

The Legality of Involuntary Motherhood:

A Social Economics Approach to Contraception, Power, and The Forced Mammalian State

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Introduction.

The Thirteenth Amendment to the United States Constitution bans slavery as involuntary servitude. Yet actualization of this Amendment has progressed considerably farther on the basis of race than on the basis of sex. Forced childbearing was a widely recognized practice under race based slavery: women slaves were required to become pregnant, bear and raise children, involuntarily serving them as well as their owner-masters (Koppelman, 2012).

Today slavery based on race in the United States is largely absent, but involuntary servitude based on forced motherhood commonly remains: some half of carrying women in the U.S. are made pregnant without consent (Finer and Zolna, 2006; Dudley, 2013). While many sexually active women do use contraception, very real obstacles of price, access, or stigma render preventive measures far less than widely available: contraception remains limited, unavailable to minors (Natavio, 2013), and costly in reputation and image (Goffman, 1963) as well as in dollars-measured cost.

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Contraceptive coverage in The Affordable Care Act would make birth control widely available without cost. Yet that aspect of Obamacare has become its most vitriolic target. The cause is unclear: abortion aside, prevention of unwanted pregnancies seems non-controversial on its face; few would argue that children should be raised in homes where they are openly unwanted, but perhaps this opposition is more about a last-ditch effort to resist applying the 13th Amendment to women, than it is about invasive government regulation into business.

This paper explores resistance to the emancipation of women in the form of opposition to contraceptive availability, among a sample of academics in major American research universities. The main finding is that academics whose self-assessment, and whose external assessments of performance are high, support widespread contraceptive availability. Academics whose self- and external assessments are low, oppose such. This raises the question of why. One possibility is that broad advances of women in education and the workforce trigger a perceived competitive threat among those whose skills are, at best, mediocre. The owners of such mediocrity prefer to thin the competition in one of the few remaining ways, even though that mechanism of denying equal opportunity runs afoul of the law.

Forced Motherhood.

Half of carrying women in the U.S. are made pregnant without consent (Finer and Zolna, 2006; Mosher, Jones and Abma, 2012). Results include increased poverty (CDC, 2010), less

education for the child (Oltmans, Gruber, Levine and Staiger, 2009; Bailey, 2013) and the mother with a consequent increased reliance on public assistance (Logan, Holcombe, Manlove and Ryan, 2007), and greater rates of incarceration for both parent and child (Donohue and Levitt, 2001) after the birth. Another result is the incarceration of the woman while pregnant so that her body may be supervised according to external standards while in the mammalian state (Riley, 2005; Eckholm, 2013). Births of unwanted children bring further supervision, with mothers held accountable for serving their children in ways and at levels deemed appropriate by the state. Adoption, too, carries censure (March and Miall, 2006).

How large a problem is this? In more detailed studies published by the Center for Disease Control, Mosher, Jones and Abma (2012) report that 62.9% of births in the US were planned over the 2006-2010 five year period with some 12% actually “unwanted” – a figure ranging from 9% among non-Hispanic Whites to 23% among non-Hispanic Blacks. Overall in the 2008 sample midpoint, there were 4,247,694 births in the United States; of these, some 13.8% were unwanted by their mothers. If women were able to avoid pregnancies ending in unwanted, not merely unintended, births, the number of births in the US would drop by about 586,000 per year (Mosher, Jones and Abma, 2012). That means that every year, 586,000 American women are forced into involuntary servitude in violation of the 13th Amendment.

State and local laws, increasingly enacted which severely constrain women’s access to all types and forms of birth control, force even more women into unwanted motherhood: in

Texas alone, 20,000 women each year choose to terminate their unwanted pregnancies (Liptak, 2013a); with the closing of Texas' last Planned Parenthood clinic, these 20,000 women will now be engaged in involuntary servitude to their unwanted children for 18 years. Koppelman (2012) notes that the Supreme Court holds that involuntary servitude refers to the control of the life and service of one ... for the benefit of another, as well as a condition of compulsory service of one to another. Thus, purchased ownership is not a condition needed for involuntary servitude.

Overall in the United States, nearly 1/5 of all pregnancies end in abortion: according to the Center for Disease Control, some 6.578 million pregnancies each year result in 1.212 million induced abortions, a rate of over 18%; while another 17% of pregnancies are "lost" (Ventura, Curtin and Abma, 2012), some of which presumably belong to the former category. Were state and local restrictions to make birth control even more difficult to access, as the more than 70 lawsuits currently on the docket against the Obama administration by Catholic and Christian institutions seek to do (Goodstein, 2013), literally over a million additional unwanted children would be born each into a situation of forced parenting.

When children are wanted, parents accept such service work as their due, although fewer U.S. adults are choosing to have children and those who do are having less (Ventura, Curtin and Abma, 2012). When pregnancy and childbearing occur not by choice, service to the unwanted child becomes servitude: required, forced, and involuntary.

Forced motherhood unfolds in contradiction to the 13th Amendment to the United States Constitution, dated 1865 (Koppelman, 2012). This Amendment abolished slavery including “involuntary servitude.” Yet involuntary servitude is precisely what occurs in this case since mothers are required to provide care, feeding, and nurturing of their child – or a whole slew of unwanted children – attached to them by birth, wanted or unwanted, for a minimum of 18 years apiece.

The 13th Amendment to the United States Constitution reads

“Neither slavery nor involuntary servitude, except as punishment for crime whereof the party shall have been duly convicted, shall exist within the United States, or any place subject to their jurisdiction.”

How is it that this fundamental, constitutionally guaranteed right to be free of involuntary servitude, is so easily abnegated in the case of women - turned into forced motherhood?

One explanation is resistance: those previously enjoying privilege now face quality competition. Broad access to birth control has transformed women’s status and women’s lives. Women attend college in numbers equal to or greater than do men (NCES, 2012). Among those aged 35 in 2010, women were 23% more likely to hold an undergraduate degree (Autor and Wasserman, 2013). Women participate in work at all levels in numbers increasingly close to the work participation of men (Broschak and Cohen, 2013). Women thus gain skills equivalent to skills gained by men, and so gain a position from which, for the first

time in modern industrial development, they can realistically compete with men (Hobblen, Lemmon and Wayne, 2009). And, increasingly, they want to, aspiring to a stable, secure job at all ages, just like men (Pew Research, 2013). Resistance to women's rise in the workforce is developed in the next section, below.

Meanwhile, lawsuits continue to be brought forward by men opposing contraceptive availability; the Supreme Court has agreed to hear whether private for-profit non-religious corporations may choose to refuse contraceptive coverage for their employees (Liptak, 2013b). All told, the American Civil Liberties Union reports that 88 cases have been filed challenging the Affordable Care Act's free contraception rule (Secret, 2013). These laws and court cases are not a product of happenstance, but are composed through conscious effort by those recognizing the application of the 13th Amendment to people on the basis of color, but rejecting that application on the basis of sex.

Sources of Contraceptive Opposition

The national mood regarding the reproductive rights of women has become dicey with the rise of religious fundamentalism in the U.S.: religiosity, as well as specific religious identities, contribute toward making contraception more difficult to obtain. According to a recent Gallup Poll, the US adult population is almost evenly split between opposition to contraception led by religious leaders (48%), and support for availability of contraception as defined by the Obama administration (45%) through the Affordable Care Act; among those respondents reporting they held No Religion, the split was 22% opposed to contraception vs

68% in favor (Saad, 2012). Thus opposition to contraception, resulting in forced motherhood servitude, is not limited to those holding strong – or any – religious views. More broadly, among those in the US population who had heard about the contraceptive mandate in Obamacare, 48% state that religiously affiliated institutions which object should be given an exception to that rule, while 44% state that such institutions should be required to cover contraceptives like other employers (Pew Research, 2012).

Beyond religion, a more fundamental opposition to birth control and thus emancipation for women, may rest in the insecurity, hostility and deep-seated anger associated with self perception of insufficiency evident in some men and directed specifically at heterosexual women (Keiller, 2010). A characteristic of the person himself, this insufficiency rests with people who understand themselves to be not-good-enough. They are secondary in life accomplishments where their own understanding of themselves tells them that their skills are mediocre at best, and where external evaluations assess their work as sub-standard. In a society whose even non-religious subcultures continue to validate traditional sex roles (Miller, 2013), these persons struggle with the intolerable condition of being bypassed by women: they feel diminished and small.

Earlier denial of basic rights to women such as property rights and the vote, abated to discrimination which continues more discreetly today in employment (Berebitsky, 2012) and in schools (Smith-Doerr, 2004). As the debate increasingly shifts from the contested

periphery of power, to the previously settled core (Guinier and Sturm, 2001), there is notable erosion of the glass ceiling first in education, and then at work.

Considerable discrimination still remains of course, particularly in academia where women face different and higher standards than tenure and promotion standards faced by men (Jones, Taylor and Coward, 2013) resulting in lower salaries, tenure rates, and rates of promotion (Nettles, Perma and Bradburn, 2000; Smith-Doerr, 2004).

Nonetheless, this movement of women into the mainstream workforce and academic domains has challenged the structure of male dominance in not less than a revolutionary way (Rosin, 2012). Just as threats to established scientific order draw strong objections from those with interests vested in the current order of things (Kuhn, 1970), so this fundamental change in automatic privilege draws forth resentments and strategies to mitigate that loss (Williams, 2011; Cockburn, 1991; Faludi, 1991).

This paper tests the hypothesis that psychological insufficiency manifests not necessarily as open anger (Greenberg, 2010) but rather as a denigrating power to force an even more intolerable condition on women: the condition of forced mammalian slavery. And it does so in a manner that is legal, repetitive, targeted, and intentionally harmful to the affected group, thus satisfying the defining characteristics of insidious workplace behavior (Edwards and Greenberg, 2010). Insufficient persons are hypothesized to oppose the availability of contraception, not merely religiously-based objections to abortion but to hold objections to

the fundamental ability of a woman, any woman, to choose to avoid the constant reproductive state.

Restricting access to birth control does not merely thin the competition for mediocre men: it reverts this entire relationship to a far more primitive state.

This paper contrasts the characteristics of those who oppose the general availability of contraception, to the characteristics of those who support such. These two groups are hypothesized to differ significantly in both the extent to which they feel empowered or “small”, and the extent to which their external accomplishments offer consistency with that self-perceptive state.

Hypotheses, Sample and Data.

Among some 1089 faculty survey respondents across disciplines, individual level social-identity and economic comparisons are hypothesized to occur, both in self-assessment and through external assessment feedback. Individually, a weak self-image is hypothesized to increase opposition to contraceptive availability; this presumably occurs through a sense of insufficiency and therefore a perception of threat. External assessment of a person’s academic performance measured as a low publication record controlling for rank, and a comparatively low academic salary for a disciplinary field, also are hypothesized to lead to opposition to contraceptive availability, again contributing through a presumed insufficiency as an understanding of self, and thus to ego-defense. In both cases, opposition to

contraceptive availability can thin qualified academic competition “up close and personal” but, more broadly, non-availability of birth control can relegate vast swarms of women into the forced mammalian role.

Manifested in restrictive regulations at the federal, state and local levels, such views go beyond those held privately, personally, or religiously. When held by academics in high-status environments, views of personal values and beliefs are frequently adopted by students (Micari and Pazos, 2012; Carrick, Hartmann and Widner, 2013). Such opinions are forwarded through academia to next generations of high-status youth whose future holds consequential decision making, and whose ideologies are profoundly influenced by these academics whom they otherwise admire and respect (Light, 2001; Hong and Shull, 2010; Villegas, 2007; Kuh and Hu, 2001). Some strongly ideological universities design workshop systems “to mold students into reliable adherents of the Chicago approach” (Fourcade, 2009, p. 96). Therefore, locating this research in a university environment identifies results which may have far larger impacts, and be more generalizable in their effects, than the small numerical representation of faculty in the United States population suggests.

This paper uses an original data set collected during the 2008-2009 academic year. Survey respondents from major U.S. research universities provided checked responses to value-laden statements with which they might strongly disagree, disagree, agree, or strongly agree; information was also requested about various demographic characteristics, publications,

income, and rank. 1450 respondents identified their residence as the U. S., but missing data reduced that sample size to 1089 for the variables combined in this study.

Results.

Means and Correlations for each variable are shown in Table 1. On average there was considerable agreement with the statement, “Birth Control should be Easily Available World-Wide:” the overall sample mean was 1.4 on a scale of -2 = Strongly Disagree to +2 = Strongly Agree. Respondents were less sure of the excellence of their own skills at .87 on the same scale, although the overall average number of journal publications at 21 was high. 61% of the sample was tenured, and 31% were Academic women.

Table 1: Means and Correlations,
Sample of U.S. Academics in Major Research Universities, n=1089

	<u>Means</u>	<u>Correlation Matrix</u>				
		Own Skills Excellent	Journal Articles	Income	Tenured	Female
Birth Control Easily Available	1.3981	.070*	.065*	-0.051	.059*	.156**
Own Skills Excellent	0.8668		0.053	.069*	.075*	0.019
Journal Articles Pub.	21.5748			.242**	.320**	-.175**
Income (thou)	117,748				.208**	-.219**
Tenured	0.6126					-.137**
Female	0.3084					

Pearson Correlations confirm the basic hypothesized relations: support for contraceptive availability is significantly correlated with high self-esteem as well as high external assessment of individual academic performance as publications and as tenured status. Not surprisingly, women academics support the availability of birth control.

Results of an OLS Regression analysis, shown in Table 2, repeat this pattern: support for broad contraceptive availability is positively predicted by both internal, and external, assessment. That is, academic faculty with low self-image (or self-knowledge) oppose contraceptive availability, as do academic faculty for whom external assessment is also low, measured as publication and having received tenure. Again, women academics support birth control, with beta weights indicating gender as a driver for this view worth 2 1/2 times the weight of the other 3 significant predictors, all of whose weights are roughly the same, ranging from .62 to .72.

Table 2: OLS Regression Results

Dependent variable: Birth Control Should Be Easily Available World Wide
(beta weights)

Self Assessment:	
Own Skills Excellent	.066*
External Assessment:	
Journal Articles	.072*
Income	-0.043
Tenured	.062*
Female	.166**

Rsq = .041
F = 9.159**
n = 1089

As a side note, the irrelevance of income suggests that PhD faculty likely choose academia for qualities other than financial reward, and so do not consider that factor to be a measure of their success.

Conclusion.

This research found problems with applying the 13th Amendment's anti-slavery mandate to women. Men whose self-assessment is low and for whom external assessments are also substandard, oppose the widespread availability of birth control.

Such restrictions can have only one effect: to increase the number of women forced into unwanted motherhood, a condition of 18 year involuntary servitude punishment explicitly forbidden by that Constitutional Amendment, without having been duly convicted of a crime.

One explanation for the drivers of this view is the surface explanation of perceived competitive threat. But an alternative possibility is that such men, characterized by mediocre performance and low self-image, are more likely than higher-performing men to hold a sexual double standard where equal sexual activity draws condemnation for women alone (Fugere et al, 2008; Sprecher and Hatfield, 1996). From this perspective, particularly working women are seen as perpetrators, with men as victims of women's aggression (Berebitsky, 2012).

Cikara and Fiske (2012) find that Schadenfreude, or pleasure at the misfortune of others, is most strongly evoked where the target of misfortune is envied: high status and competitive.

As high self-esteem negatively predicts Schadenfreude, so lower self-esteem leads to stronger Schadenfreude enjoyment, again when the target is a high outgroup achiever (Van Dijk et al, 2011). Finally, Schadenfreude commonly arises when observers stand to gain from others' misfortune (Smith, Powell, Combs and Schurtz, 2009).

To the extent this is the case, subperforming men may also hold women to this sexual double standard. If so, they may consider that the condition of pregnancy itself has duly convicted these women of the crime of sexuality, although by definition this crime was equally committed by a man. This will make an interesting direction for future research.

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