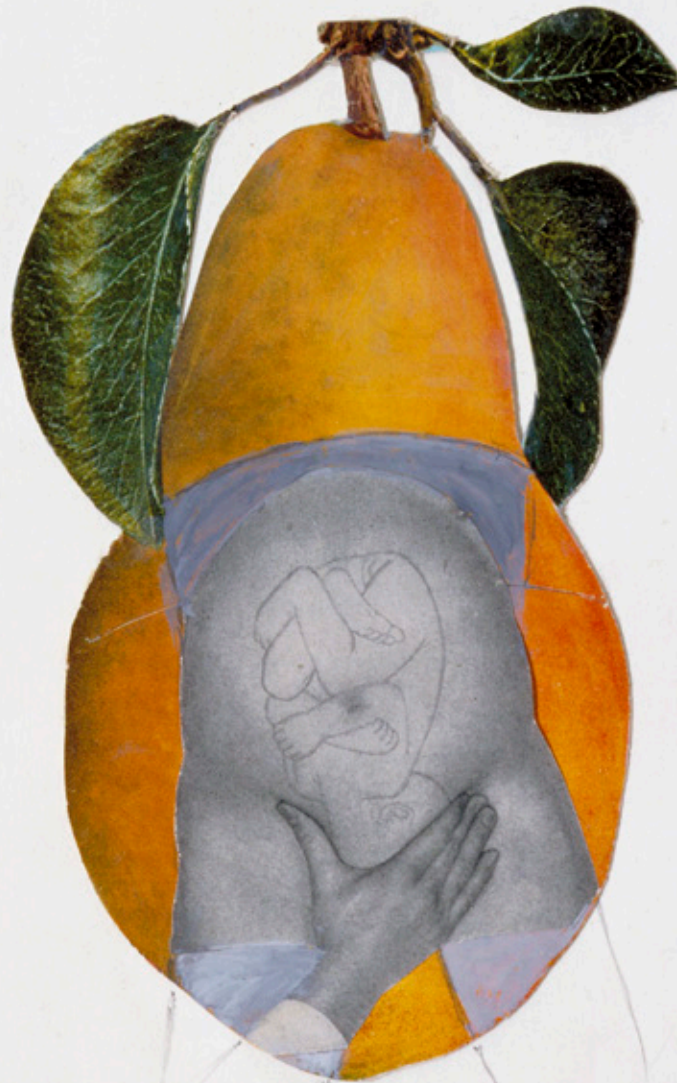


**EDUCATION GUIDE**

# REPRODUCTIVE

HEALTH, FERTILITY, AGENCY

January 19 – May 23, 2021



**MoCP** Museum of Contemporary Photography

**Columbia**  
COLLEGE CHICAGO

This guide serves as a viewer supplement to the exhibition *Reproductive: Health, Fertility, Agency* and can be used for viewing the exhibition virtually or in person. The guide includes information about the works on view, questions for looking and discussion, classroom activities, and suggested readings. You may learn more about educational programs at the MoCP [here](#). You may schedule an in-person or virtual tour of the exhibition or print viewing with your class [here](#). Prior to visiting the MoCP, you must reserve a free timed ticket. Reserve your ticket [here](#).

## ARTISTS FEATURED

**Laia Abril**

(Spanish, b. 1986)

**Candice Breitz**

(South African, b. 1972)

**Elinor Carucci**

(Israeli, b. 1971)

**Krista Franklin**

(American, b. 1970)

**Doreen Garner**

(American, b. 1986)

**Candy Guinea**

(American, b. 1984)

**Joanne Leonard**

(American, b. 1940)

**Carmen Winant**

(American, b. 1983)



An initiative presented in association with the Feminist Art Coalition (FAC)

The MoCP is supported by Columbia College Chicago, the MoCP Advisory Board, the Museum Council, individuals, and private and corporate foundations. The 2020-2021 exhibition season is generously sponsored by the Philip and Edith Leonian Foundation, the Efroymson Family Fund, and the Illinois Arts Council. This project is partially supported by a CityArts Grant from the City of Chicago Department of Cultural Affairs & Special Events. This guide was created with contributions by Columbia College Chicago students Sam Collins, Sylvie Harris, Rebecka Kann, Emilie Plunkett, and Frenchie Scott.

Feminist Art Coalition (FAC) is a platform for art projects informed by feminisms. FAC fosters collaborations between arts institutions that aim to make public their commitment to social justice and structural change. It seeks to generate cultural awareness of feminist thought, experience, and action. See [feministartcoalition.org](http://feministartcoalition.org) for more information.

This page: **Elinor Carucci**, *My Blood*, 2014

Front Cover: **Joanne Leonard**, from the *Journal of a Miscarriage*, 1973

## Introduction

---

The female body has long been a site of injustice, and throughout history, issues relating to reproductive health have been shrouded in shame and hobbled by bad science and discrimination. From the fraught history of birth control, to the inequities surrounding care for women of color, to the struggles of non-cis individuals trying to conceive, and the near silence in our culture surrounding miscarriage, menstruation, and menopause, fertility has been either overtly politicized or rendered invisible for too long.

This exhibition features work by eight artists who explore the psychological, physical, and emotional realities women experience surrounding fertility. Fearlessly tackling topics such as pleasure, pregnancy, trauma, infertility, and abortion, these artists shed light on the patriarchal systems of oppression that inhibit reproductive justice. The exhibition's title, *Reproductive*, refers to both the act of copying something like a photograph, and the biological creation of offspring. Additionally, the active tense of the verb "to reproduce" points to what these artists are at once demonstrating and demanding: *agency*.

**Karen Irvine**, Deputy Director and Chief Curator

**Kristin Taylor**, Curator of Academic Programs and Collections

---

Note to the reader: We recognize that the intersections of gender identity, reproductive physiology, and experience are vast and infinite. We have chosen to use the words "woman" and "female" in this guide as umbrella terms, fully recognizing that feminist-minded variants such as womxn and femme are meaningful ways of revealing gender bias in language and society at large. The discussion about gendered language is constantly evolving. Our use of the terms "woman" and "female" are intended to include all cis, non-binary, and trans women and any other person who identifies as a woman. See Breena Kerr, "[What Do Womxn Want?](#)," *New York Times*, March 14, 2019.

## Key Term: Reproductive Justice

---

This exhibition aims to promote reproductive health and justice. The term “reproductive justice” was originally coined in 1994 by a group of Black feminists, who later called themselves the Women of African Descent for Reproductive Justice. SisterSong, an Atlanta-based organization, is a leader in the movement and provides a framework on their website that calls for the rights for every person to:

1. Decide if and when they will have a child and the conditions under which they will give birth.
2. Decide if they will not have a child and their options for preventing or ending a pregnancy.
3. Parent the children they already have with the necessary social supports in safe environments and healthy communities, and without fear of violence from individuals or the government.
4. Bodily autonomy free from all forms of reproductive oppression.

To learn more about the history of reproductive justice, please visit [here](#).

---



### Introductory Questions for Looking:

Ask students to consider how comfortable they are with talking about aspects of reproductive health, such as menstruation, methods of contraception, pregnancy, and menopause. How often, if ever, do they discuss these topics with others? If they do talk about these topics, who do they usually discuss them with? Parents, friends, partners? Discuss the levels of comfort before viewing the exhibition and keep these questions—and potential discomforts—in mind while considering the imagery presented by each artist.

## Exhibition Highlight: Laia Abril (Spanish, b. 1986)

A journalist by training, Laia Abril investigates the history of birth control and the consequences of restricting women's access to safe and legal abortion in her project, *On Abortion: And the Repercussions of Lack of Access* (2018). Abril traveled the world to compile the stories and photographs that make up her extensive archive, meeting with doctors, historians, and women who have had life-threatening experiences while seeking to manage a pregnancy. The installation presents these stories chronicling the choices made by women who seek abortions next to photographs of historical methods of birth control. Abril also shows many dangerous methods of abortion that have been used over time. Every year, worldwide, about 42 million women with unintended pregnancies choose abortion, and nearly half of these procedures, 20 million, are considered unsafe. Some 68,000 women die of unsafe abortion annually, making it one of the leading causes of maternal mortality (13%). Of the women who survive unsafe abortion, 5 million will suffer long-term health complications.<sup>1</sup>



**QUINOA, OREGANO, CLOVE, LEMON ROOT**  
The infusion of these plants, obtained in San Salvador, produces an unpleasant-tasting beverage that Salvadorean women use for first-trimester abortions. According with Dr. O—, one of the few doctors who provide honest consultation to unwillingly pregnant women, the recipe has a 60% success rate. El Salvador is one of the most restrictive countries in the world regarding abortion. The procedure is illegal under any circumstance, and women who do it can face up to eight years of imprisonment. There have been at least seventeen cases of Salvadorean women charged with forty years of prison, accused of homicide after suffering miscarriages.



**KNITTING NEEDLE PROCEDURE**  
Above is a three-dimensional cross-section illustrating an attempted knitting needle abortion. In places where abortion is illegal, unwillingly pregnant women may wait until the pregnancy becomes visible (15 to 18 weeks) before acting. At that point, non-professionals may offer a life-threatening abortion procedure: inducing early labor by pushing a pointed instrument through the cervix and into the embryonic sac.

**Laia Abril**, *Ancient Acidic Contraceptives* (left)  
*Knitting Needle Procedure* (right), from the installation *On Abortion: And the Repercussions of Lack of Access*, 2018

## Exhibition Highlight: Laia Abril (Spanish, b. 1986)

Since Abril created this project in 2018, many more developments around the world have taken place. In November 2020, abortion became illegal in Poland except if a woman's life is at stake or in cases of rape or incest. On the other hand, in December 2020, abortion became legal in Argentina up to fourteen weeks of pregnancy, whereas it was previously punishable for doctors and patients alike with a sentence of up to fifteen years in prison.



**Laia Abril**  
Installation view, *On Abortion: And the Repercussions of Lack of Access*, 2016  
Galerija Kresija, Ljubljana, Slovenia, 2017  
Picture by Mateja Veble

### Questions for Looking:

- Although this installation presents many lived stories, why do you think the artist includes blurry or unrecognizable portraits? Do you interact differently with the portraits presented compared to the other types of imagery? Explain.
- Consider the SisterSong's Reproductive Justice framework on page three. How does Laia Abril's work relate to this framework? What are some other forms of "reproductive oppression" that you see today?
- Consider the many different materials used in creating this installation (photographs large and small, objects, maps, text). Why might the artist choose to present this subject matter in this way? Is this format an effective way to present a global history of events? Why or why not?

## KEY THEME: The Politics of Reproductive Health Care

---

Historically, governments, religious organizations, medical professionals, and pharmaceutical corporations have long exerted control over a woman's right to make choices about her health. For thousands of years, people have sought safe and effective ways to prevent or manage unwanted pregnancies. The use of contraceptives can be traced back as far as 3000 BCE, when early civilizations began using condoms made of animal intestine or bladders, mainly to prevent the spread of disease.<sup>ii</sup> A more recent history of contraception is wrapped in legal, religious, and ethical debates. This is an abbreviated timeline of just some of the key moments in the development of contraceptive methods in the US. For a more thorough timeline, please visit [here](#).

---

**1619-1870:** Attempting to avoid becoming impregnated by slaveholders, enslaved African descendant women in the US utilize a contraceptive method that involves chewing cotton roots, a practice that may have originated in West Africa.<sup>iii</sup>

**1855:** The first rubber condom is developed by Charles Goodyear.<sup>iv</sup>

**1873:** The Comstock Act is passed, federally prohibiting sending contraceptives or information on pregnancy prevention or abortion through the US Postal Service or across state lines, deeming these materials obscene.<sup>v</sup>

**1880:** Dr. Wilhelm Mensinga invents the diaphragm, and it becomes a popular contraceptive method until the development of the hormonal birth control pill several decades later.<sup>vi</sup>

**1916:** Margaret Sanger opens the United States' first birth control clinic in Brownsville, Brooklyn. After only a few days, the operation shuts down as a violation of the Comstock Act. Sanger is jailed for 30-days after she is convicted by a New York court for "maintaining a public nuisance."<sup>vii</sup>

**1918:** In *The People v. Sanger*, the New York State Court of Appeals drops criminal charges against Margaret Sanger and rules that doctors are allowed to prescribe contraception for married couples if the pregnancy poses a threat to the woman's health.<sup>viii</sup>

**1956:** Biologist, Gregory Pincus, and Catholic gynecologist, John Rock, develop the first birth control pill, Enovid, and begin a human trial in a housing project in San Juan, Puerto Rico. 221 women are given 10mg of Enovid and although these trials show the pill to be effective, three die in the study, likely because of the high dosage. No autopsies are conducted. The complaints of severe side effects are dismissed by researchers as an overreaction and insignificant.<sup>ix</sup>

**1960:** Enovid is approved by the FDA and is made available in some states for married couples only.<sup>x</sup>

**1965:** The Supreme Court case *Griswold v. Connecticut*, rules against a Connecticut law forbidding the use of contraceptives to all people. The ruling allows married couples in all states to have access to contraception as a right to marital privacy.

**1968:** The United Nations adopts the Proclamation of Tehran at the International Conference on Human Rights, declaring family planning to be a basic human right.<sup>xi</sup>

### Deeper Reading: Margaret Sanger

Margaret Sanger founded Planned Parenthood and the birth control movement. Though Sanger dedicated her life to developing and legalizing contraception and making family planning resources publicly available, she also was part of a first wave generation of feminists who supported eugenics. Sanger made many [public statements](#) that revealed her discredited belief that birth control would strengthen the human race by limiting the reproduction of the poor, people of color, immigrants, and those with disabilities. In 2020, Planned Parenthood removed Sanger's name from their national headquarters building. See the "Opposition Claims Against Margaret Sanger" fact sheet [here](#) for more information.

## KEY THEME: The Politics of Reproductive Health Care

---

**1970:** The Title X Family Planning Program is established under the administration of Richard Nixon as a federal grant program that offers reproductive health care and inexpensive or free forms of contraception to people with low incomes who otherwise cannot afford services.

**1972:** The Supreme Court case *Eisenstadt v. Baird* declares that unmarried people can have access to modes of contraception.

**1984:** Following the First National Conference on Black Women's Health Issues, healthcare activist Byllye Avery establishes the National Black Women's Health Project (NBWHP). It is the first national organization to promote Black women's access to health care, including reproductive and sexual health care.

**1990:** The FDA approves the use of Norplant, a long-term hormonal contraceptive placed under the skin of the arm that is 99% effective and has the ability to prevent pregnancy for up to five years. Although Norplant appeals to many as a low maintenance form of contraception, it is marketed to low-income women of color, and available for free to individuals on public assistance in the US in an attempt to limit their reproductivity. Since Norplant can only be removed by healthcare professionals, women hold little agency over decisions to discontinue the contraception if experiencing side effects or wishing to conceive, and it essentially stands as a form of forced temporary sterilization. Since the device's removal requires a surgical procedure, Medicaid covers the implantation of the device, but not its costly removal. For more information on Norplant, please read further [here](#).

**1994:** The UN adopts a program of action at the International Conference on Population and Development, encouraging global access to sexual education and safe modes of contraception. The conference establishes reproductive rights as a human right, stating that people should have the right to decide for themselves if and when they want to reproduce. They also emphasized the importance of women as a part of leadership and policymaking in reproductive health programs.

**1998:** Preven Emergency Contraceptive Kits are approved by the FDA by prescription. The kit contains a pregnancy test, an information guide, and four pills, each containing 0.25mg of both Levonorgestrel and Estrogen.

**1999:** Levonorgestrel, also known as Plan B, is approved by the FDA as an emergency contraception for prescription.<sup>xii</sup>

**2003:** The FDA allows Plan B to be sold over the counter to adults over the age of eighteen.<sup>xiii</sup>

**2010:** Congress passes the Affordable Care Act which includes a contraceptive mandate, requiring insurers to cover at least one type of FDA approved contraceptive without out-of-pocket costs.<sup>xiv</sup>

### For Discussion: Contraception and Gender Binaries

Most hormonal forms of birth control are designed for AFAB (Assigned Female at Birth) bodies, without proper long-term studies. Nearly every form of pharmaceutical contraception on the market decreases sex drive and negatively impacts mental health, along with many other significant side effects. No birth control pill exists for AMAB (Assigned Male at Birth) bodies, with prototypes showing identical (or even fewer) notable side effects. Trans people, particularly trans women and transfeminine people, are rarely discussed in conversations concerning both sex education and contraceptive methods. Condoms are marketed to cis men, but are necessary for penetrative sex, which is not limited to a particular gender. For transfeminine people who have or are medically transitioning, the overall size of one's genitalia is reduced as a result of hormone therapy, making it harder to find condoms that fit.

### Discussion Questions:

Besides some of the examples discussed above, what are some other possible ways that methods of contraception and the social constructs of gender intersect? Should the burden of contraception be placed solely on one partner? If so, whose responsibility should it be? If not, why?



## KEY THEME: The Politics of Reproductive Health Care

---

**2013:** The FDA approves Plan B to be sold to all people regardless of age. This decision is made after years of debate over whether the drug is safe to use for people under the age of eighteen.<sup>xv</sup>

**2017:** The Supreme Court case, *Little Sisters of the Poor Saints Peter and Paul Home v. Pennsylvania* rules that employers with moral or religious objections to birth control have the right to refuse to cover contraception in their health insurance plans. The ruling allows employers to opt-out of the Affordable Care Act passed in 2010.<sup>xvi</sup>

**2019:** The domestic “gag rule” is put into effect, which forbids health care providers who perform abortions from accessing Title X federal funds. This cuts the number of providers covered under Title X in half, leaving 1.6 million people without access to family planning services, contraceptive counseling, and screening for sexually transmitted infections or cervical cancer.<sup>xvii</sup>



**Carmen Winant**  
*A History of My Pleasure*, 2019–20  
Installation detail

## Exhibition Highlight: Carmen Winant (American, b. 1983)

Carmen Winant's installation titled *A History of My Pleasure* (2019–20) features dozens of assembled images of individuals experiencing pleasure, sourced from alternative publications and journals produced during the 1970s feminist movement. The sheer number reflects the impossibility of visually representing such nuanced experiences as pleasure (as well as other under-represented transformative experiences women share, like childbirth) in a single photograph. Collectively, the installation presents the female body as one able to enjoy sex and hold power, conveying the two as interlinked and in opposition to those who seek to politicize and subdue a woman's libido.



Carmen Winant creating *A History of My Pleasure* for this exhibition, 2020

### Questions for Looking:

- Both Laia Abril and Carmen Winant presents the female body through collections of images. How else might Winant's work relate to Abril's? Are there any other connections that can be made between these two installations?
- How quickly or slowly do you move through each installation? Where did you pause or linger?
- Carmen Winant's piece is inspired by Audre Lorde's essay, *The Erotic as Power*. In this essay, Lorde states: "The erotic is a measure between the beginnings of our sense of self and the chaos of our strongest feelings. It is an internal sense of satisfaction to which, once we have experienced it, we know we can aspire." How does the subject of pleasure and the erotic relate to reproductive health and justice?

## KEY THEME: Racialized Violence in Health Care

There is a long history of racial violence and discrimination in the fields of gynecology and health care, and just a fraction of this history is addressed in this exhibition. Most notably, Doreen Garner addresses the racist and sadistic practices of J. Marion Sims, a nineteenth-century physician who invented the speculum and is often referred to as the “father of modern gynecology.” From 1845 to 1849, in his backyard laboratory in Montgomery, Alabama, Sims conducted experimental surgeries on enslaved Black women, without anesthesia, until he developed a successful treatment for vesicovaginal fistula, a health condition that can be caused by childbirth.

Garner’s piece, *Betsey’s Flag*, pays tribute to three women largely unacknowledged in the history of gynecology—Anarcha, Lucy, and Betsey—all of whom were made subject to Sims’s experiments. By titling this work for Betsey in Sims’s experiments, the artist makes a satirical but also deadly serious nod to Betsy Ross, the creator of the first US flag. Instead of symbolizing the thirteen original US colonies, this flag features sixteen stars that represent the number of beds in Sims’s laboratory.



Doreen Garner, *Betsey's Flag* (front), 2019  
Silicone, glass beads, staples, plexiglass, steel pins, and urethane foam

*Betsey's Flag*  
(back)

## KEY THEME: Racialized Violence in Health Care

### Questions for Looking:

- Consider the materials Garner uses in her sculptures. How does Garner's choice of materials help tell the history of Sims's practice? What feelings does the texture and thickness of the sculptures evoke for you as a viewer? Do you think this was intentional?
- This sculpture just addresses one way that racism is deeply ingrained in women's healthcare. At present, Black women in the US are still over three times more likely to die during childbirth compared to white women.<sup>xviii</sup> What are some other ways women of color might experience medical racism?
- Garner says: "It's not about creating a gruesome work. It's about creating a work that has subtle nuances where you don't really completely know how to feel, and maybe that's what stays with you." Do you think the artist accomplishes this nuance? If so, what aspects help move the piece beyond the grotesque?
- In January 2018, after calls from Doreen Garner and other activists, this monument of J. Marion Sims was removed from Central Park in New York City and placed near his grave in Brooklyn. Do public monuments shape a collective understanding of US history? Are these types of monuments dangerous or inconsequential? Why or why not?



Monument to J. Marion Sims, New York  
Image source: Curbed Flickr Pool / Matt Green

## KEY THEME: Radicalized Violence in Health Care



**Doreen Garner**, *Henrietta: After the Harvest*, 2019  
Urethane foam, plastic, silicone, steel pins, barbed wire, and glass beads  
71 x 38 x 10 inches

### Questions for Looking:

Consider the colors red, black, and green used in this sculpture. What emotions do the colors elicit?

What associations do students have with these colors in relation to the human body?

What associations do the colors red, green, and black have in relation to Black identity?

### Deeper Reading:

**Henrietta Lacks**  
(American, 1920-1951)

One of the most significant moments in contemporary medical history was the discovery of the first immortal human cell line. For decades medical researchers had attempted to extract cells from the human body, to study and experiment on but every attempt had resulted in the death of those cells outside of the body. In 1951 Henrietta Lacks went to John Hopkins to be treated for cervical cancer. Doctors collected a sample of her tissue without Lacks's consent, and the cells were found to reproduce every 24 hours without stopping. This discovery of the first immortal cell line revolutionized medical research, aiding in the development of the polio vaccine, gene mapping, and cancer and AIDS research, among many other advancements. Although her "HeLa" cells still generate millions of dollars in profit for medical research, Lacks's family received no compensation, and her life has only recently gained recognition. In 2010 a headstone was placed on the unmarked grave where Lacks is believed to be buried.<sup>1</sup>

1. For more information on Henrietta Lacks, please read *The Immortal Life of Henrietta Lacks* by Rebecca Skloot.



**Learn more about Doreen Garner**  
***Doreen Garner Sculpts Our Trauma***  
2018

From Art21's *New York Close Up* series

Series Producer: Nick Ravich. Director & Editor: Brian Redondo. Cinematography: Brian Redondo. Additional Camera: Diana Diroy, Anna Barsan. Sound: Diana Diroy. Production Assistant: Ife Adelona. Design & Graphics: Open, Urosh Perisic. Artwork Courtesy: Doreen Garner. Music Courtesy: Blue Dot Sessions, Federico Escalante. Video; color, sound; 7 minutes, 38 seconds  
Courtesy Art21, art21.org, founded 1997

## Exhibition Highlight: Krista Franklin (American, b. 1970)

Krista Franklin's work intimately documents the artist's experiences managing uterine fibroids, a condition that can cause infertility and disproportionately affects Black women. Uterine fibroids affect approximately 26 million people yet are largely under-researched. In July 2020, Vice President Kamala Harris introduced the *Uterine Fibroid Research and Education Act* during her term in the Senate, with the goal to provide funding and expanded research into this condition that is the number one cause of hysterectomies (a surgery in which all or part of the uterus is removed). Uterine fibroids are one cause of maternal mortality in the United States.<sup>xix</sup> For information on many more disparities in reproductive health care, please visit [this link](#).



Krista Franklin, From *Under the Knife*, 2018

### Questions for Looking:

- How does Franklin's use of text and image shape your understanding of her story? Do both text and image provide the same level of detail?
- These images are excerpts from the book, *Under the Knife*, published in 2018 by Candor Arts. How might this work read differently in a book instead of an exhibition? How does Franklin turn her personal, diaristic story into something relatable to a larger audience?
- What sections of the text stand out to you the most? Why?
- Do images have the power to advance the reproductive justice movement?

## KEY THEME: Pregnancy Loss and a Culture of Silence



**Joanne Leonard**  
(American, b. 1940)  
*Tears and Tear-er and Terror, November 28, 1973,*  
from *Journal of a Miscarriage*, 1973



© Chrissy Teigen/Instagram  
(image not in exhibition)

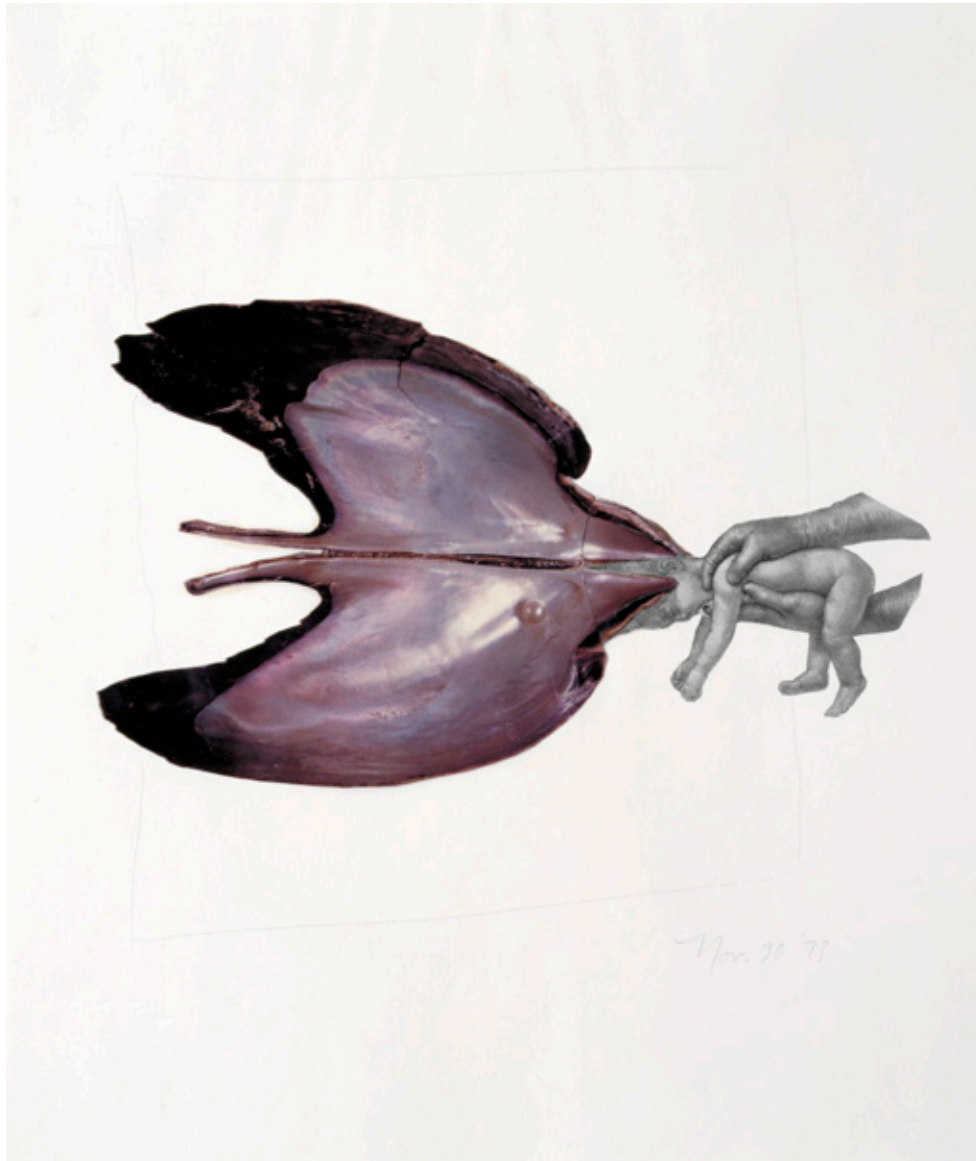
Statistically ten to fifteen percent of all pregnancies end in miscarriage—and one woman in 100 experiences repeat miscarriages. Yet, few people publicly address this form of loss, which can cause many women to feel ashamed or to grieve alone.<sup>xx</sup> On October 1, 2020 model and actress Chrissy Teigen posted images to Instagram that announced the loss of her child in the fifth month of her pregnancy. Teigen received mixed responses, with many praising her for the bravery in posting such a private moment and others criticizing her for being too open. Teigen's post has since caused many more women to come forward to publicly share their stories of pregnancy loss with others.

### Exhibition Highlight: Joanne Leonard (American, b. 1940)

Joanne Leonard created the *Journal of a Miscarriage* series while was grappling with the loss of her first pregnancy to miscarriage in 1973. Leonard created one collage per day, over the span of thirty days. Some appear almost violent, with the artist using the blood she shed from the miscarriage itself as paint on the page and standing as evidence for a physical loss; others seem whimsical, such as images of shells appearing to be impregnated or pierced by other phallically shaped shells. These collages were groundbreaking, in step with her larger art-making practice focused on bringing women's issues to light with unabashedly autobiographical works. Though Leonard is widely known for her straightforward photographs of women's lives, she is often drawn to collage—a historically common medium for activists and feminists.

## KEY THEME: Pregnancy Loss and a Culture of Silence

---



**Joanne Leonard**  
(American, b. 1940)  
*Untitled (clam shell/birth)*, November 30, 1973  
from *Journal of a Miscarriage*, 1973

### Questions for Looking:

- Joanne Leonard's series was created in 1973. How do you think people reacted to this series when it was first shown? Do students think it is better received now? Why or why not?
- What might be some reasons that pregnancy loss is kept so private? What do students think are the pros and cons of sharing imagery like Teigen's with others? Can art be used as a form of healing?
- Joanne Leonard has said that: "Feminism is a tool for looking at what's missing."<sup>xxi</sup> How do students interpret this statement? What might the artist mean?



## KEY THEME: Deconstructing the Maternal Image

From the 16<sup>th</sup> Century to the 20<sup>th</sup> Century, women were expected to cover their pregnant bellies, as making it visible was a shameful reminder that women had sex.<sup>xxii</sup> This general discomfort with the pregnant body affected its visual representation, with media ignoring maternity for most of the 19th century and into the 20<sup>th</sup> century. Pregnancy was seen as deeply private and personal, so it was a monumental moment in 1952 when Lucille Ball's character in *I Love Lucy* was visibly pregnant on screen.<sup>xxiii</sup> This was the first time a woman with a baby bump was shown on television—an early step towards the normalization of pregnant bodies. Following *I Love Lucy*, many television shows decided to use pregnancy as a narrative point such as shows like *The Flintstones* in 1963 and *Bewitched* in 1965. Almost four decades later, Demi Moore appeared in 1991 on the *Vanity Fair* cover, nude and with her hands holding her pregnant belly, another transformational moment in the representation of maternity in pop culture history. Moore stood comfortably and confidently in front of the camera, a new representation of pregnancy that embraced female sexuality. In the 21st century, we are more familiar with seeing pregnant bodies represented in movies, television, and in magazines. Now the relationship to seeing a pregnant body is far more normalized, however, this representation is not intersectional, including different types of pregnant bodies but is usually of cis-gendered women. Disabled bodies, transmasculine bodies, and intersex bodies are often left out of visual representation, and these pregnancies are typically seen in connection to cis-hetero relationships.

## CLASSROOM ACTIVITY: Maternity in Pop Culture: Past, Present, and Future



Image captions from left to right: *I Love Lucy* show (1952); Demi Moore in *Vanity Fair* magazine, image and © Annie Leibovitz (1991); Beyoncé image by Awol Erizku © @Beyonce (2017); Serena Williams in *Vanity Fair* magazine, image and © Annie Leibovitz (2017). (images not in the exhibition)

Ask students to consider some of the ways they have seen the pregnant body depicted in magazines, television, and movies.

Have students collect images they can find in the media of pregnancy or relating to reproductive health.

Discuss with students how easy or difficult it was for them to find their images. Where were they found? What text components accompany the images?

What are some words students would use to describe the images they found?

What might images of pregnancy and fertility look like in the future?

After viewing the work of Joanne Leonard, have students illustrate their answers to these questions through creating their own collages.

## Exhibition Highlight: Candy Guinea (American, b. 1984)

The short film *Mariposa* (2017) by Candy Guinea depicts the heteronormative childbirth industry from the perspective of a queer Latinx couple. Guinea documents her journey with her partner, Castro, as they attempt to conceive their first child through insemination. The film documents the couple's numerous trials and errors with the process, considering the larger emotional and social realities of those who undergo this often arduous form of conception. As the film progresses, we follow the couple as they attempt to find gender-neutral maternity clothing to LGBTQ+ friendly prenatal care, revealing prevailing gender binaries surrounding maternal health care.



Candy Guinea (American, b. 1984), *Mariposa* (still), 2017

### Questions for Looking:

- Although many of the works on the first floor of the exhibition address a woman's agency and right to choose whether or not to become a mother, this film documents the difficulties that many people experience when trying to conceive a child. Is the act of making this film also a form of reproductive justice activism? How or how not?
- How does this film compare and contrast to the other works in the exhibition?

## Extended Resources

---

### Books

- Block, Jennifer. *Everything Below the Waist: Why Healthcare Needs a Feminist Revolution*. New York, NY: St. Martin's Press, 2019.
- Boston Women's Health Book Collective. *Our Bodies, Ourselves*. New York, NY: Touchstone Books, 1970.
- Briggs, Laura. *Reproducing Empire: Race, Sex, Science, and U.S. Imperialism in Puerto Rico*. Berkley, CA: University of California Press, 2003.
- Carucci, Elinor. *Midlife*. New York, NY: The Monacelli Press, 2019.
- Chadwick, Sarah. *The Sweetness of Venus: A History of the Clitoris*, Armin Lear Press, 2020.
- Cooper Owens, Deirdre. *Medical Bondage*. Athens, GA: The University of Georgia Press, 2017.
- Davis, Dana-Ain. *Reproductive Injustice: Racism, Pregnancy, and Premature Birth*. New York, NY: New York University Press, 2019.
- Eldridge, Laura. *In Our Control: The Complete Guide to Contraceptive Choices for Women*. New York, NY: Seven Stories Press, 2010.
- Finch, Annie. *Choice Words: Writers on Abortion*. Chicago, IL: Haymarket Books, 2020.
- Fraser, Nancy, Tithi Bhattacharya, and Cinzia Arruzza. *Feminism for the 99%: A Manifesto*. London: Verso, 2019.
- Hooks, Bell. *Feminism Is for Everybody, Passionate Politics*. London, United Kingdom: Routledge, 2014.
- Kapsalis, Terri. *Public Privates: Performing Gynecology from Both Ends of the Speculum*. Durham, NC: Duke University Press, 1997.
- Leonard, Joanne. *Being in Pictures*. Ann Arbor, MI: The University of Michigan Press, 2008.
- Lorde, Audre. *Sister Outsider*. Toronto, Ontario: The Crossing Press, 1984.
- Matthew, Dayna Bowen. *Just Medicine: A Cure for Racial Inequality in American Health Care*. New York, NY: New York University Press, 2017.
- Nelson, Alondra. *Body and Soul: The Black Panther Party and the Fight Against Medical Discrimination*. Minneapolis, MN: University of Minnesota Press, 2011.
- Rich, Adrienne. *Of Women Born, Motherhood as Experience and Institution*. New York, NY: W. W. Norton & Company, 1974.
- Roberts, Dorothy. *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty*. New York, NY: Vintage Books, 1997.
- Ross, Loretta, Marlene Gerber Fried, Jael Silliman, and Elena Gutiérrez. *Undivided Rights: Women of Color Organize for Reproductive Justice*. Boston, MA: South End Press, 2004.
- Ross, Loretta, Lynn Roberts, Erika Derkas, Whitney Peoples, and Pamela Bridgewater Toure. *Radical Reproductive Justice: Foundations, Theory, Practice, Critique*. New York, NY: Feminist Press, 2017.
- Skloot, Rebecca. *The Immortal Life of Henrietta Lacks*. New York, NY: Crown Publishing Group, 2011.
- Washington, Harriet A. *Medical Apartheid*. New York, NY: Harlem Moon, 2006.
- Williams, Linda. *Screening Sex*. Durham, NC: Duke University Press, 2008.
- Winant, Carmen. *My Birth*. Ithaca, NY: SPBH Editions and Image Text Ithaca Press, 2017.
- Winant, Carmen. *Notes on Fundamental Joy; Seeking the Elimination of Oppression through the Social and Political Transformation of the Patriarchy That Otherwise Threatens to Bury Us*. New York, NY: Printed Matter, 2019.

## Extended Resources

---

### Podcasts and Social Media Handles

*Black Feminist Rants: Conversations on Reproductive Justice and Activism* by LaKia Williams for SisterSong

*Repros Fight Back* by Jennie Wetter for the Population Institute

*Mirror and a Flashlight* by the Chicago Women's Health Center

*Dr. Everywoman*

*Sarah Chadwick's Its.personalgirls*

### Film and Television

*No Más Bebés*. Mexico: Independent Television Service, 2015.

Chin, Staceyann. *Motherstruck!* United States: Scary Mommy, 2019.

# Extended Resources

---

## Illinois Learning Standards Addressed in this Guide

### VISUAL ARTS STANDARDS

**VA:Re7.2.K-12** Perceive and analyze artistic work. Visual imagery influences understanding of, and responses to, the world.

**VA:Re8.K-12** Construct meaningful interpretations of artistic work. People gain insights into meanings of artworks by engaging in the process of art criticism.

**VA:Re9.K-12** Apply criteria to evaluate artistic work. People evaluate art based on various criteria.

**VA:Cn11.K-12** Relate artistic ideas and works with social, cultural, and historical context to deepen understanding. People develop ideas and understandings of society, culture, and history through their interactions with and analysis of art.

### SOCIAL SCIENCES STANDARDS

**SS.CV.1.9-12** Distinguish the rights, roles, powers, and responsibilities of individuals and institutions in the political system.

**SS.CV.5.9-12** Analyze the impact of personal interest and diverse perspectives on the application of civic dispositions, democratic principles, constitutional rights, and human rights.

**SS.CV.6.9-12** Describe how political parties, the media, and public interest groups both influence and reflect social and political interests.

**SS.CV.8.9-12** Analyze how individuals use and challenge laws to address a variety of public issues.

**SS.H.3.9-12** Evaluate the methods utilized by people and institutions to promote change.

**SS.H.7.9-12** Identify the role of individuals, groups, and institutions in people's struggle for safety, freedom, equality, and justice.

**SS.H.8.9-12** Analyze key historical events and contributions of individuals through a variety of perspectives, including those of historically under-represented groups.

**SS.H.11.9-12** Analyze multiple and complex causes and effects of events in the past.

## Endnotes

- <sup>i</sup> Reviews in *Obstetrics and Gynecology*. 2009 Spring; 2(2): 122–126. “Unsafe Abortion: Unnecessary Maternal Mortality,” Lisa B Haddad, MD, MA, Clinical Fellow in Obstetrics and Nawal M Nour, MD, MPH Accessed 11.4.20.
- <sup>ii</sup> Khan, Fahd, Saheel Mukhtar, Ian K Dickinson, and Seshadri Sriprasad. “The Story of the Condom,” January 2013. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3649591/>.
- <sup>iii</sup> “Fertility Control, Shared Nurturing, and Dual Exploitation: the Lives of Enslaved Mothers in the Antebellum United States.” Taylor & Francis. Accessed January 5, 2021. <https://www.tandfonline.com/doi/full/10.1080/09612025.2017.1336849>.
- <sup>iv</sup> Khan, Mukhtar, Dickinson, and Sriprasad. “Condom,” 2013
- <sup>v</sup> “The Embryo Project Encyclopedia.” First American Birth Control Clinic (The Brownsville Clinic), 1916 | The Embryo Project Encyclopedia. Accessed January 5, 2021. <https://embryo.asu.edu/pages/first-american-birth-control-clinic-brownsville-clinic-1916>; “The Embryo Project Encyclopedia.” The Comstock Law (1873) | The Embryo Project Encyclopedia. Accessed January 5, 2021. <https://embryo.asu.edu/pages/comstock-law-1873>; “Anthony Comstock’s ‘Chastity’ Laws.” PBS. Public Broadcasting Service. Accessed January 5, 2021. <https://www.pbs.org/wgbh/americanexperience/features/pill-anthony-comstocks-chastity-laws/>.
- <sup>vi</sup> “Newsletter #6 (Winter 1993/1994).” MSPP / Newsletter / Newsletter #6 (Winter 1993/1994). Accessed January 5, 2021. [https://www.nyu.edu/projects/sanger/articles/sangers\\_role\\_in\\_contraceptive\\_technology.php](https://www.nyu.edu/projects/sanger/articles/sangers_role_in_contraceptive_technology.php).
- <sup>vii</sup> Grimaldi, Jill, and Jill Grimaldi. “Sanger’s First Clinic.” Margaret Sanger Papers Project, November 19, 2010. <https://sangerpapers.wordpress.com/2010/10/26/sangers-first-clinic/>.
- <sup>viii</sup> “Newsletter #6 (Winter 1993/1994).” MSPP / Newsletter / Newsletter #6 (Winter 1993/1994). Accessed January 5, 2021. [https://www.nyu.edu/projects/sanger/articles/sangers\\_role\\_in\\_contraceptive\\_technology.php](https://www.nyu.edu/projects/sanger/articles/sangers_role_in_contraceptive_technology.php).
- <sup>ix</sup> “The Puerto Rico Pill Trials.” PBS. Public Broadcasting Service. Accessed January 5, 2021. <https://www.pbs.org/wgbh/americanexperience/features/pill-puerto-rico-pill-trials/>.
- <sup>x</sup> “The Embryo Project Encyclopedia.” Enovid: The First Hormonal Birth Control Pill | The Embryo Project Encyclopedia. Accessed January 6, 2021. <https://embryo.asu.edu/pages/enovid-first-hormonal-birth-control-pill>.
- <sup>xi</sup> “Fifty Years Ago, It Became Official: Family Planning Is a Human Right.” United Nations Population Fund, May 11, 2018. <https://www.unfpa.org/news/fifty-years-ago-it-became-official-family-planning-human-right>.
- <sup>xii</sup> “Federal Judge Orders FDA to Broaden Access to Emergency Contraception.” Center for Reproductive Rights. Accessed January 6, 2021. <https://www.reproductiverights.org/press-room/federal-judge-orders-fda-to-broaden-access-to-emergency-contraception>.
- <sup>xiii</sup> Kolata, Gina. “F.D.A. Panels Favor Easing Access to Morning-After Pill.” *The New York Times*. The New York Times, December 16, 2003. <https://www.nytimes.com/2003/12/16/health/fda-panels-favor-easing-access-to-morning-after-pill.html>.
- <sup>xiv</sup> “Birth Control Benefits and Reproductive Health Care Options in the Health Insurance Marketplace®.” HealthCare.gov. Accessed January 6, 2021. <https://www.healthcare.gov/coverage/birth-control-benefits/>.
- <sup>xv</sup> Rovner, Julie. “FDA OKs Prescription-Free Plan B For All Ages, Ending Battle.” NPR. NPR, June 21, 2013. <https://www.npr.org/sections/health-shots/2013/06/11/190684947/fda-oks-prescription-free-plan-b-for-all-ages-ending-battle>.
- <sup>xvi</sup> Liptak, Adam. “Supreme Court Upholds Trump Administration Regulation Letting Employers Opt Out of Birth Control Coverage.” *The New York Times*, July 8, 2020. <https://www.nytimes.com/2020/07/08/us/supreme-court-birth-control-obamacare.html>.
- <sup>xvii</sup> Racial and Ethnic Disparities Continue in Pregnancy-Related Deaths. (2019, September 06). Retrieved January 22, 2021, from <https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>
- <sup>xviii</sup> Dawson, Ruth, and Guttmacher Institute. “Trump Administration’s Domestic Gag Rule Has Slashed the Title X Network’s Capacity by Half.” Guttmacher Institute, February 26, 2020. <https://www.guttmacher.org/article/2020/02/trump-administrations-domestic-gag-rule-has-slashed-title-x-networks-capacity-half>.
- <sup>xix</sup> “Harris Introduces Legislation to Support Uterine Fibroids Research and Education,” July 30, 2020. <https://www.harris.senate.gov/news/press-releases/harris-introduces-legislation-to-support-uterine-fibroids-research-and-education>.
- <sup>xx</sup> “Miscarriage.” Accessed December 30, 2020. <https://www.marchofdimes.org/complications/miscarriage.aspx>.
- <sup>xxi</sup> Sidonie Smith, “Behind the Pictures: An Interview with Joanne Leonard,” ed. Ricia Anne Chansky, *a/b: Auto/biography Studies* 29, no. 1 (2014): 11–25, <https://www.tandfonline.com/doi/full/10.1080/08989575.2014.921761>.
- <sup>xxii</sup> Stein, Sadie. “A Brief History Of The Bump Watch.” *Jezebel*, June 19, 2013. <https://jezebel.com/a-brief-history-of-the-bump-watch-5754158>.
- <sup>xxiii</sup> Bronstein, Phoebe. “Our Modern Obsession with Pregnancy Is Just Another Attempt to Control Women’s Bodies.” *Quartz*. Accessed January 6, 2021. <https://qz.com/759987/our-modern-obsession-with-pregnancy-is-just-another-attempt-to-control-womens-bodies/>.

**MoCP** Museum of  
Contemporary  
Photography

**Columbia**  
COLLEGE CHICAGO