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The 1939 Dickinson-Belskie Birth Series Sculptures: The Rise of Modern Visions of Pregnancy, the Roots of Modern Pro-Life Imagery, and Dr. Dickinson’s Religious Case for Abortion

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Abstract
This multidisciplinary essay examines the hugely influential—or surprisingly overlooked—Birth Series sculptures. Created in 1939 by Dr. Robert L. Dickinson (obstetrician-gynecologist and leader of the Planned Parenthood Federation of America) and sculptor Abram Belskie, they illustrate the process of human development from fertilization through delivery. First displayed at the 1939–1940 World’s Fair in New York City, they were reproduced in a variety of forms and sent out across the United States and overseas. Hardly a brief fad, their popularity persisted into the 1980s. This essay has four purposes. First, it tells the stories of Dickinson and Belskie to appreciate their contributions as artists to twentieth-century medical knowledge. Second, it demonstrates that the sculptures serve as the missing link in the rise of modern twentieth-century visions of pregnancy, decades before Lennart Nilsson’s much-heralded photographs in *Life* magazine in the 1960s. Third, it assesses the uniqueness of the visual story the Birth Series told, in that it depicted in utero development as a romantic tale that began with the union of sperm and egg and unfolded to reveal the birth of a precious child—imagery that would later become the hallmarks of the modern pro-life movement. Fourth, it addresses the conundrum of Dickinson’s intent. A deeply religious man, Dickinson hardly intended to make a visual case against abortion. Rather, he believed firmly in the necessity of its practice, not despite his religious views but because of them. He then set out to make the religious case for contraception and abortion.

As I have learned in the last few years since this project began, say the name “Dr. Robert L. Dickinson” (1861–1950)—obstetrician, gynecologist, sexologist, and artist—and you’re likely to elicit scant glimmer of recognition. The only people who tend to recognize the name are historians of sexuality and women’s health and medicine in twentieth-century America. Such scholars all have their stories about how Dickinson intersected with their own areas of scholarly interest, be it the history of birth
control, abortion, and sterilization or clitorises, lesbianism, and menstruation. Proceed further in such conversations, however, and mention the name “Abram Belskie” (1907–1988)—the British-born sculptor with whom Dickinson collaborated for the last ten years of his life—and the light of recognition again grows dim. Proceed further still and mention the product of this intense collaboration—in particular, the 1939 Birth Series sculptures that illustrate the process of human development from fertilization through delivery—and you will have lost just about everyone, save a few archivists and local historians whose knowledge and collections form the basis of this essay.

And this, to say the least, is astonishing, given how hugely influential Dickinson, Belskie, and the Birth Series once were and how hugely influential they remain today, even if we do not realize it. Indeed, while it is perhaps understandable that Belskie’s name rings few bells—he was the quieter of the two—that Dickinson seems to have fallen from public memory is especially striking, since the doctor was well-known and highly regarded during his life and for years after his death. In 1939, for example, Margaret Sanger (leader of the movement that would become the Planned Parenthood Federation of America) told Dickinson “how deeply grateful” she was for all that he had done for the birth control movement, not the least of which was to help win the medical profession over to the birth control cause. Dickinson was also admired...
by his medical peers, and he served as head of the American Gynecological Society, the New York Obstetrical Society, the National Committee on Maternal Health, the obstetrical section of the American Medical Association, and the American College of Surgeons. He even earned the admiration of prominent sexologists who followed in his wake. Alfred Kinsey—author of *Sexual Behavior in the Human Male* (1948) and *Sexual Behavior in the Human Female* (1953)—credited him in 1941 for turning his “attention to the purposes of research in this field.” And William Masters and Virginia Johnson praised him as well, opening their influential 1966 book *Human Sexual Response* with a quotation from him. Thus medical historian Vern Bullough’s summation of the man: Dickinson “might be regarded as the founding father of much of American sex research.” Yet most of us still have no idea who he was.

The same holds true for the Birth Series sculptures Dickinson and Belskie created. Although only casually touched upon by scholars, the Birth Series was a monumental scientific and artistic achievement. Commissioned by the New York Maternity Center Association for an exhibit on women’s health and reproduction, the sculptures went on immediate display to much fanfare and excitement at the 1939–1940 World’s Fair in New York City where they were seen by hundreds of thousands of people. Wildly successful and much in demand in the years thereafter, the sculptures were reproduced in a variety of forms and sent out to medical teaching institutions and health museums across the nation and overseas—among them (and where I first encountered them) the University of Nebraska State Museum. But this was just the beginning. The Birth Series made its way into sex education materials in classes for expectant parents, university students, and high-schoolers. Local businesses, global philanthropic organizations, authors of books on childbirth, and makers of movies and television programs found use for the Birth Series imagery as well. Even the military was intrigued. Yet, despite its ubiquity, the Birth Series, like its creators, seems to have disappeared into the mists of time. And therein lies the first of this essay’s four goals: to tell the stories of Dickinson, Belskie, and their crowning sculptural achievement so that each may be remembered—and perhaps appreciated—again.

To tell their story, moreover, helps illuminate the importance of twentieth-century artists in crafting, and then disseminating, new medical knowledge to professional and lay audiences, a tale often reserved for medical artists of centuries past. Although the sculptor Belskie has long been neglected by scholars, his collaboration with Dickinson—in the Birth Series sculptures in 1939 and in the massive Sculptured Teaching Models collection produced in the ten years thereafter—helped shape modern day obstetrics and knowledge about sexual health and education. Dickinson too was a deeply creative man. Although he was a physician and scientist, he also was an artist and a rather good one at that. He sketched, colored, and painted obsessively. Nor was he content to use art solely to enliven his private life; he also used it to better the science and medicine in which he engaged. In short, for Dickinson there was no line that divided the scientific from the artistic, the written word from the pictorial representation. It all worked together seamlessly—and unapologetically. And thus to appreciate him in this regard is to do justice to what he once said: “You see, I am really twins—doctor and artist—and I defy you to tell me apart.”
But to tell the story of these men and the sculptures they created also adds much to scholarly conversations about reproductive politics, past and present, which brings me to my second point. The Birth Series sculptures, I argue, serve as the missing link in the shift from nineteenth-century conceptualizations of pregnancy to those that had emerged by the latter third of the twentieth. As Leslie Reagan demonstrated, the nineteenth-century notion of quickening as the start of life still held sway well into the early twentieth century, despite the medical profession’s efforts to convince women otherwise. Likewise, the experience of pregnancy was still largely regarded as a woman’s experience with what grew inside her womb, not of two separate identities that existed from the moment of conception forward. However, by the latter third of the twentieth century both notions had eroded dramatically. As Sara Dubow noted in describing the rise of fetal medicine in the 1970s: no longer did pregnancy care involve merely two people (doctor and woman); a third (the fetus) had entered the equation, dramatically affecting the choices women had in their pregnancies and the care they received.

Certainly, the reasons for this shift are varied and complex—rooted as much in changes in society as in changes in medicine and technology—as historians such as Ziv Eisenberg have begun to show. But, for our purposes here, one explanation stands out: that it comes down to how we visualize the contents of a woman’s womb. To that end, following the lead of Rosalind Petchesky and Barbara Duden, feminist scholars have pointed squarely to the impact of embryonic/fetal photography in the 1960s—as it appeared in such hugely popular books as Geraldine Lux Flanagan’s *The First Nine Months of Life* (1962) or Lennart Nilsson’s 1965 *A Child Is Born* (which were accompanied by massive photo spreads in *Look* and *Life* magazines, respectively)—as the moment when this visual shift first took hold. As Lisa Wade recently put it when describing Nilsson’s work, “His pictures made it possible for people to visualize the contents of a woman’s womb independently of her body. Suddenly, the fetus came to life. It was no longer just something inside of a woman, no longer even in relationship to a woman; it was an individual with a face, a sex, a desire to suck its thumb.” Similar arguments have been made about the impact of ultrasound in obstetrics by the 1970s. But as this article will make clear, this visual process was under way well before the 1960s and ’70s. After all, the Birth Series sculptures debuted in 1939 and were disseminated on a truly massive scale in the decades thereafter to lay and professional audiences in the United States and abroad. People of all walks of life had already seen the imagery found in Flanagan’s and Nilsson’s photos.

This brings me to my third point. Although the Birth Series sculptures preceded embryonic/fetal photos by several decades, they were hardly the first images of a disembodied womb and of a humanized fetal form; nor were they the first such images to be displayed. While Karen Newman has traced this phenomenon back to religious/anatomical art of the ninth century, Nick Hopwood has described the rise of wax and marble embryonic models in the nineteenth. Lynn Morgan and Catherine Cole, moreover, have uncovered the massive collection and display of real embryos and fetuses in popularly accessible venues and medical teaching institutions during the first half of the twentieth century. But there was something particularly new in the story the Birth Series told, and for those of us raised pro-life Catholic in the 1970s and 1980s, something distinctly familiar.
Indeed, in the generations preceding the Birth Series’ 1939 debut, depictions of in utero development generally embodied a tone of either dispassionate science or grotesque morbidity. This was not so, however, with the models Dickinson and Belskie created. Instead, these sculptures embodied a crucial moment of translation in this story-telling process, one that moved the origin-of-life narrative from images of the inert and dead to images that were alert and alive, producing a grand new visual story about human development that audiences loved. Part of the appeal was the practical story the Birth Series told about the mechanics of reproduction. Combining art with the latest in scientific knowledge and technology, Dickinson and Belskie gave audiences a view of something with which most everybody was familiar but nobody had ever seen: what happens inside a pregnant woman’s body from the moment of fertilization through the process of delivery. The hidden mysteries of humans’ biological bodies had become remarkably visible.

However, there was something else buried within the aesthetic of the Birth Series that drew audiences in. With these sculptures, the story of in utero development became a romantic one, with a humanized fetus whose story began at the moment of conception and culminated in the birth of a sweet and innocent child. And for those inclined towards more religious sentiments (as Dickinson surely was), it was also a profoundly spiritual story about the divine origins of the creation of human life. Thus, although Dickinson was a firm supporter of abortion and even once a leader in the Planned Parenthood Federation of America, the sculptures he and Belskie made in 1939 and 1940 articulated over three decades in advance the imagery that would become the hallmarks of the modern pro-life movement. All of which is to say, the past is a messy place and it has little use for the battle lines we often draw in today’s reproductive wars.

This brings me to my fourth point: the story behind the Dickinson-Belskie Birth Series reveals the limits of the polarized alignment manifest in reproductive politics today, an alignment that pits pro-life religiosity against pro-choice secularity. According to the sociologist of religion Robert Wuthnow, this dichotomy did not always exist but rather was born in the 1970s and still influences us today. And yet this alignment need not be. Dickinson’s story reveals that belief in the divine sacredness of the creation of human life could coalesce effortlessly with the simultaneous belief in the necessity of abortion. Dickinson’s faith in an amalgam of science and religion also puts him in similar company with the more widely known Dr. John Rock, who by the 1960s saw no theological conflict between his devout Catholicism and his ardent support for the Pill. In contrast, while modern pro-life educational materials increasingly rely upon science to bolster their religious position, as the feminist political scientist Joanne Boucher has demonstrated, they do so to assert that only one conclusion can be drawn in the face of such in utero imagery: that life begins at conception and that abortion is murder. But Dickinson believed precisely the reverse. Indeed, according to Dickinson, it was the harmonious blending of science and religion that provided the physical evidence and the moral argument in favor of fertility control. In turn, such sentiments help explain how Dickinson spent the final decades of his life. Inspired by art, but guided by his belief in the transformative power of faith and reason, not only did Dickinson educate lay and professional audiences about the mechanics of reproduction, he also
tirelessly made the religious case in favor of the birth control movement and the provision of abortion.

To tell this story, this essay is broken down into four sections. The first section traces the trajectories of Dickinson as a doctor and artist and that of the Maternity Center Association (MCA), illustrating how the intersection of their paths gave rise to the Birth Series sculptures; it also takes the story through the sculptures’ initial showing at the 1939–1940 World’s Fair in New York City and the popularity they immediately achieved when reproduced and disseminated on a massive scale thereafter. The second section turns to images of the sculptures themselves. While space does not allow for the reproduction of all twenty-four of the originals, the eight that do appear here give a good impression of what the series looked like and the impact they may have on those who view them—in the past and in the present. The third section backs up for a moment, pausing to introduce Abram Belskie and appreciate all the collaborative work and creativity behind the making of these evocative three-dimensional forms. The final section then turns to more interpretive musings about the many meanings embedded in the Birth Series sculptures, addressing what seems to us now as the conundrum of Dickinson’s intent.

Two final clarifications are necessary. Of course, the pro-life movement and the phrase “pro-life” came into being in the late 1960s in order to challenge the trend towards abortion reform that ultimately culminated with the Supreme Court’s decision in Roe v. Wade in 1973. Thus, this terminology did not exist until several decades after the events I describe here. However, I do not wish to suggest that viewing the Birth Series in the middle part of the twentieth century automatically translated into anti-abortion sentiments, thereby leading inevitably to the modern pro-life movement. It is important to note, for example, that audiences and exhibitors of the Birth Series were untroubled by the simultaneous display of real embryos and fetuses in public health exhibits. Only later, after Roe v. Wade and the rise of the modern pro-life movement, would the “pro-life” response to fetal imagery become more commonplace.

Nor do I wish to suggest that the Maternity Center Association (the organization that commissioned the Birth Series sculptures) should be seen as a nascent, pro-life organization. To the contrary, throughout its history the MCA has worked hard to remain above the political fray when it comes to reproductive politics, choosing to avoid the birth control question during the period covered in this essay and, in the wake of Roe v. Wade, not to engage in the abortion debate. Moreover, the organization’s warnings against abortion in the late 1930s and 1940s must be read within the context of the times. While the MCA’s position against the procedure may have been in part a product of moral views, it was also born of a stark reality: abortion often was dangerous. It was dangerous in part because it was illegal and thus often clandestine and unregulated. But it was especially dangerous because medical breakthroughs such as penicillin would not come into widespread use until after WWII. Little wonder, then, the MCA took such pains to warn women against the procedure. Protecting the lives of mothers was the organization’s first goal. Only later would the imagery manifest in the Birth Series sculptures serve as a rallying cry among pro-lifers for the need to protect the unborn.
Dr. Robert L. Dickinson, the Maternity Center Association, and Two World’s Fairs

This first section revolves around the intersection of two important trajectories in the 1930s: that of Dr. Robert L. Dickinson and that of the MCA. It also involves two World’s Fairs; the first took place in Chicago in 1933, the second in New York City in 1939–1940. The result of this convergence was a sculptural display that would transfix the New York City fair-going crowds. The result would also set into motion the mass reproduction of Birth Series sculptures on an epic scale, a product of the demand that immediately emerged in the United States and across the globe, a demand moreover that was sustained for decades after their initial debut.

Dr. Robert L. Dickinson (1861–1950) had long been interested in the intersection between medicine, science, and art, and as a gynecologist and obstetrician he had long been a practitioner of all three. But as he entered his seventies, he began to proselytize more vigorously the importance of their overlap. He argued that this intersection made better practicing physicians but also that it made better medical education, both for aspiring practitioners and for the general public, who, he believed, should take an active interest in caring for their bodies. Dickinson emphasized a number of these points in a speech he gave in 1933 to the Charaka Club, a group founded in the late 1800s by a handful of neurologists interested in the intersections between medicine and the humanities. Dickinson raved enthusiastically about the new wing of the New York Academy of Medicine building, a space he would go on to occupy (much to the Academy’s dismay) for over ten years: “Writer and illustrator alike will welcome the first draughting room to appear in a medical library . . . Here charts or drawings can be thumb-tacked on the wall. Here a large architect’s table permits spreading big atlases wide open or the marshaling of a series of authorities in their graphic presentation for comparison or selection or copying. Here new impetus should be given,” he passionately concluded, “to art in the service of medical education.”26 Therein perhaps lies the overarching mission of Dickinson’s long and productive career—to insist that art should, or rather must, be taken up in the service of medical education and in the service of medicine as a whole.

This day was long in coming for Dickinson. Born in 1861 in Jersey City, New Jersey, he attended the Brooklyn Polytechnical Institute and then studied for four years in Switzerland and Germany before earning his medical degree in 1882 from the Long Island College Hospital. Dickinson went on to lead a distinguished career in obstetrics and gynecology and in service to his profession. He also authored numerous books and articles—largely about contraception and sexuality—and he threw himself into a variety of causes around these two themes, most famously the birth control movement, eventually serving on Planned Parenthood’s board of directors and as its vice president. But throughout his career, Dickinson was also deeply engaged in the arts. He illustrated walking guides for the state of New York and Palisades Park, designed bookplates for individuals and organizations, and even drew up the architectural design for his summer home on Long Island. In fact, when he was still a young man Dickinson had turned down a position with a lithographic firm to attend
medical school. And while in medical school his drawings so impressed one of his instructors, the distinguished physician Alexander Skene, that he asked Dickinson to provide the illustrations that appeared in Skene’s 1888 *Treatise on Diseases of Women*, a gynecology textbook that dominated the American market for a decade.27

Clearly, therefore, the worlds of medicine and of art were intertwined for Dickinson from the outset, and his simultaneous pursuit of both figured prominently throughout his career. During his forty years as a practicing physician, drawing was central to the thousands of case histories he took of the women who consulted him for their gynecological and obstetrical needs. In addition to written notes, Dickinson complemented each case history with sketches of his patients’ sexual anatomy in which he noted the size, color, and shape of their genitalia as well as any anomalies he may have found. Later, to facilitate this illustration process, he developed other techniques. First, he created a basic rubber stamp outline of women’s sexual anatomy, which he could quickly individualize with additional sketching and color from crayons. He then turned to photography, and through a well-positioned camera secretly hidden in a flowerpot in his office, he quickly captured the images he needed to supplement his written notes.28 Today his camera technique would likely arouse more than a little controversy, and it is worth noting that Dickinson did not mention it in the artistic advice he would later give his medical peers. But Dickinson managed to combine his artistic and medical interest in anatomy and sexuality without upsetting too many people. As historian James Reed noted, perhaps it was Dickinson’s high standing in the medical and social community, as well as his “Christian gentleman” approach, that enabled him to carry out his work without the taint of salaciousness.29 And besides, Dickinson believed he was simply doing his medical duty, using his skills as an artist to capture all that he observed as a scientist.

His publications, moreover, reflect a similarly visual inclination. *Control of Conception*, for example—his 1930s manual of reproductive technology that educated the medical profession on the birth control techniques then available—was replete with images. First published in 1931 and revised under another title thereafter, not only did it illustrate the different kinds of birth control methods but it also gave visual representations of women’s and men’s reproductive anatomies. The manual even offered birds-eye-view instructions in how to lay out gynecological clinics, a reflection of his persistent interest in architectural drawing.30 Likewise, Dickinson’s *Human Sex Atlas* was just as pictorial. First published in 1933 and revised in subsequent years, this volume provided laboriously detailed drawings of women’s and men’s sexual anatomies—in all shapes, sizes, and varieties. Notably, it also included a series of illustrations that depicted a range of (hetero)sexual positions.31

Thus, by the mid-1930s Dickinson was convinced of the value of bridging the worlds of science and art, and he was making it clear that the entire medical profession needed to follow his lead. To that end, Dickinson gave talks with titles like “What Medical Authors Need to Know About Illustrating,” as he did at the Charaka Club in New York City. In addition to waxing poetic about the grand new space at the New York Academy of Medicine building, he extolled the virtues of sketching, drawing, and coloring as important skills for doctors to have; he also offered advice in how best to develop these skills—and what pitfalls to avoid.32 The use of
art, moreover, made better patients. For example, when describing in a 1939 article in the *Journal of Contraception* the value of wall charts and models in teaching women how to insert a diaphragm, Dickinson was “struck by the intelligence of the questions” the female patients asked when such visual aids were available, and he marveled at their desire to practice repeatedly this new skill they were learning. Of course, the medical art he lauded was the literal kind, hardly the interpretive or abstract variety. In a 1933 issue of the *American Journal of Cancer*, Dickinson stressed the need for precision in medical art:

> For sheer definitiveness, no record of physical findings competes with the diagram or picture made to scale. Words cannot equal pictures for visualizing conditions or for forcing the observer to be exact in his statements. Therefore, such use should be fostered. Diagrams should be life size. Entries should be the result of measurements. Colored pencils make for clarity. Reductions do not give adequate values. They are unconsciously misleading in bulk and dimensions. They are abstractions.

He seemed equally convinced of the capacity of drawing to capture an objective reality free from subjective interpretation. But these are assumptions to which we will later turn. For the moment, however, we must pause in our story about Dickinson and his faith in the intersection between medicine and art and cast our gaze elsewhere to appreciate the importance of another 1930s trajectory, that of the Maternity Center Association.

Just when Dickinson was making his case about the importance of art to the practice of medicine, Sarah Ward Gould (assistant director of the MCA) was writing her report on the MCA’s experiences at the 1933 World’s Fair in Chicago. There, and in keeping with popular new forms of public health education, the organization had set up an interactive booth to educate the public about what it called “the entire maternity period”—from the moment a woman was aware of her pregnancy through six weeks after she delivered. The goal was to encourage medical supervision throughout a woman’s pregnancy and not simply to bring the physician in at the end when the baby was born. As an illustration of the mindset the MCA hoped to change, Gould repeated a common refrain, “My mother had eight children and never saw a doctor until the baby came.”

To that end, the MCA created a three-dimensional interactive exhibit through which fair-goers could walk. It featured, on one side, a series of eighteen pictures demonstrating proper maternity care techniques. These included “choosing a doctor early in pregnancy; the preparation for home delivery; teaching the mother while in bed, after the baby has come; how to take care of [the baby] and emphasizing the importance of yearly health examination for mother, father and [the] baby.” On the other side of the exhibit was its “attention getter.” This consisted of a mock-up nursery outfitted with a blue wall decorated with a frieze of stenciled ducks, a small window dressed with white organdy curtains through which artificial sunlight streamed, shell pink furniture, a bright linoleum floor, and a cabinet and bath table constructed from cardboard boxes. For those who wanted to learn more, free educational literature was available. Also on hand was an attendant whose job was
to engage in conversation and answer any questions fair-goers might ask. The 1933 Chicago exhibit, Gould proudly concluded, was a success. Not only did it reach audiences from all walks of life, but Gould believed it “made a decided impression” on those “who are still whispering ‘she’s going to have a baby.’” Indeed, the whole point of the exhibit was to emphasize, and get people talking about, just how much happens inside a woman’s body before birth takes place.36

For the Maternity Center Association, this day was also long in coming. As historians Laura E. Ettinger and Ziv Eisenberg have described, the MCA was a classic product of the Progressive Era movement for infant and maternal welfare reform. Founded in 1918 by obstetricians, social reformers, and public-health nurses in New York City, its purpose was to provide maternity care education in the hopes of reducing the dreadfully high infant and maternal mortality rates that plagued the nation. Early on this work consisted largely of weekly classes for expectant mothers, attended mostly by immigrant women. Within several years, the MCA was operating over thirty maternity centers across Manhattan. By the mid 1920s, it also began publishing maternity care handbooks, and by the early 1930s the organization had established a nurse-midwifery clinic and school, thus becoming, as Ettinger noted, “the leading advocate for prenatal and adequate maternity care in the United States.” By the 1930s, the MCA had decided to step up its educational outreach efforts in other ways: namely, by setting up educational exhibits at two World’s Fairs—the first in Chicago in 1933 and the second in 1939–1940 in New York City, to which we now turn.37

Official planning for the MCA’s exhibit at the New York World’s Fair began in the fall of 1937; while its purpose remained much the same (to educate the public about reproduction and about the need for medical supervision throughout the maternity process), the shape the exhibit would take was by no means self-evident. With Dr. Harvey B. Matthews presiding over the group, the planning committee was comprised of Miss Hazel Corbin of the MCA and approximately a dozen physicians involved in obstetrics and/or public health. Among them was Dr. Robert L. Dickinson.38

In a handful of meetings held at the New York Academy of Medicine building, the committee tossed around a variety of ideas. While the participants agreed that the exhibit ought to include prenatal care, postnatal care, and explanations about the process of labor and delivery, other topics proved more controversial. Among these were whether to provide information about birth control and whether to present midwifery as an acceptable form of medical supervision; both were ultimately rejected.39 Another subject of discussion was the physical installation itself. Scrapped from the outset, apparently, was the exhibit’s original “attention-getter” displayed at the Chicago fair in 1933, the mock-up nursery described above, because it never appears in their conversations when planning for the 1939 exhibit in New York City. Also scrapped was its attention-getting replacement, a sculpture depicting “mother-joy” that was to “express maternity as the climax and the destiny of women-life,” as Dr. Marta Fraenkel described it.40

Also almost scrapped were key portions of what would become the Birth Series models, the depictions of women’s reproductive organs and the early process of embryonic development. As Dr. Bruno Gebhard pointed out at one of the planning meetings, the exhibit was to be “simple and concrete” and viewed by “the family as a unit;” thus it might be best if the committee chose to omit “anatomy and embryology.”41
Dickinson was not present at this meeting and so it is not clear whether he knew of Gebhard’s opposition to his plans. Regardless, Dickinson was able to convince the planning committee to include the Birth Series sculptures. As one of his family members would later recount, “though he declined responsibility for the entire medical exhibit at the New York World’s Fair, he undertook to show ‘how babies come.’”

The result was an exhibit that featured four units. The first was a half circular background mural that depicted “a few important episodes in the life of an expectant mother and father” to drive home the point that maternity was a family affair and not simply something mothers alone ought to be concerned with. Second, following the curvature of the mural and positioned just in front of it, were the Dickinson-Belskie Birth Series sculptures, which began with a lesson in the workings of the female reproductive system and then proceeded to illustrate the process of human development from fertilization through delivery. Third, just below the sculptures was a series of photographs, perhaps loosely recycled from the 1933 exhibit—in that they aimed to illustrate proper maternity care techniques—but which now also prominently featured product endorsements from the MCA’s commercial sponsors, Karo (the corn syrup manufacturer) and Gerber Products (the baby food company). And fourth, facing the display was an information desk staffed by an attendant whose job was to distribute five different educational pamphlets and answer any questions fair-goers might have. To further capture people’s attention, the exhibit also featured a rotating plaster model of the Dionne quintuplets (also done by Dickinson and Belskie), which offered an in utero depiction of the then famous Canadian quintuplets born in 1934, the first set known to have survived infancy. In addition, there was a fake tree with babies hanging from it like fruit and bearing the following educational caption: “Silly people still believe that babies grow from sugarplum trees.” Finally, there was the exhibit’s title, which tellingly read: “The First Year of Life.”

Much to the delight of the MCA, this second exhibit in New York City in 1939–1940 was far more successful than the first one in Chicago in 1933. Housed in the “Hall of Man,” it was accompanied by other exhibits, such as “The Transparent Man,” a model created in the 1920s by the world-renowned Deutsches Hygiene Museum that illustrated the workings of the human body through transparent skin and illuminated organ systems. Notably, such three-dimensional installations (including the one developed by the MCA) reflected the influence of the German visual health museum movement pioneered in the 1920s, a movement increasingly taken up in the 1930s by health educators and museum workers in America. But the Birth Series was, to use the words of the eminently proud MCA, the “piece de resistance.” Wildly popular, the installation attracted long lines every day from ten in the morning to ten at night. Neither rain nor shine stopped the crowds from coming; nor did the occasional stampede. In fact, so well-attended was the exhibit—by one account 700,000 people had viewed it in 1939 alone—that it prompted more than a few complaints from fair organizers and fellow exhibitors who claimed that the MCA installation prevented people from visiting other booths. When reassembled in 1940 for the second year of the New York City World’s Fair, the exhibit underwent several changes. However, the sculptures (of which there were now more) remained the star attraction.
The reaction from the fair-going crowds, moreover, was overwhelmingly favorable—much to the relief of the MCA. “It was not without qualms that we decided to display the sculptures,” noted the organization. The MCA had good cause to be concerned. Only recently had the New York State Board of Regents banned the showing of the film “The Birth of the Baby,” deeming it “indecent, immoral, and tending to corrupt public morals,” a decision that was upheld by the courts. But not so with the 1939–1940 New York City World’s Fair exhibit that featured the Birth Series sculptures. As the MCA further remarked,

Mothers and fathers brought their children and explained to them the process of childbirth. They were extremely grateful to have finally found something that helped them to answer adequately their children’s questions about babies. School teachers brought their pupils. Instructors in schools of nursing brought student nurses. Graduate students in public health administration courses at Columbia, Yale, and New York Universities came in groups to view the exhibit. Doctors sent their patients. Ministers sent their parishioners, young and old. Many of the men and women who saw the exhibit insisted that other members of their families come to see it.⁴⁸

Similar enthusiasm was expressed when the sculptures were exhibited elsewhere. For example, in 1941 Ruth Perkins Kuehn (Dean of the University of Pittsburgh School of Nursing) noted how husbands and wives (expectant and otherwise), high-schoolers, college students, student nurses, practical nurses, doctors, teachers, clubwomen, and ministers had viewed the sculptures when on display in the university’s “Dawn of Life” exhibit. She then described the many positive comments they had received. “Many women who have had babies were very much interested,” she wrote. To which she added, “They could not understand how they could have had children without knowing how the process took place.” Indeed, their many questions were decidedly practical. Among the questions that were “frequently” asked were, “What is the bag of water? Why is the baby’s head out of shape when it is born? Why do the feet come first sometimes? Does the doctor shape the baby’s head after birth? How do twins grow in the mother’s body? How long is the cord? Why can some women not have babies? Does the baby change its position during the nine months before birth?”⁴⁹

There were, of course, the occasional few who disapproved. As Kuehn described, one woman “thought it was terrible to embarrass young girls who might wander into the exhibit with their boyfriends,” only to find they were not embarrassed, thus prompting her to announce they “had no ‘shame.’” Kuehn also recounted how another female teacher worked hard to keep the several dozen teenage girls she had brought to the museum from seeing the models and repeatedly “reprimanded” the girls when they disobeyed her commands. But, much as was the case with the World’s Fair installation, most liked what they saw—and were deeply grateful for what they learned.⁴⁹

Thus what became the purpose of the Birth Series sculptures once the 1939–1940 World’s Fair was over: to mass reproduce them in a variety of forms to educate the lay public and medical professionals across the United States and the globe about the mechanics of human reproduction. Demand was great, and orders immediately
poured in. First, the sculptures themselves were much desired. During the winter months of the fair’s offseason, the set displayed at the fair was exhibited at New York City’s Museum of Natural History. Another set made its way to the offices of the MCA. More sets went to medical and public health institutions across the country—in Flint (MI), Madison (WI), Cleveland (OH), and Chicago (IL). By the 1950s still another set made its way to the University of Nebraska State Museum. But even commercial interests saw use for the Birth Series sculptures. For example, in 1955 a diaper company called Dy-Dee Wash made arrangements with the MCA to borrow its set to herald the opening of a new auditorium and expansion of one of its stores.

Several years earlier, Schear’s Department store had made a similar request. So great was the demand for copies of the Birth Series sculptures (along with what was becoming the massive Dickinson-Belskie Sculptured Teaching Models collection) that the MCA handed the entire collection over to the Cleveland Health Museum to whom Dickinson had in 1945 granted all rights to reproduce and sell the sculptures, which it did for decades.

However, not everybody could afford the sculptural replicas of the Birth Series models, nor were they easy to move around. The solution was to reproduce them in a variety of cheaper and more transportable forms. Most significant was the Birth Atlas, a 22 × 17½–inch manual put out by the MCA that depicted the entire Birth Series using photography and line plate drawings. At $3.50 per manual, by spring 1942 between two and three thousand copies had been sold. Vastly more popular than the sculptures themselves, the Birth Atlas ultimately went through six editions (with many reprints of each) from 1940 through the 1960s, at which point the MCA put out an updated follow-up entitled, A Baby Is Born: The Picture Story of a Baby from Conception Through Birth (1966), the central feature of which remained the photos of the Birth Series sculptures. Over time, a more manageable half-sized version of the Birth Atlas was also put out. Meanwhile, Birth Series photos made their way into other materials. The Cleveland Health Museum, for example, included them in filmstrips as well as lantern and Kodachrome slides for use in sex education classes. In addition, authors of articles and books on childbirth and baby care (both for medical and popular presses) requested the use of these images, which the MCA usually granted. The same held true for those making movies and television shows on the subject. Furthermore, random Birth Series photos occasionally appeared in the popular press, as was the case with an article in a 1940 issue of Look magazine, which featured a picture of a woman examining one of the sculptures on display at the New York Museum of Natural History.

In other words, whatever their form, the Birth Series sculptures were used all over the place—in medical schools, nurse-midwifery programs, nursing schools, museums, university classrooms, high schools and elementary schools (public and parochial), marriage education classes, classes for expectant mothers and fathers, and classes for parents and children to learn about the process of reproduction together. They even made their way into an Amish community in Ohio. Government agencies (including the US navy) were also interested in them, as were such organizations as the American Red Cross, who Brailled its copy of the Birth Atlas for use in the parenting classes the organization offered for the blind. And this was just in the
United States; requests for information about and orders for the Birth Series in all its forms rolled in from countries across the globe—China, England, Canada, Japan, Mexico, Bolivia, Israel, New Zealand, South Africa, Switzerland, and India, to name just a few. Because of the overwhelming interest from Central and South America, by the mid 1940s the MCA was working on a Spanish-language version of the Birth Atlas. Even the global philanthropic organization UNICEF bought “increasingly larger quantities” over the years. As late as the 1980s, orders for the Birth Atlas still came in to the MCA.

All of which is to say: the convergence of one man, one organization, and two world’s fairs had set into motion a massive phenomenon that reached into big cities and small towns across America; it also reached into the four corners of the globe, thus laying the foundation for grand new ways to see—grand new ways to imagine—the process of human reproduction. For this reason, the next section offers a moment to pause and view the sculptures ourselves, in order to understand what audiences saw back then and what perhaps we see today.

The Birth Series as Visual Meditation

Figure 2: Birth Atlas (1940), plate 4.
Figures 3 and 4: *Birth Atlas* (1940), plates 5 and 7.
Figures 5 and 6: Birth Atlas (1940), plates 8 and 10.
Figures 7 and 8: *Birth Atlas* (1940), plates 11 and 12.
Abram Belskie and the Physical and Creative Process

This section begins with two letters. The first was written on January 12, 1939, by the sculptor Malvina Hoffman to her friend Dr. Robert L. Dickinson; the second is Dickinson’s reply, written six days later.

“Dear Dr. Dickinson,” Hoffman wrote,

Mr. Gregory and I both think that Mr. Abram Belskie might be able to do the work for you. He is a young married man, has two children. His address is Closter, New Jersey, Telephone: Closter 909. I think it might be a good idea if you would get in touch directly with him, size him up and see what you think. I am sorry that I have been overtaxed with work this week that I have not been able to get in touch with you sooner, but I am sure you understand. Sincerely yours,
Malvina Hoffman

“Dear Miss Hoffman,” Dickinson wrote back,

I am installing what Abram Belskie said he needed and he begins tomorrow at the Academy. When the first model is well along, I shall hope you can come up to give us your criticism and aid, and help estimate on the cost of the other nine. I am grateful for your help. Yours truly, Robt. L. Dickinson

It was a serendipitous introduction. Although Hoffman (renowned already as a master sculptor of the human body and whom Dickinson had first approached to help him with his Birth Series sculptures) had no interest in taking the job, Abram
Belskie ultimately did.\textsuperscript{69} Thus the match was struck, a fire was lit, and within a matter of a week a remarkable collaboration—between the seventy-eight-year-old Dickinson and the thirty-two-year-old Belskie—was born. Belskie’s arrival, moreover, came just in the nick of time. The 1939 World’s Fair was set to begin on April 30 (a mere three-and-a-half months away), and Dickinson was not even half way along.

Admittedly, Belskie was initially put off by Dickinson’s research interests. As he recalled with a lingering Scottish brogue in an oral history interview conducted several years before his death in 1988, “When I looked beyond the door [of Dickinson’s New York Academy of Medicine office], my first impulse was to get the heck out of there. This was something that I never saw before. They were painting something to do with genitalia.”\textsuperscript{70} Indeed, Belskie’s path hardly prepared him for the subjects he would take on with Dickinson. And thus a bit of biography on the man is in order.

According to a brief but insightful account written by the retired medical illustrator Robert J. Demarest, Abram Belskie was born Abraham Belskie on March 24, 1907, to Russian Jews newly immigrated to London. While he was still an infant, Belskie’s family moved to Glasgow, Scotland, where he lived until his early twenties. From the start Belskie had a creative drive. As was the custom among Scottish artists at the time, he spent his childhood making chalk drawings on Glasgow’s slate sidewalks. As a young teenager, he apprenticed with a local artist. And by the time he was nineteen he had graduated from the Glasgow School of Art, whereupon he traveled briefly to continental Europe to study sculptures by the likes of Donatello and Michelangelo. Upon his return to Glasgow he set up his own art studio; he also briefly taught at the Glasgow School of Art. But he would not stay put long. Deciding to quit Scotland for good, in 1929 the twenty-two-year-old Belskie set sail for America and landed in New York City, where he eventually found carving work with several sculptors, among them John Gregory and Malvina Hoffman, the two individuals who would later put Belskie and Dickinson together. In 1930 Belskie’s childhood sweetheart arrived. The two married and moved to Closter, New Jersey, where they raised two children and lived out the remainder of their lives.\textsuperscript{71}

Up until his collaboration with Dickinson, however, Belskie had little interest in medical art, much less the kind that depicted sex organs and genitalia. Before Dickinson came along, he worked with a handful of other sculptors creating a variety of models. Some depicted scenes from mythology, others from Shakespeare plays. And his first publicly shown work was “The Christ Child” (1933).\textsuperscript{72} Little wonder, then, his initial shock upon viewing Dickinson’s research interests. But none of this mattered. He and Dickinson hit it off immediately, despite Belskie’s initial concern and Dickinson’s reputation for being a notorious perfectionist. Indeed, it is a marvel what they managed to accomplish together, and so quickly: first the Birth Series sculptures and then over one hundred additional medical teaching models in the decade that followed. In short, a real camaraderie and a genuine creative trust existed between them. As Dickinson wrote in a letter to Belskie dated 1945, “In the long lifetime of teamwork and with some remarkable chiefs, colleagues, and assistants, I am wondering whether any of these numerous collaborations has been happier, more productive than our years together.”\textsuperscript{73}
But nobody knew this in January of 1939, and there was still the matter of getting the Birth Series done in time for the April 30 opening of the New York City World’s Fair. Dickinson had of course already been working on them. The first five sculptures were made largely by him though with the assistance of another physician/medical modeler, Dr. Vladimir Fortunato, whose name appears on the fourth of these early models. Done in the style of bas relief, they begin with a visual representation of a woman’s reproductive anatomy and then move on to illustrate the process of fertilization and early embryonic/fetal development through the first four-and-a-half months. It was at this point, though, that Dickinson sought additional help. This may in part have been because Fortunato could no longer assist due to failing health and/or death (Dickinson described him as “the late” Fortunato when crediting him in the Birth Atlas). But it is perhaps more likely that Dickinson’s grand vision was beginning to outmatch his own artistic skills and physical endurance. Not only did he lack formal training in sculpture but carving work is demanding physical labor and Dickinson was pushing 80. Thus, the sixth sculpture marks the arrival of Belskie’s talented, young hand. Fully three-dimensional, it illustrates the fetus floating serenely inside an invisible womb receiving nourishment by way of an umbilical cord connected to the mother’s placenta. With Malvina Hoffman acting as consultant, the next few months then saw Dickinson and Belskie—along with two other medical artists who assisted with sketching (Emily Freret and Frances Elwyn)—working feverishly to have the full series ready for the opening of the World’s Fair. They almost made it. By May 19, eighteen had been delivered and were now on display, three more were ready, and four “nearly finished,” as Dickinson reported with characteristic exactitude to the MCA’s Hazel Corbin. All of which is to say, with the arrival of Abram Belskie, the Birth Series had finally quickened.

While Belskie may not have been prepared for the work he would do with Dickinson, Dickinson (whether he realized it or not) had been working towards it for years, as is revealed in the extensive sourcebooks he meticulously kept for decades for his scientific research. Lovingly rebound and now housed in the Rare Book Room of the New York Academy of Medicine (the same building where Dickinson and Belskie worked for over ten years), they vividly demonstrate how in addition to his interests in contraception and human sex anatomy, he was also consumed with the study of embryonic development. A master scrapbooker, Dickinson supplemented the clinical data derived from his private practice patients by clipping articles from medical journals and taking notes on the images and information he found. He also drew extensively—contraceptive devices, women’s and men’s sexual and reproductive anatomies, as well as countless versions of in utero development. And tracing, in particular tracing over x-rays, was an important tool in his scientific/artistic process, for it facilitated clear line drawings, useful for illustrations and sculptural models, of our messy hidden anatomies.

Dickinson also made direct use of x-ray technology to capture another essential feature of the Birth Series sculptures to which five of the models were devoted, the active stages of delivery. As Dickinson well understood, previous knowledge about in utero development had been derived from the dead—pregnant cadavers as well as the embryonic and fetal remains of miscarriages, abortions, and hysterectomies.
He thus looked to replace this inadequate body of evidence with what he called “the alert upstanding tensions of the living.” To that end, and prompted by the brilliant suggestion made by the MCA’s Hazel Corbin to include a birth sequence in the series, he enlisted the help of his colleagues at local hospitals (Johns Hopkins, Sloane, Bronx, Harlem, and New Haven), who then allowed him to conduct thousands of x-rays on pregnant women—likely during their pregnancies but especially as they delivered their babies. Certainly, it is difficult for us to imagine today. But at the time x-rays on pregnant women were routine, and it was not until 1956 that Dr. Alice Stewart sounded the alarm about the ill effect they could have on in utero development. Worth wondering as well is whether the women themselves were asked for permission. The records do not appear to say. Suffice to say, learning more about these women is another important thread that deserves further investigation.

Such questions aside, however, it was a moment of creative, artistic inspiration—one born of many minds and carried out by many bodies. With x-rays in hand, tracings were made and sketches drawn—whereupon the Birth Series sculptures were beautifully carved and lovingly delivered. Little wonder that “the babies,” as the sculptures were often called, looked so alive.

“Glory to God”

It was late December 1942. The New York City World’s Fair was over, and its crowds long gone. As had become his habit, Dickinson sat down to write a letter to his sculptor friend, Malvina Hoffman. “There is one aspect of the teaching models which is of major interest,” he wrote about the Birth Series sculptures, whose mass dissemination was forging full-steam ahead.

They were devised with the idea of teaching medical classes and were developed with the greatest accuracy and with many new elements drawn from original research on this basis. Then, to my surprise the instructors in colleges and schools acclaimed them for their ability to make clear to students what they had been unable to get across with pictures. And it was of no little interest that the teachers in Roman Catholic schools showed the earliest, and in some instances, the liveliest interest in these methods. It is my chief and most cherished comment, the one made by a Sister whom I found later was the head of a large institution, to this effect. I asked “Sister, why is it that you feel your girls will want these?” and she answered, “The children always ask, ‘how is a baby born,’ and this is the most reverent way of answering that question that I have seen.” I have searched my notes to find the name of the Sister and the school, but cannot lay hands on it. Nor does Miss Corbin remember. I will look over the orders and inquiries.

This document set into motion several important epiphanies for me. In part the letter revealed much about Dickinson. In making the sculptures, he had set out to use the tools of science to explain with greatest accuracy the physical mechanics behind the process of human reproduction. Much to his delight, however, the art with which it was combined seemed to capture something far more spiritually profound about the creation of human life—so much so that he would remark upon this achievement of reverence with great pride for the remainder of his life. In turn,
this reverence helped explain why the Birth Series seemed so modern-day pro-life to me. Indeed, it was not just the sculptures’ pregnancy-begins-at-fertilization message nor the similarity they bore to the plastic fetal models I remember encountering in the 1980s in pro-life exhibits at my parents’ Catholic church, models that remain fixtures in pro-life educational exhibits today. Rather, it was the sculptures’ ability to elicit, like a magical fountain, the other lessons I remembered learning as a child about the divine origins in the creation of human life, lessons that required experiencing no small amount of reverence for the story they told. The analytic effect the letter thus had on me was dramatic. For it was only when I remembered, and took seriously, the religiosity embedded in modern pro-life views in opposition to abortion that I was prompted to seek out, and take seriously, the religiosity of Dickinson’s views in support of it.

Certainly, plenty of features associated with the 1939 Birth Series bear striking resemblance to pro-life literature that would become commonplace by the 1980s. Some come from the educational material that accompanied the sculptures. Entitled “How Does Your Baby Grow?” and likely written by somebody in the MCA, though heavily illustrated with images of the sculptures, this pamphlet was first distributed at the 1940 fair and then mass disseminated by Gerber Products Company once the fair was over.86 “A baby’s life begins,” the leaflet happily announces while gently reminding its readers who might still think otherwise, “not when he puts in his squalling appearance but at the moment the sperm (from the father) meets the egg (from the mother) in the Fallopian tube,” whereupon the readers are then directed to the sculpture depicting fertilization. In addition, after a quick mention of “the fertilized egg,” the word “baby” is the only word ever used to describe what was developing inside the woman’s womb, regardless of its phase of development. Finally, the act of having children is presented as the main source of marital joy, an experience those who fail to surround themselves with children sadly lack. Indeed, to have children, the pamphlet reminded its readers, was central to human fulfillment and the joyous perpetuation of the cycle of human life.87

The sculptures too are replete with what is now commonly used pro-life visual imagery.88 Of course, Dickinson was not interested in simplifying the scientific story, and the text he wrote to accompany the sculptures used the scientific terms to describe early in utero development: morula, gastrula, embryo, and fetus.89 Nevertheless, the central visual narrative of the Birth Series is of the embryonic/fetal development inside the woman’s womb. As was often the case in medical texts, the woman appears primarily as a cross-section of her reproductive parts, a representational strategy that erases her prominent role in the pregnancy and delivery process. On the rare occasions a full woman does appear, it is either to illustrate a minor point or simply to serve as a design flourish.90 Then there is the humanization of the fetal form. The sculpture depicting various kinds of twinning, for example, reflects a light-hearted whimsy, with each of the three sets depicting the adage of “see no evil, speak no evil, hear no evil,” by using their little fetal hands to cover their little fetal eyes, mouths, and ears. Audiences loved it.91

The potent anti-abortion tract the MCA distributed at the World’s Fair bears even further resemblance to pro-life literature that had become common by the 1980s. At first the organization likely handed it out as a separate pamphlet at the 1939 fair,
but with the 1940 exhibit it was added to the “How Does Your Baby Grow?” booklet, widely disseminated by Gerber Products thereafter. The tract declared:

Abortions Are Dangerous! . . . Little do [people] know what abortions do to people. Frequently women become seriously ill from infection. Many of them seem to feel no ill effects, but may find that when they do want babies later in life they are sterile, they do not conceive; or they may have one “miscarriage” after another. So they live with unhappy memories of what might have been. If you are thinking about an abortion—stop! Go to your family doctor. Talk it over with him. Remember, some women get pregnant only once in life. Don’t make a move you’ll regret.

It closed with an invitation to visit the Maternity Center Association at 654 Madison Avenue, New York, where expecting parents could find expert counsel, classes on parenting, a library with helpful books to read, and supplies for their newborn baby. But still, in the face of all this evidence, something that explained the now dominant pro-life message embedded in the Birth Series sculptures remained missing for me, something that captured some intangible lesson instilled in me as a Catholic child even though I had become a pro-choice adult. That is, until I read Dickinson’s letter to Hoffman in which he recounted the story about the nun. Suddenly, everything made sense. Reverence. Reverence and awe for the story the Birth Series told—about the beauty and wonder in the divine creation of human life, the ultimate symbol of God’s love and his greatest gift of all. The catechisms of my childhood, it seems, came flooding back. And the sculptures are beautiful. Their pale whiteness (sometimes pale pink or creamy beige in subsequent reproductions) masks the messy blood and placental gore. After all, Dickinson had no interest in what one fair-goer called the “butcher shop color” found in other exhibits depicting the human body. Instead, he believed in the power of “high art” to reach, and move, mass audiences. The baby too is perfect—not only is it never deformed, it is never wrinkled and lumpy, never mashed into weird shapes nor contorted into odd positions—not even when born breech as a later set of models would reveal. Simply perfect and beautiful; simply divine. Thus Dickinson’s delight with the reaction of the nun who saw in it so much reverence. Notably, it was a reaction sometimes expressed in nonreligious spaces, as was the case with the commercial Dy-Dee Wash display for which the company had borrowed the MCA’s Birth Series set in 1955.

And this, to say the least, was a visual story about the process of in utero human development far different than what was available at the time of the 1939–1940 World’s Fair. Certainly, the story of life beginning at fertilization was not new. It had been legally pronounced with the banning of abortion in the late 1800s at all stages of development, rather than after the moment of quickening where the legal line long stood. It was also around the late 1800s that the Catholic Church took this position as well, having long condemned abortion but now also situating the start of life at conception. Before, the Catholic Church’s understanding about when life began (and thus what constituted an abortion) was looser. And Dr. Horatio Storer, one of the leading figures in the campaign to outlaw abortion at all stages of pregnancy, is now regarded in some pro-life circles as the unsung father of the pro-life movement.
imagery to tell this story. Take, for example, Friedrich Ziegler’s three-dimensional, wax embryos, which were displayed at another World’s Fair in Chicago in 1893. While beautiful and arranged in ways that captured the Victorian aesthetic of categories, balance, and order, they are not particularly humanized. That the set also included cross-section models to reveal the embryo’s inner workings further made them into objects to be studied rather than a baby to be tenderly loved.\(^{102}\)

The same holds true for the increasingly common practice in the early decades of the twentieth century of displaying real embryos and fetuses—which showed the progression of in utero development from roughly six weeks through nine months, using either complete specimens or slices. In fact, a set of these was also on display at the 1939 New York World’s Fair, albeit in a different installation than the Birth Series but in the same building.\(^{103}\) And audiences loved these kinds of exhibits as well. Indeed, while more than a few may have found the exhibits of real specimens ugly and grotesque, they did not necessarily shrink from them in horror nor demand that each specimen be given a proper burial, as has been sometimes the case in the wake of Roe v. Wade in 1973 and the emergence of a newly politicized, pro-life sensibility. Rather, they often viewed them with curiosity and interest, despite or perhaps because of their grotesqueness.\(^{104}\) But, again, whether wax or real, such displays were based on things that were either inert or dead. They also hardly conveyed something more spiritually profound, that God created man in the image of himself.

There was, however, at least one version that tried to capture this spirit, Armennouhie T. Lamson’s 1916 book entitled, My Birth: The Autobiography of an Unborn Infant. Using text and illustrations, Lamson offered a rather religious and scientifically informed version of the creation of human life from fertilization through birth. That the embryo/fetus growing inside the woman’s womb is anthropomorphized in this version goes without saying; he is the narrator of the tale. But that is the problem because the narrator’s voice is difficult to get past. Unmistakably intellectual and informed in the ways of science and religion, it challenges a reality surely most everybody understood: babies (in the womb or out) do not talk and they certainly do not talk like that.\(^{105}\)

Thus, the powerful silence of the Birth Series, which shows the serenely sleeping, in utero child who just as serenely awakens to life. As the catechisms of my childhood reminded me, here was the evidence of God’s power and love—things so sacred and divine they defied human speech and could only be revealed through the sculptures themselves. Words do appear on and around the sculptures, but that was just the science to explain the physical process. The spiritual story, however, was conveyed through the rest of the sculptural imagery. And so, not too unlike the masters of old, Dickinson, Belskie, and their fellow creative collaborators managed to combine the accuracy of science with the beauty of art to reveal what they understood to be the hidden mysteries of life. And this sense of glorious mystery, perhaps, is what lay behind the nun’s deep admiration.

Such a religious aesthetic, indeed such a religious motivation, from the likes of Dickinson—a sexologist deeply involved in the birth control movement and eventual leader in the Planned Parenthood organization—should come as no surprise however. Just as art was a driving force in his life, so too was religion.\(^{106}\) A devout Episcopalian, Dickinson was deeply active in his church and thoroughly engaged in
the study and practice of his faith. For example, in addition to feverishly penning spontaneous (and often original) psalms, graces, and prayers, Dickinson worked for years on a biography entitled, *Jesus Himself: His Story without Physical Miracles, A Harmony Drawn from the Synoptic Gospels.* In addition, yet another of his many sourcebooks reveals his fascination with the stunning Neo-Gothic architectural features of his beloved home church in Brooklyn, New York, The Church of the Holy Trinity—so much so that one cannot help but notice the direct influence they had on the artistic flourishes found throughout the sculptural work he did with Belskie. Further indicative of his devoutness, as he grew older, Dickinson was increasingly inclined to proclaim “Glory to God” when struck by a moment of wonder, which was often. It was something Belskie (a Jew) did as well. “So that which has been lost is now found!” Belskie spontaneously announced in a 1940 letter when describing the reappearance of several missing Birth Series sculptures. “Praise be,” he exuberantly added. Indeed, a shared faith in the divine may have been one of the things that drew them so closely together.

Yet, it was never Dickinson’s intention to craft a message that would later articulate so well the case against abortion. On the contrary, he believed deeply in the necessity of its practice—a position that also put him thoroughly at odds with the birth control movement, which at the time stood firmly against abortion. In this sense, the first (1931) and second (1938) editions of Dickinson’s *Control of Conception* manual are revealing. In addition to explaining various contraceptive techniques and how to lay out birth control clinics, both editions go on to describe when and how best to perform abortion. Notably, such instructions were hardly buried. Set apart as separate chapters unto themselves, both books’ discussion of abortion also featured *pages of illustrations* to show doctors *visually* the various ways to do them. Certainly, he saw contraception as the first step in preventing an undesired pregnancy, but Dickinson also could not help but take aim at his medical peers for their failure to do what he regarded was their medical duty in providing abortion when contraception failed. “Ours is the responsibility for her health and nervous stability and the wellbeing of her children,” Dickinson chided fellow doctors, reminding them it was as much their medical duty to protect women as it was to protect their children. To which he added, “it is cowardice and neglect to fail to see the case through to an end.”

Thus, although Dickinson was happy to sculpt an idealized version of in utero development, he well understood its complexities in practice—in the womb and in the larger context of adult human lives. The Birth Series sculptures tell a stunningly beautiful story about the process that *could* unfold with the union of sperm and egg, yet this process hardly transpires every time. Human bodies are human bodies and more than a few embryos are apt to slip away, not because of outside intervention but because, for whatever reason, they slip away. And human beings are human beings, and they sometimes feel the need actively to help an embryo slip away. Dickinson surely knew this from his decades of obstetrical practice, but neither of these scenarios made their way into the Birth Series sculptural story. We are thus left with the story of creative perfection that happens with each and every union of sperm and egg. That is, unless something interferes with it—be it the hand of God or the hand of man. But these imperfect tales were never set into stone.
Furthermore, Dickinson had little use for those who failed to understand human frailty, a frailty that was born of the complexity of life and that made perfection so difficult to achieve. Here he took aim at religious leaders. Of course, Dickinson’s Anglican bishops would, in their 1930 Lambeth Conference to discuss the birth control question, ultimately embrace mechanical means of contraception—part of a massive shift among many Protestant denominations who were about to do the same—much to the dismay of the Catholic Church, who clung fast to the old view.\textsuperscript{114} However, in the days leading up to the conference, some Anglican leaders still voiced the idea that all mechanical methods of fertility control went against God’s natural law. Dickinson could not contain his frustration. In part, he took issue with what was deemed “natural,” pointing out how all the bishops had slept in beds, put on clothes, used utensils to eat cooked food, donned spectacles, and drove over a bridge in cars to have this discussion about what was natural and unnatural in a warm building equipped with a roof, windows, and doors—thereby safely removed from nature’s many difficult or at least uncomfortable elements.\textsuperscript{115}

Worse still to Dickinson was how the artificiality of their lives affected the ways in which they practiced their vocation. As he went on,

\begin{quote}
Though an Episcopalian and lover of nature, my forty years as father confessor to human beings who love in fine honor force me to differ from Lambeth. Abstinence is found to be no answer, and the bishops’ safe period no solution. Perhaps the patients of bishops all have opposite wings of palaces to retire to at night. Mine sleep in the same bed.\textsuperscript{116}
\end{quote}

Such religious leaders, he thus believed, failed in their duties as religious leaders. Content to live their lives as theologians locked away in their intellectual towers, they failed in their first duty, which was to serve as pastors and minister directly to the needs of the people—with all their human frailties. Only then, Dickinson believed, could they truly understand the realities with which human beings had daily to contend—realities that made perfection so difficult to achieve, which was why a bit of help was sometimes necessary, indeed the only merciful thing to do.

It pained Dickinson deeply, therefore, to see the ways in which abortion was characterized as the evil above all evils. After all, he too was a devout and religious man, and he saw quite the opposite—likely a product of his decades in gynecological practice where he listened to thousands of women’s personal stories. As a devout man, he was determined to use religious arguments to make the case for abortion. In a personal document entitled “Blessed Be Abortion,” Dickinson argued,

\begin{quote}
Abortion is a blessing whenever relief from intolerable burden of added maternal care, or freedom from life-long shame, or stigma of bastardy, is the stake, the issue, the core of the unescapable. Judged by the kind of court before which the action is summoned one would suppose there was this one single bit of human behavior that had no variations, no shadings, no class but one. That one crime. That one allocated by the Almighty as the deadly sin. The world’s chief horror.\textsuperscript{117}
\end{quote}
Dickinson went public with such views in the second edition of *Control of Conception* (1938), which came out on the eve of the Birth Series debut. Here he made the religious case for abortion by quoting extensively from none other than Leo Latz, the Catholic doctor who authored the only Catholic-sanctioned book about fertility control, *The Rhythm of Sterility and Fertility in Women*. Of course, Latz did not support abortion; nor did he approve of mechanical means of conception control. His goal was to tout the scientific and religious merits of the only method sanctioned by the Catholic Church, the rhythm method. But Latz’s language justifying all the good that could come of the practice of rhythm struck Dickinson as precisely the language he needed to justify all the good that could come of the provision of abortion. As Latz wrote and Dickinson quoted:

> Burdens that test human endurance to the utmost limit, and to which all too many succumb, will be lightened. I speak of economic burdens, the burdens of poverty, of inadequate income, of unemployment, which make it impossible for parents to give their children and themselves the food, the clothing, the housing, the education and the recreation they are entitled to as children of God. I speak of physiological burdens, the burdens of depleted physical energies and exhausted vitality resulting from a previous birth or miscarriage, the burden of chronically or temporarily adverse conditions of the heart, the kidneys, or other organs, or of conditions that threaten the life of the mother in case of pregnancy. I refer to psychic burdens, not infrequently more difficult to bear than any I have so far mentioned, burdens of uncontrollable fear, anxiety, irritability, of rebellion against God and His Church for seeming to make demands beyond human nature, beyond human powers to endure.118

Never mind that in Latz’s book, the very next sentence read: “The greatest gain that will accrue to the human race from a judicious dissemination of this knowledge is the prevention of countless crimes against nature, especially abortions and contraception.”119 Dickinson was content to stop short. The case he wanted to make about the moral need for abortion had been made, and he simply could not understand how the logic for fertility control of one kind could not be applied to fertility control of another.

But the tide could not be shifted nor the die recast, not even by Dr. Robert L. Dickinson. To begin, he would be unable to deter what by the 1940s and ’50s would become a massive period of legal and medical crackdown on the abortion procedure. Despite his frustration with his medical peers for failing to take on the abortion cause, the 1930s had witnessed a loosening of attitudes about the procedure, despite its illegality.120 The frankness of his comments, not to mention his illustrated instructions, are thus a reflection of the period’s more tolerant attitude. But this would quickly come to an end. In this era of renewed crackdown, no longer would his birth control manuals discuss the procedure. Newly titled in 1941 as *Techniques of Conception Control* and now published under the auspices of the Birth Control Federation of America, virtually all mention of abortion had been removed. No more were there chapters of advice and pages of illustrations about how to perform abortion; nor were there impassioned pleas about the necessity of its practice. All talk of abortion had been reduced to a handful of brief mentions, mostly to make the case that without the provision of birth control the need for abortion would increase.121
Nor could Dickinson counter the image increasingly made by opponents that organizations engaged in the provision of birth control promoted, not a culture of life, but rather a culture of disease and death. As the Catholic magazine *America* described the situation in 1929 when urging its readers to make their opposition to birth control bills known to their local legislators,

> Let him know, therefore, that as a voter, you are against any legislation which helps to spread this black plague of immorality, more deadly to the State, to the family, and to the individual, than a combination of tuberculosis, cancer, and the social diseases.122

It was an argument that Dickinson certainly tried to resist. While much has been made about the moment in 1942 when the Birth Control Federation of America changed its name to the Planned Parenthood Federation of America, nothing has been said about the new logo Dickinson sketched to visualize what he believed was the spirit and intent of the organization.123 (See Figure 10.) Perhaps taking inspiration from the backside of the medal of Saint Benedict— which features elements that bear striking similarity to what he drew— Dickinson added the word “creation” to the cross’s horizontal bar.124 For a man like Dickinson, who was inclined to marvel at the glory of God on a regular basis, how could the act of family planning and the organization that taught married couples how to do it be anything but celebrations of the divine creation of human life?125

Given that PPFA’s subsequent material does not bear the image Dickinson proposed, we can assume the organization rejected it, even though he had been asked to work something up.126 Instead, PPFA put forward its new conservative image by way of a modern—and decidedly more secular—version of marriage and family, as can be seen in its 1949 fundraising masthead. At its center is a nuclear family of two parents and three children who are then surrounded by a wedding-band-like ring bearing the words “affection, health, security, opportunity.” And below that the words: “Saves Lives—Saves Homes.”127

It was the dawning of a new era. Indeed, within a year, Dickinson would pass away on November 29, 1950, at the age of 89. Belskie would carry on, plying his trade as a sculptor until his death on November 7, 1988, at the age of 81. But with Dickinson’s death, this prolific and unique era of collaboration came to an end. Certainly, many of the sculptures Belskie would go on to carve (alone and with others) are lovely and interesting to look at. But, for better or for worse, they lack the distinctive Dickinson touch.128

In closing, for all the beauty to be found in the Birth Series, it would be wrong not to acknowledge the more troubling aspects, particularly concerning race and eugenics, embedded in these and the other sculptures Dickinson and Belskie made together. Indeed, it is the particular kind of beauty embodied by the sculptures that poses the problems. Compelling critiques have already been made by historians Anna G. Creadick and Julian B. Carter about the 1945 Dickinson-Belskie Norma and Normman sculptures. As their none-too-subtle names suggest, Norma and Normman were intended to represent the average American male and average American female. However, as Creadick and Carter demonstrated, the normality they suggest
is deeply problematic. Not only do the sculptures present whiteness and white sexuality as normal or even divine, but such representations were also hardly born of naïveté nor innocence. Rather, as Creadick noted, “The Aryan look and eugenist overtones of Norm and Norma were not aberrations, but signs of a midcentury obsession. Their boldly European features, their alabaster whiteness, their youthful, able bodies reveal what ‘normality’ had been designed to include and exclude.”

Similarly, it would not be difficult to make a case for the eugenics embedded in the Birth Series sculptures. Moreover, if we were to combine such overtones with the MCA’s habit of dismissing the knowledge of Black “mammy midwives”—whose “only training comes from ‘de Lawd,’” as one MCA president pronounced in a 1941 issue of Baby Magazine—then a rather complex story about the intersection of race and the Birth Series would quickly bubble to the surface.

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**Figure 10:** Planned Parenthood Federation of America logo designed by Robert Latou Dickinson, undated, folder 5, box 59, Planned Parenthood Federation of America Records, PPFA I, Sophia Smith Collection, Smith College, Northampton, Massachusetts. Reprinted with permission of the Sophia Smith Collection on behalf of PPFA.
It would also be remiss of me not to mention the hubris embedded in the “Dickinson touch,” particularly where Dickinson’s faith in his religion intersected with his faith in his profession. One need only look at the hands into which the Birth Series baby is delivered, not the hands of God but the hands of the physician. Never mind, moreover, the absence of the hands of the newborn’s parents. Compassionate as he was with his patients, Dickinson firmly believed that doctors knew best. In other words, Dickinson is now—and was when still alive—a tough nut to crack. As Lura Beam (with whom he collaborated on several sex studies in the 1930s) recounted several decades after his death: despite her personal fondness for him, “he was like the Niagara—take him or leave him.”

For the moment, I will side with Lura Beam and “take him” as well because I believe that what he and Belskie (and all the other contributors) created is precious and valuable—even if it reveals things that are not always very pretty. My reasons for saying this are many, but for the moment I will leave you with just two. First, what you have just read merely scratches the many surfaces of the Birth Series sculptures or the many other sculptures Dickinson and Belskie produced in the decade that followed. Indeed, within them lie many more stories to tell, many more mysteries of interpretation to unravel. And I look forward to reading (and perhaps even writing) what will spring from their solid forms. It shall be a grand new adventure. The second reason, however, concerns adventures happening already. What astonishes me most about the Birth Series story is the space it affords for dialogue—a space born of shared curiosity and interest between the most unlikely of people, those avidly pro-choice and those avidly pro-life. For those of us long caught in the crossfire—as I have been for roughly fifteen years in a class I teach on the history of sexuality in which abortion is a dominant theme—it is a moment to breathe a heavy sigh of relief. It is as if the riddle from which the Birth Series was born denies us our ability to believe we each have the only right opinion about the vexing issue of abortion. We are thus free to dive—for one brief but beautiful moment—into the morass together.

Endnotes

Many grateful thanks to all those who helped me navigate some amazing museum and archival collections: Amy Hague (Sophia Smith Collection, Smith College, Northampton, MA); Wendy Wasman (The Cleveland Museum of Natural History, Cleveland, OH); George Corner, Patricia Freeman, Thomas Labedz, and Priscilla Grew (University of Nebraska State Museum, Lincoln, NE); Stephen Novak and Cameron Mitchell (Archives & Special Collections, Health Sciences Library, Columbia University, New York City, NY); Don and Mary Ann Farrell (Belskie Museum of Art and Science, Closter, NJ); Jack Eckert and Scott Podolsky (Boston Medical Library, Francis A. Countway Library of Medicine, Boston, MA); Dominic Hall (Warren Anatomical Museum, Francis A. Countway Library of Medicine, Boston, MA); and Arlene Shaner (New York Academy of Medicine Library, New York City, NY). For their financial support, I am indebted to UNL’s College of Arts & Sciences for awarding me an Enhance Grant and to the Francis A. Countway Library of Medicine for selecting me as one of their 2015–16 fellows. I am also grateful to UNL’s Women’s & Gender Studies Program and, again, to the College of Arts & Sciences for letting me steal a semester away to carry my research out. Thanks
also to Edith Buhs, Peter Thomson, Wendy Thomson, Marc Woodman, Gail Bederman, Logan Burda, the participants of the “Symposium on Art, Anatomy, and Medicine Since 1700” in South Carolina (especially Andrew Graciano), and Susan Woodruff. For making this essay far better than the one they originally received, I am indebted to Matt Karush of the JSH and the two anonymous reviewers. I am also indebted to Lara Freidenfelds and Sarah Rodriguez who read earlier drafts. In fact, so generous has Sarah been that not only did she educate me about Dickinson’s Sex Atlas, but she even let me lift whole passages about his biography from a talk on Dickinson we gave together in 2014. See Holz and Rodriguez, “Spooning Between Ellis and Kinsey: Dr. Robert L. Dickinson—Gynecologist, Sexologist, Artist,” Society for the Scientific Study of Sexuality Conference, Omaha, NE, November 6, 2014. Lastly, thanks to everyone who has listened to me ramble on about this project in the last few years. That means you too, Eric Buhs. Address correspondence to Rose Holz, Women’s & Gender Studies Program, 327 Seaton Hall, University of Nebraska-Lincoln, Lincoln, NE 68588-0632. Email: rholz2@unl.edu.

Figure 1 credit: Uncaptioned, unattributed photograph of Dr. Robert L. Dickinson and Abram Belskie in “The Studio” at the New York Academy of Medicine, circa 1942, in folder 36, box 13, Robert Latou Dickinson Papers, 1881–1972 (inclusive), 1883-1950 (bulk), B MS c72, Boston Medical Library, Francis A. Countway Library of Medicine, Boston, Massachusetts. Figures 2 through 9 credit: The Birth Atlas photos reprinted with permission of Childbirth Connection (formerly the Maternity Center Association). Robert L. Dickinson, Abram Belskie, and the Maternity Center Association, Birth Atlas (New York, 1940). Figure 10 credit: Planned Parenthood Federation of America logo designed by Robert Latou Dickinson reprinted with permission of the Sophia Smith Collection on behalf of the Planned Parenthood Federation of America Records, PPFA Records I, Sophia Smith Collection, Smith College, Northampton, Massachusetts.

Modern Period: Menstruation in Twentieth-Century America (Baltimore, 2009); Anna G. Creadick, Perfectly Average: The Pursuit of Normality in Postwar America (Boston, 2010); Cathy Moran Hajo, Birth Control on Main Street (Urbana, 2010); Rose Holz, The Birth Control Clinic in a Marketplace World (Rochester, 2012); and Sarah B. Rodriguez, Female Circumcision and Clitoridectomy in the United States (Rochester, 2014).

2. Margaret Sanger to Robert L. Dickinson, January 24, 1939, folder 73, box 2, Robert Latou Dickinson Papers, 1881–1972 (inclusive), 1883–1950 (bulk), B MS c72, Boston Medical Library, Francis A. Countway Library of Medicine, Boston, Mass. (hereafter cited as Dickinson Papers—CLM). In the letter she thanks him specifically for helping out with the 1939 merger of her Birth Control Clinical Research Bureau with the American Birth Control League, which resulted in the creation of the Birth Control Federation of America. She also thanks him “for many other things” as they related to the birth control cause. Thus, it is clear that by this point there is a genuine trust, admiration, and affection between the two of them, despite their earlier battles. See other exchanges in same folder. For more on their early relationship, see Gordon, The Moral Property of Women, 181–83 and McCann, Birth Control Politics in the United States, chapter 3.


7. For brief mentions of the Birth Series, see Reed, From Private Vice, 186; Bullough, “The Development of Sexology;” Laura E. Ettinger, Nurse-Midwifery: The Birth of a New American Profession (Columbus, 2006), 96–97; and Creadick, Perfectly Average, 23. One notable exception, recently brought to my attention, is Ziv Eisenberg’s “The Whole Nine Months: Women, Men, and the Making of Modern Pregnancy in America” (PhD diss.: Yale University, 2013), 42, 105–29. Here, in his thoughtful analysis of the Maternity Center Association’s activities from 1918–1963, Eisenberg shares my view of the impact the Birth Series had in helping shape modern understandings of pregnancy. Our analyses diverge, however, in the connections I draw between the Birth Series and the shaping of modern pro-life imagery.

8. In recent years, there has been renewed interest in the intersections between medicine and art by way of such contemporary exhibits as Gunther von Hagen’s “Bodyworlds,” as well as discussion about the influence of artistic embellishment in such things as fetal photography. For “Bodyworlds,” see Jose´ van Dijck, “Bodyworlds: The Art of Plastinated Cadavers,” Configurations 9 (Winter 2001): 99–126. For a critique of art/enhanced visualization in fetal photography in such books as Alexander Tsiaras’ and Barry Werth’s From Conception to Birth: A Life Unfolds (New York, 2002), see Lynn Morgan, Icons of Life: A Cultural History of Human Embryos (Berkeley, 2009), 217–21. However, I would argue that the canon of anatomical art still privileges (particularly by name) pre-twentieth century medical artists; for example, da Vinci, Vesalius, Galileo, Hunter, Sömmerring, Smellie, and van Riemsdyck, to mention just a few. In contrast, discussion of twentieth-century anatomy tends to focus less on the individual and more on the technology (such as x-ray, CT, and MRI). The following texts are illustrative of this emphasis: Mimi Cazort, Monique Kornell, and K. B. Robert, The Ingenious Machine of Nature: Four Centuries of Art and Anatomy (Ottawa, 1996); Andrew Cunningham, The Anatomical Renaissance: The Resurrection of the
Anatomical Projects of the Ancients (New York, 1997); Deanna Petherbridge and Ludmilla Jordanova, The Quick and the Dead: Artists and Anatomy (Berkeley, 1997); and Benjamin A. Rifkin and Michael J. Ackerman, Human Anatomy: From the Renaissance to the Digital Age (New York, 2006). In part this may be a product of the late twentieth-century decline of anatomy in medical education. See Jacalyn Duffin, A History of Medicine: A Scandalously Short Introduction, 2nd ed. (Toronto, 2010), 37–39. It may also be because anatomical art has increasingly disappeared from art schools (as it did in post WWII England, for example) and because the intersection between medicine and art now takes on different forms and is presented in different ways and for different purposes. As Petherbridge and Jordanova (whose account mentioned above did in fact include several twentieth-century artists) noted in The Quick and the Dead (1997), “Artists no longer refer to ‘figure’ drawing but to the ‘body’, which is conceived as a cultural construct, inscribed with social, sexual, and gendered meanings. Photography and new media have tended to take over from drawing as the means of re-presenting the body, but in recent years artists have become fascinated with the anatomy theatre and anatomical museum as spectacle” (10). Of course, this distinction between spectacle and a higher more dispassionate representation of the body is sure to arouse more than a little debate about what counts as medical art appropriate for medical and/or lay education; indeed, there’s a long history of this. But I cannot help but think there is something to their observation.


24. For the impact of penicillin, see Reagan, When Abortion Was a Crime, 162.

25. Again, my research on the MCA echoes what Ziv Eisenberg found. For Eisenberg’s discussion of the organization’s position on birth control and abortion, see “The Whole Nine Months,” 94, 96, 105–6. Moreover, the desire of the MCA to remain above the abortion fray in recent years can be seen in the organization’s response to concern amongst abortion rights supporters about the nomination of Sonia Sotomayor (who once served on the organization’s board) to the Supreme Court. As was reported in the Washington Post: “Carol Sakala, director of programs for the organization (now called Childbirth Connection), said today that it ‘deals exclusively with women who want to carry their pregnancies to term’ but has never taken a position on abortion. She said abortion has never come up at a board meeting in the more than 10 years she has worked there and is not discussed in her daily work. ‘We have no reason to have a position on abortion. We aren’t involved in any manner with that issue,’ Sakala said. ‘There’s no paper trail on it, because it’s not relevant to our work.’” See Robert Barnes and Michael D. Shear, “Abortion Rights Backers Get Reassurances on Nominee,” Washington Post (May 29, 2009).

26. Robert L. Dickinson, “What Medical Authors Need to Know About Illustrating,” The Proceedings of the Charaka Club 8 (1935): 141–48. Quote on 148. Dickinson delivered the talk in 1933. For the long battle between Dickinson and the Academy regarding his use of space, see Malvina Hoffman to Dickinson, n.d., folder 80, box 1, Dickinson Papers—CLM. See also the following unprocessed Robert L. Dickinson documents at New York Academy of Medicine Library, New York City, NY: Herbert B. Wilcox to Dickinson, January 12, 1940; Herbert L. Wilcox to Dickinson, March 13, 1940; Dr. Wilcox to Dr. Archibald Malloch, n.d.; Archibald Malloch to Dickinson, May 17, 1941; Dickinson to Dr. Archibald Malloch, May 16, 1941. Many thanks to archivist Arlene Shaner for sending these and other documents on. Hereafter cited as Unprocessed Dickinson Papers—NYAML.

27. “Dr. R. L. Dickinson, Gynecologist, 89,” and Reed, From Private Vice, chapters 11–13. His bookplates in Bookplate Material, A Scrapbook of Clippings and Sketches, New York Academy of Medicine Library, New York City, NY. His architectural drawings can be found in folder 26, box 3, Dickinson Papers—CLM. For quick access to and overview of his involvement in many of the birth control organizations then in existence, including what ultimately became the Planned Parenthood Federation of America, see the “Birth Control Organizations” section on the Margaret Sanger Papers Project website at https://www.nyu.edu/projects/sanger/aboutms/bc_organizations.php


29. Quote from Reed, From Private Vice, 160. See also Bullough, “The Development of Sexology,” 310.

30. Robert L. Dickinson and Louise Stevens Bryant, Control of Conception: An Illustrated Medical Manual (Baltimore, 1931); Robert L. Dickinson, Control of Conception, 2nd ed. (Baltimore, 1938); Robert L. Dickinson and Woodbridge Edwards Morris, Techniques of Conception Control (Baltimore, 1940); Robert L. Dickinson and Woodbridge Edwards Morris,
Techniques of Conception Control, 2nd ed. (Baltimore, 1942); and Robert L. Dickinson, Techniques of Conception Control, 3rd ed. (Baltimore, 1950).


32. Dickinson, “What Medical Authors Need to Know.”


38. The group’s name was the Sub-Committee on Maternal Health of the Advisory Committee on Medicine and Public Health for the World’s Fair. Meeting minutes in folder 3, box 39, MCA Records–CU.

39. For discussions about whether to include birth control in the MCA exhibit, see the planning meeting minutes dated October 14, 1937 and November 11, 1937, folder 3. For evidence of the final decision not to include birth control, see Hazel Corbin to Bruno Gebhard, July 6, 1940, folder 5. For the decision not to include midwifery, see again planning meeting minutes dated November 11, 1937. All in box 39, MCA Records–CU.

40. Dr. Marta Fraenkel, Maternal Health Exhibit. Quote from page 1. This was a presentation made by Fraenkel at the October 14, 1937 planning meeting. In folder 3, box 39, MCA Records–CU.

41. Planning meeting minutes, November 11, 1937. Quotes on 1.

42. Excerpt of a conversation Dickinson had with one of his grandsons over Christmas (typed from hand-written notes most likely by Dickinson’s daughter, Dorothy Barbour), folder 13, box 10, Dickinson Papers–CLM.


45. “Life Begins” (1939), Maternity Center Association, folder 6, box 59, Planned Parenthood Federation of America Records I, Sophia Smith Collection (hereafter cited as PPFA Records I—SC). Quote on 19. Italics in original. For another mention of the exhibit’s popularity from opening to close, see Hazel Corbin to Sylvia Carewe, June 15, 1939, folder 5, box 39, MCA Records–CU. Note that mentions of fair opening and closing times vary slightly. I chose to go with the times found in the MCA’s official 1939 report. See “A Report of ’The First Year of Life’” (1939).
46. For 1939 attendance, see the photo caption on first page of “Life Begins.” See also a letter by Dickinson in which he said exhibit attendance was five thousand per day. In Robert L. Dickinson to Mrs. Albert D. Lasker, circa December 1941, folder 4, box 59, PPFA Records I—SC. For complaints from fair organizers, see Homer N. Calvert to Hazel Corbin, May 29, 1939, folder 5, box 39, MCA Records—CU. For complaints from fellow exhibitors, see Bryan Gray to the MCA, October 23, 1939 and Hazel Corbin to Bryan Gray, October 24, 1939, folder 6, box 39, MCA Records—CU. More examples of complaints can be found throughout folders 5 and 6 of same.

47. According to Hazel Corbin, the plan was to remove the sugarplum tree and have two sets of the Birth Series on display to accommodate better the long lines of the previous year. Hazel Corbin to Bruno Gebhard, March 4, 1940, folder 6, box 39, MCA Records—CU. See also Dickinson’s remark in March 1940 that there would be “twice as many (sculptures) as last year.” Dickinson to Dr. Wilcox, March 14, 1940, Unprocessed Dickinson Papers—NYAML. Finally, changes made from the first edition of the Birth Atlas to the second reveal that the sculpture featured in plate 5 (made by Dickinson alone) had been replaced by a far more elaborate version made by Dickinson and Belskie together. The second edition also features the twinning sculpture.


49. Ruth Perkins Kuehn to Dr. Robert L. Dickinson, June 14, 1941, folder 8, box 39, MCA Records—CU.


51. For other cities that immediately received Birth Series sets, see Robert L. Dickinson to Hazel Corbin, November 14, 1940, folder 8, box 39, MCA Records—CU.

52. Harper L. Schimpff to Horace Hughes, September 14, 1955, folder 9, box 68, MCA Records—CU.

53. Perry N. Zang to Horace Hughes, December 28, 1951, folder 9, box 68, MCA Records—CU.

54. “The Dickinson-Belskie Collection . . . and Facilities for Its Multiple Reproduction,” Medical Times (September 1945): 23. Thanks to Wendy Wasman (librarian and archivist for the Cleveland Museum of Natural History) for bringing this article to my attention. See also Gebhard, “The Birth Models.”


56. Sales numbers and price in “Interview with Miss Hazel Corbin of Maternity Center Association,” April 15, 1942, folder 4, box 59, PPFA Records I—SC.


58. Horace Hughes to Martha J. Garst, March 29, 1949, folder 9, box 68, MCA Records—CU.

59. For lanterns and Kodachrome slides, see Gebhard, “The Birth Models.”
While the Cleveland Museum had secured the rights to the sculptures, the MCA retained control over the Birth Series photos that appeared in the Birth Atlas. For their use in medical articles not written by Dickinson, see J. Elise Gordon (Nursing Mirror and Midwives’ Journal) to Horace Hughes, August 13, 1945, folder 8, box 68 and Mark Tarail (Sexology Magazine) to Horace Hughes, December 1, 1954, folder 9, box 68. For their use in a Time magazine article, see Mary Kirkland to Miss Solar, June 9, 1941, folder 7, box 68. For their use in an educational movie, see Horace Hughes to Joe Weill, October 20, 1949, folder 8, box 68. For their use in television programs, see Horace Hughes to Lawrence Williams, November 16, 1953, folder 9, box 68 and Hazel Corbin to Ruth M. Jacobs, July 6, 1960, folder 9, box 68. For their use in a book on baby care, see Robert L. Dickinson to Stella B. Applebaum, June 25, 1945, folder 8, box 39. All in MCA Records—CU.

“The Duties of an Expectant Mother,” Look (November 19, 1940): 32. In scrapbook 2, scrapbook box 4, MCA Records—CU.


For examples of these requests (in the US and abroad), see materials in folders 7-10, box 68, MCA Records—CU. For the Braille version created by the Red Cross, see Gertrude Geiger Struble to the MCA, March 23, 1948, folder 8, box 68, MCA Records—CU.

For evidence of interest from Latin and South America, see Horace Hughes to Dr. Edward C. Ernst, October 21, 1943, folder 8, box 68, MCA Records—CU. For mention of Spanish-language version, see Hughes to Garst, March 29, 1949.

Quote in Ruth Watson Lubick to Angele Petros-Barvazian, October 28, 1982, folder 10, box 161, MCA Records—CU.

See materials in folder 10, box 161, MCA Records—CU.

Malvina Hoffman to Robert L. Dickinson, January 12, 1939, folder 80, box 1, Dickinson Papers—CLM.

Robert L. Dickinson to Malvina Hoffman, January 18, 1939, folder 80, box 1, Dickinson Papers—CLM.


Demarest, Abram Belskie.

Demarest, Abram Belskie.

Demarest, Abram Belskie.
74. My analysis of the sculptures based on those reproduced in the first and second editions of the Birth Atlas (New York, 1940 and 1943). Again, note especially the following changes in the 2nd edition in which a new sculpture replaces plate 5 and plate 17 (of twinning) has been added.

75. Belskie also mentioned that when he first met him, Dickinson was “too tired to tackle the project himself.” In Demarest, Abram Belskie.

76. Starting in January and in the months leading up to the 1939 World’s Fair: Emily Freret had logged in 91 days, Frances Elwyn 29, and Belskie 48. After the Fair opened, Belskie continued to work on additional models. See “Modeling Account” time sheets, unprocessed Abram Belskie Papers, Belskie Museum of Art and Science, Closter, NJ (hereafter cited as Unprocessed Belskie Papers—BMAS). Dickinson claimed to have worked a “single stretch as long as ninety continuous days.” See Robert L. Dickinson to Hazel Corbin, May 23, 1940, folder 8, box 39, MCA Records—CU. Notably, while Dickinson ensured the other artists/sculptors were paid, he did all his work free of charge.


78. The general name of this collection is Medical Illustrations of Human Sex Anatomy, With Some Text, and Many Original Drawings (New York 1924–1940), New York Academy of Medicine Library, New York City, NY. The specific folios I primarily relied upon include: The Living Vagina, Outlines and Case Records, Parts I and II; Topographical Anatomy of the Uterus, Tubes and Ovary, Parts I and II; Location of Embryo, Size of Fetus, Parts I and II; Shape and Size of Uterus and Its Cavity, Parts I and II; and Topographical Anatomy of the Uterus, Tubes and Ovary, Parts I and II.

79. Dickinson was keen on this method of tracing over x-rays. When describing the sculptures, he mentioned it to the MCA’s Hazel Corbin. See Dickinson to Corbin, July 13, 1945, folder 3, box 26, MCA Records—CU. But it was a technique he used for years, going back to at least the late 1920s, perhaps even earlier. See Robert L. Dickinson to Dr. E.V. Schubert, November 6, 1929, in Medical Illustrations of Human Sex Anatomy (Vaginal Pessaries). Others may have used this technique as well. However, more research needs to be done.


82. For the routine practice of x-rays on pregnant women, as well as Dr. Stewart’s call of alarm about its dangers, see José van Dijck, The Transparent Body: A Cultural Analysis of Medical Imaging (Seattle, 2005), 102.

83. While Dickinson referred to them early on as such, Hoffman affectionately referred to them as “[Dickinson’s] babies” and “Abie’s babies.” See, respectively, Robert L. Dickinson to Malvina Hoffman, February 1, 1939 and Hoffman to Dickinson, August 3, 1939. Both in
folder 80, box 1, Dickinson Papers—CLM. “The babies” is also how the curators and museum workers at the University of Nebraska State Museum refer to their set, both in the past and still to this day. Again, with much affection.

84. Robert L. Dickinson to Malvina Hoffman, December 30, 1942, folder 80, box 1, Dickinson Papers—CLM. Underline in the original. To ease flow of reading, spelling errors have been corrected.

85. For example, see an excerpt of a conversation Dickinson had with one of his grandsons over Christmas (typed from hand-written notes most likely by Dickinson’s daughter, Dorothy Barbour), folder 13, box 10, Dickinson Papers—CLM. As Dickinson proudly remarked, “the Birth Series’ combined ‘reverence’ and the new accuracy of size and position. Only one noncommercial show drew greater crowds at the Fair.”

86. By 1951, over 4 million had been distributed by Gerber Products Company. It was also being translated into French because of the demand. See “RLD: An Appreciation.” Pamphlet discussion on 5.


88. Here, analysis of the sculptures and accompanying text is based on the Birth Atlas, 2nd ed. (1943).


90. See plate 12 and line drawing for plate 2 in the Birth Atlas, 2nd ed. (1943). For women as artistic flourishes in the design on the sides, see photos taken by Eric Buhs of the Birth Series set at the University of Nebraska State Museum. Photos in author’s possession. Many grateful thanks to the curators of the University of Nebraska State Museum for bringing these items out of storage; thanks also to Eric for documenting the moment. For examples of later sculptures, which included a pregnant female body in the design, see the models reproduced on 3 and 9 in Dickinson, “Premarital Consultation,” (1941), folder 7, box 59, PPFA Records I—SC.


92. For a list of the pamphlets at the 1939 fair, among them one called “Stop Abortions,” see “A Report of ‘The First Year of Life’” (1939).

93. “How Does Your Baby Grow?”

94. For various generations of the sculpture replicas, see the Dickinson-Belskie Collection, Warren Anatomical Museum, Francis A. Countway Library of Medicine, Boston, MA. Note that by the 1960s, the plastic models are a lustrous pearly white. As I mention at the end of this essay, more research needs to be done to unpack what the sculptures reveal about race and eugenics.


97. For quick visual access to the Breech models, see A Baby Is Born, 53–57. The sculptures themselves are on display at the Belskie Museum of Art and Science, Closter, NJ.

98. Harper L. Schimpf to Horace Hughes, October 31, 1955, folder 9, box 68, MCA Records—CU.


103. “Man and His Health: New York World’s Fair 1939” (1939), folder 3, box 39, MCA Records—CU. On 18–19. In fact, a set had also been on display at the 1933 World’s Fair in Chicago, the same fair the MCA had set up its first installation before it included the Birth Series. See Cole, “Sex and Death on Display.” Moreover, the Birth Series exhibit at the University of Nebraska State Museum also included an installation of real embryonic/fetal slices, which included seven specimens ranging from six weeks to seven months. Thanks to George Corner of the University of Nebraska State Museum for sharing with me documents from its Birth Series display. Among them was a photo of the embryonic/fetal slices installation.


106. James Reed also provided a good discussion of Dickinson's religious beliefs and practices. See Reed, *From Private Vice*, 153–55.

107. Some of these psalms, graces and prayers can be found in folders 51 and 52, box 3, Dickinson Papers—CLM. The Jesus biography in folder 46, box 3, Dickinson Papers—CLM.

108. Trinity Church scrapbook (entitled “Trinity Windows”) in folder 42, box 3, Dickinson Papers—CLM. For another example of how religious iconography made its way into his sculptures, see his notes on a 1948 *New York Times* clipping for an article called “Gates to Paradise.” Here the article featured a photo of a set of carved bronze doors by the fifteenth-century Italian sculptor, Lorenzo Ghiberti. At the top is handwritten: “The idea for the birth series ‘doors,’” likely a reference to the design for the Dickinson-Belskie Birth Relief Triptych. For the newspaper clipping, see “Gates to Paradise,” *New York Times*, July 18, 1948, folder 29, box 12, Dickinson Papers—CLM. For more clarification by Dickinson of this design, see photo of the Birth Relief Triptych in folder 8, box 39, MCA Records—CU.

109. Reed, *From Private Vice*, 153. See also Lura Beam to James Reed, June 19, 1972, folder 29, box 13, Dickinson Papers—CLM.

110. Abram Belskie to Mrs. Nash, March 26, 1940, Unprocessed Belskie Papers—BMAS.

111. For the birth control movement's opposition to abortion in the 1930s, see Reagan, *When Abortion Was a Crime*, 141–42. Only by the mid-1950s did the Planned Parenthood Federation of America quietly begin to discuss the possibility of reexamining anti-abortion laws. See Reagan, *When Abortion Was a Crime*, 219–20. In addition, it was only in 1970, after several states legalized abortion, that the Planned Parenthood Federation of America officially reversed its position against the procedure—and worked to make it more


114. For more on the various religious views about birth control in the first few decades of the twentieth century as well as the ramifications of the 1930 Lambeth Conference, see Kathleen A. Tobin, *The American Religious Debate over Birth Control, 1907–1937* (Jefferson, 2001). For a great overview of the relationship between Catholics and contraception from the late 1800s through the *Humanae Vitae* (1968) from the perspectives of local priests and the laity, see Leslie Woodcock Tentler, *Catholics and Contraception: An American History* (Ithaca, 2004).


117. “Blessed Be Abortion,” n.d. folder 9, box 6, Dickinson Papers—CLM. To ease flow of reading, spelling and grammatical errors in the original have been corrected.


121. Dickinson and Morris, *Techniques of Conception Control* (Baltimore, 1940). Mentions of abortion appear on 3, 48, and 56 (an earlier mention on 39 refers to spontaneous abortion, i.e., miscarriage). When the second and third editions of *Techniques of Conception Control* came out, the scant mentions of abortion remain the same. See Dickinson and Morris, *Techniques of Conception Control*, 2nd ed. (1942) and Dickinson, *Techniques of Conception Control*, 3rd ed. (1950). The previous manuals published in the 1930s (*Control of Conception*)—in which abortion appears more prominently—were published under the auspices of the National Committee on Maternal Health.

122. “The Black Plague,” *America* 40 (February 16, 1929): 446–47. Quote on 447. See also Tentler’s discussion of campaigns waged by Catholics against birth control and Planned Parenthood in the 1940s. Especially striking in her analysis is the illustration that ran in the *Catholic Mirror*, which featured “a sleeping infant about to be murdered by a knife-wielding arm, prominently labeled ‘Planned Parenthood.’” In Tentler, *Catholics and Contraception*, 168–172.

123. It was Linda Gordon who first described the organization’s name change and its larger political implications. See Gordon, *Woman’s Body*, xx and chapter 12. The message remains the same in her revised and updated edition, *The Moral Property of Women*, 4 and chapter 12.

124. Dickinson’s sketches in folder 5, box 59, PPFA Records I–SC. Many thanks to my Catholic missionary friend, Logan Burda, who pointed out the resemblance the design bears with the medal of St. Benedict. Burda also pointed out the significance of the medal, a
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significance about which Dickinson was likely well-versed. Not only is it so important as a Christian icon that it regularly accompanies the crucifix, but it is also “often worn for spiritual warfare (defending against attacks and temptations of Satan), to counter the effects of poison, and for healthy births.” Quote from Logan Burda, email dated June 15, 2016. Note that in addition to several different versions of the one just described, Dickinson sketched several other possible PPFA logos that did not bear this theme.

125. Notably, Dr. Rock—the staunch Catholic but ardent supporter of the Pill by the 1960s—had expressed similar concern several years earlier about what he saw as the negativity embedded in the language of birth control. As James Reed noted, Rock “objected to the emphasis on contra-ception’ and wanted ‘a more positive approach to fertility.”’ The remarks were made at a 1936 luncheon held by the Committee on Maternal Health of which Dickinson was a member. Reed, From Private Vice, 188.

126. For evidence that Dickinson had been asked to come up with a “new seal” for the organization, see Grace Provost Bastedo to Robert L. Dickinson, February 7, 1940, folder 1, box 59, PPFA Records I—SC.

127. For the logo that appears on the letterhead for the 1949 Planned Parenthood Campaign, see Hope Spingarn to Dickinson, February 4, 1949, folder 2, box 59, PPFA Records I—SC. In another set of organizational materials, it is possible to watch PPFA test in the early 1940s its new name, new message, and new image. In folders 1 and 4, box 76, PPFA Records I—SC.

128. For examples of Belskie’s work before Dickinson and after, see Demarest, Abram Belskie.


130. Mrs. Shepard Krech, “Saving Mothers: Tomorrow,” Baby Life (January 1941): 27+. Quote on 27. In scrapbook 2, scrapbook box 4, MCA Records—CU. Another example of this mindset can be seen in the 1937 planning meeting minutes for the 1939–1940 New York City World’s Fair. “It was agreed that the midwife, as such, should be left out of the picture. It was felt that it was wrong terminology to call most of the 30,000 mammies who practice in this country ‘midwives.’” See planning meeting minutes, November 11, 1937. Quote on 2.

131. Lura Beam to James Reed, December 21, 1970, folder 29, box 13, Dickinson Papers—CLM.