in the Summer of 1939. It was found that one Abraham Ditchik, a dentist practicing on the lower East Side of Manhattan, had successfully organized a system of exacting payments from physicians on the promise of protecting them from disciplinary proceedings or on the threat that on default of payment, disciplinary proceedings would be instituted by the State Department of Education. After weeks of hearing testimony from scores of witnesses, an indictment was returned against Ditchik in September 1939. It contained fifteen counts and charged him with conspiracy with certain persons unknown to obstruct justice, with attempted bribery, and with the extortion of \$29,000. from various doctors.¹⁴

THE MILL AND THE RING: A DIFFERENTIAL STRUCTURAL ANALYSIS

The reader will recall that we previously defined an abortion ring as a deviant type of crescive institution consisting of a loosely knit group of interacting abortionists or mills operating at changing locations and aborting a rather considerable number of women daily. We found that the various operators were known to each other, remained in contact with each other, and that patients were referred and re-referred in order to accommodate particular or special needs of both patients and operators. The Court records, authorized informants and various substantiating sources of information indicate that the ring—as differentiated from the mill—has the following structural and functional characteristics:

1. Has two or more operating abortionists with cooperating interacting staffs.
2. A shifting physical location.
3. Aborts a relatively large number of women daily.
4. Operates seven days per week.
5. Has specialists on staff to handle difficult cases, or cases beyond first trimester of pregnancy (induction cases).
6. Frequently has relatively distant sources of client referral sometimes on an interstate basis.
7. The "floating" portion of the ring uses portable equipment.

Rings, as distinguished from mills, are relatively rare. The author finds that most New York City newspapers use the terms ring and mill interchangeably. Most police reporters, when more than one abortionist is arrested in a certain case, are apt to write the affair up as a "ring" and hint darkly of huge numbers of women being aborted, widespread sources of referral and of the existence of some "mastermind" who coordinates the affair. Frequently, the secretary is called a "vice-queen" and the other staff members are awarded salacious titles. One can reasonably presume, I think, that the police reporters know very well that the chief differential characteristic between a ring and a mill is that the ring changes the location of its mill or

¹³ *Ibid.*, p. 179.

¹⁴ New York State, Supreme Court, Kings County, *Op. Cit.*, p. 41.

mills fairly frequently ("floats") while the true mill has a reasonably stable location month after month. Perhaps if the mill is made out to be a ring staffed by a seemingly exotic cast of characters, more copies of the newspapers may be sold, at least one suspects this to be the case.

THE MILL AND THE RING: AN INSTITUTIONAL ANALYSIS

Do the mill and the ring meet the criteria as deviant types of crescive institutions? They are certainly "deviant" as their entire intent and function is completely illegal. Are they "crescive" in etiology? Institutions and laws are produced out of mores. According to one definitive authority, "Institutions are crescive when they take shape in the mores, growing by the instinctive efforts by which the mores are produced."¹⁵ Since we are clearly dealing with deviant social structures, we can say that mills and rings arose in response to partial group protest reactions against dominant mores. A survey of abortion practices in history shows that there has always been a need for abortion services and techniques among widely scattered cultures. One recalls that abortion was quite legal in many pre-Christian sub-cultures and is openly practiced in some existing exotic societies. It would therefore appear that at a time and place where abortion is considered contrary to the dominant mores, the need for it persists and this pervasive need is partially satisfied in a clandestine manner.

As previously defined, an institution can at minimum be "only a number of functionaries set to co-operate in prescribed ways at a certain conjuncture." The abortionist and his staff, as we have noted from the foregoing analysis, are clearly "a number of functionaries set to cooperate." The "conjuncture" is, of course, when a properly referred female carrying at least the prescribed minimum amount of cash appears at the mill, pays the said cash to the secretary and requests an abortion.

The functionaries cooperate "in prescribed ways" because of the pressure of society forcing them to do so. One recalls the pressing need for secrecy, the element of haste, the elaborate structure of *modus operandi* and the variations in technique when serving varying socio-economic groups of clients. So similar are the "prescribed ways" that the experienced investigator finds only superficial differences between one mill and another. The actors, the location, the minimum price, the sources of referral and the socio-economic status of the clients may vary but the essential structural character and operational technique of the mills remain strikingly similar.

A further aspect of any type of institution is an "organized system of practices and social roles developed about a value or series of values and the machinery evolved to regulate the practices and administer the rules."¹⁶ Our examination of the social structure and material culture of the mill demonstrated, I think, that a minor hierarchy of social roles within the organization exists ranging from the abortionist down through the most recently employed runner, porter or contact man. All have their various prestiges, motivations, roles, techniques, values and functions from which they derive psychological satisfactions and economic income as do the various employees in the most legitimate of medical institutions.

¹⁵ EDWARD BYRON REUTER, Editor, *HANDBOOK OF SOCIOLOGY*, New York, p. 129.

¹⁶ EDWARD BYRON REUTER, Editor, *Ibid.*, p. 129.

The mill is also "developed about a value or series of values." The chief value for the patients is a negative but nevertheless vital one from their standpoint, namely, the opportunity to have an unwanted pregnant condition terminated. The chief value for the abortionist and his staff is an opportunity to make a good many tax-free dollars quickly and with a minimum of effort. With these dollars a plethora of satisfying experiences may be purchased.

The Court cases also demonstrated the interaction of mill personnel with enacted types of institutions, associations and interest groups. Many abortionists, in common with other professional persons who depend in part upon social contacts for sources of business, are great joiners of fraternal groups, secret societies, and organizations of business and professional men such as the Lion's Club, Kiwanis Club and so forth. Therein, they speak of themselves as specialists in "office gynecology" which phrase is rapidly coming into use as a polite medical pseudonym for the practice of abortion. These legitimate contacts with other institutionalized structures not only provide a fertile source of referral but serve as prestige factors should the abortionist become a defendant in a criminal action.

In one of the Court cases, the abortionist, his license to practice at stake, pleaded not guilty and the case went to trial. His attorney offered a shaky and improbable defense to the effect that the aborted woman was "weak and debilitated" and that the abortion was necessary "to preserve her health." Thereafter, the defendant brought a stream of character witnesses from various social, business, civic and fraternal groups into Court to testify to the high reputation and social prestige of the doctor. The jury found otherwise and a verdict of guilty was returned after lengthy deliberation. Prior to sentence, the Judge received over two hundred letters pleading for leniency. The telephone of the investigating probation officer rang repeatedly as a series of respected individuals including clergymen offered to supply information as to the defendant's sterling character, charitable bequests, and reputation as a public benefactor. Subsequently, the imposition of a sentence of one year and six months in State Prison was suspended and the doctor was placed on probation.