

PART 2:

CHAPTER FIVE

June 1992

It has just occurred to me that I visited BOTH Old Comiskey Park AND Wrigley Field within two days, a year and a half ago. When I moved to Chicago in the late '70s, I thought I'd be at baseball games, blues clubs and Second City every chance I had.

Bumping into Linda K., another fellow North-Sider, at one of the three White Sox games I've been to was a complete fluke. When I interviewed for the Madonna job a day later within eye-sight of the Cubs' bleachers, I felt closer to home. "Home" being the North Side, Wrigleyville, the National League and many, many Cubs games.

Not many Chicagoans know that Zachary Taylor Davis was the architect for both baseball parks: The South-Side White Sox park was built in 1909-1910; the North-Side Cubs' in 1912-1913. Mr. Davis may have been the first and last person who

was able to overcome Chicago's built-in regional and social bias and to have allegiances with both sides of the city.

Do New York baseball fans complain about confused loyalties between the Mets OR the Yankees? How about the Senators OR the Orioles in the DC area. Probably yes to both questions. Perhaps it's naive today to wonder whether the same architect designed both stadiums in these cities when the 1994 players and owners can't seem to agree on bottom line stats, not to mention RBIs or ERAs. (1) The 1994 baseball strike lasted 234 days and dragged into the next spring. Baseball was the first sport in history to lose its postseason to a labor dispute.

Becoming a true Chicagoan means becoming a North-Sider OR a South-Sider, which means choosing between the National OR the American League. Very few people manage to be loyal to both. Back in 1969, many Wrigleyville fans switched allegiances to the South-side after the Cubs, needing to win just ONE game, lost 10 (or was it 11?) straight games FORFEITING—not losing—the National League Pennant to the brand-new, New York Mets. That was the final blow for some former Cub fans. Twenty years later on August 8, 1988, the Cubs were the last



Figure 1. Ron Kittle with a Kittle Baby, 1985

1 Information from Cincinnati.com, a Gannett Company, (12 August 2004).

<<http://reds.enquirer.com/2004/08/12/STRIKEBOX12-LOPRESTI.html>> July 2013

major league team to host night baseball, but the games were infrequently scheduled in the beginning.

I was a White Sox fan in the early 1980s, in addition to my Cubs-fan status, when my new last name matched the American League MVP, Ron Kittle. But no real Cubs fan truly believes they'll actually win. Fans go to Wrigley Field to sit in the sun, drink beer in the bleachers, and chant: "Right Field Sucks! Left Field Sucks!" and sing along with Harry Carey at the top of the 7th inning. One of my happiest days was in the bleachers for a double-header. Although it was one of those 90-degree days, no one had to go to the bathroom because we just sweat out the beer. By the end of the second game, girls were unzipping shirts and skirts while the guys cheered them along—the game was no longer on the field.

Later, my definition of torture was to sit through a July group care worker meeting within ear-shot of the crack of the bat and roar of the crowd. All of us would be restless. On this beautiful summer day who wanted to be rehashing what to do with Ginger, who had cursed out staff . . . again . . .? Who really cared that the girls weren't emptying the dryer lint . . . again? . . . or that vegetables weren't served with dinner last night . . . again?

It was only a small consolation to know that Linda, our fearless leader, wanted more than anything to be in Wrigley Field behind first base with a cold one too. She would pause when the crowd noise sounded particularly enticing and look out the window wistfully. Linda, as I knew first hand, was a true-blue baseball fan. Sometimes getting to a Tuesday staff meeting or being on time for a shift change would have to be planned around the stadium traffic. This was a concept I, an indiscriminate sports watcher, loved. (In truth, I would watch paint dry if they kept score.) If I knew ahead of time, I would plan my arrival at M/SJ way before or way after the 8th inning . . . unless I knew they were losing badly.

June 1992

Baseball and M/SJ will forever be linked for me. Madonna/St. Joseph Center and Baseball. Baseball and illegitimate children. Illegitimate children having more children. Pre-adolescent girls, early bloomers who had gone around the bases and were sliding into home plate, when most junior high girls were furtively trying out their make-up skills at the mall.



To make the point crystal clear, an advertisement for Viagra was prominently placed behind home plate. Television viewers had no choice but to see an ad for penis erections at every single at-bat. Viagra for the viewing public, but no birth control distributed for women or discussed anywhere. (Today we still don't feel comfortable with ads for women's hygiene products: Kotex, tampons, douching, itch, smells and the like, much less have the need for them trumpeted on TV.)

Sex-baseball has many nuances, many different interpretations, depending on your home of origin and decade of adolescence. Here are the finer points of "Make-out Lingo" as I know them: 1960s, Suburban, East-Coast Time:

First base is just kissing;

Second base is upper body petting;

Third base is lower body petting;

FOURTH Base is "Scoring!"

Or "Going all the way!"

"Going 'round the bases!"

Sliding into home.

or having sexual intercourse.

Clearly, M/SJ residents knew "FOURTH base" personally (evident by bulging bellies), but most of them had been scored on before starting the second grade, or when they were 7 years old.

Childhood sexual abuse among DCFS girls was almost 100%, particularly with the girls who later became teen mothers. Maybe father or step-father, grandfather, uncle, cousin, brother, or maybe even "auntie" had played sex-baseball with her when she was still just a kid. Studies have shown that children who have had "involuntary sex" (i.e. those who have been sexually abused), "have difficulty practicing protective behaviors," and are at high risk of becoming a teen pregnancy statistic. (See Figure 2D.) More national statistics from *ChildHelp USA* (2) reveal that:

- 14% of all men in prison in the USA were abused as children.
- 36% of all women in prison were abused as children.
- Children who experience child abuse & neglect are 59% more likely to be arrested as a juvenile, 28% more likely to be arrested as an adult, and 30% more likely to commit violent crime.

The poverty-abuse-illegitimacy-poverty mantra begins to sound like another one of those rhetorical, chicken-and-egg conundrums, until it's understood that like it or not, society gives birth to its own future. Since 1973 two things happened: Americans over age 40 became the richest generation in history, and the percentage of American children living below federal poverty level rose by 51%. (3) High levels of youth poverty PRECEDE high rates of teen childbearing, which we now can confirm. In most inner cities, families have broken apart and reassembled in odd shapes over the scar tissue. The chain of poverty and abuse is strengthened by this family disintegration: Unemployment; drugs and/or prostitution; parole, probation, jail sentences . . . Illegitimacy is just one of the by-products of this permeating social decay.

Historically, the long-term future of a society is threatened when people stop getting married, when there is a rise in fatherless children, when the safety net of the extended family has rotted through

. . . or when the language of the Great American Pastime can be translated into promiscuity and sexual acts.

Maybe permeating social decline can help explain the rise in teen pregnancy in the ghetto, but all socio-economic groups and women of all ages have contributed to the incredible 54% increase in non-marital births from 1980 to 1991.⁴ In fact, 1991 was a banner year for unwed mothers in EVERY age group: 1.2 million total! More babies were born out-of-wedlock in 1991 than at any other time in the whole 51-year history of keeping track of such numbers.⁵ Even though this trend seems to be leveling off, the proportion of all births to unmarried mothers hit record levels in the early 1990s: 29.5% in 1991, followed by 30.1% in 1992 and 31% in 1993.⁶

During the late 1980s and early 90s, aging 1950s baby-boomers, married or not, tried to stop (or jump-start) their biological clocks; in 1986 the number of first-births among all women aged 30-34 increased 140% over the period 1970-1986.⁷ (I was one of these.) Not surprisingly, there has also been an increase in non-marital births in this age group—16% of the non-marital

3. "National Poverty in the United States: 1991." *U.S. Bureau of the Census Current Population Reports Series P-60*, No. 181 (Washington D.C., 1993)

⁴ National Center for Health Statistics, "Advance Report of Final Natality Statistics, 1993," *Monthly Vital Statistics Report* Vol 44, No. 3 Supplement (Atlanta: Centers for Disease Control and Prevention, September 21, 1995) p. 8.

⁵"U.S. Birthrate Decreased in 1991, But Nonmarital Fertility Continued to Rise," *Digest, Family Planning Perspectives* 26 (January/February 1994) p. 43.

⁶National Center for Health Statistics, "Advance Report of Final Natality Statistics, 1992," *Monthly Vital Statistics Reports* Vol. 43, No. 5, Supplement (Atlanta: Centers for Disease Control and Prevention, October 25, 1994) p. 9.

⁷"First-Born Rates Among Women Over 30 Are More Than Twice 1970 Levels," *Digest, Family Planning Perspectives* 22 (July/August 1990) p. 187.

births in 1993 were to women over 30.⁸ "Because women have a monthly hormonal cycle, they can't escape the fact that their bodies are telling them to do something," a San Francisco endocrinologist told *Time* in 1990. He added, "The biological drive to reproduce may be stronger than the cultural yen to get married."⁹

Even Murphy Brown got into the act on prime time TV during the 1992 spring season, much to then-Vice-President Dan Quayle's consternation. Quayle felt that Murphy Brown's show glamorized unwed motherhood and "mocked the importance of fathers."

The benign problem with Quayle's statement about unwed mothers is that it's hard to argue with. There is a joke:

Question: "Have you stopped beating your wife?"

Answer: "Well . . . yes and no."

No, an unwed mother is not glamorous. I'm the one with the semantics problem with the word parent or "pair-ent." But did Quayle not watch TV when he was a kid? Were single fathers somehow different from single mothers? What about *Bachelor Father*, *Nanny and the Professor*, *The Farmer's Daughter*, *My Three Sons*, *The Andy Griffith Show*, *The Courtship of Eddie's Father*, *Gidget*, *My Little Margie*, *Daktari*, *Bonanza*? More currently, what about *Full House*, *Blossom*, *Empty Nest*?

The June 13, 1992, issue of *TV Guide* listed fifteen TV shows headed-up by a single dad when the only one I knew personally used to be my husband. The 1991-1992 TV seasons alone had eight prime time series featuring some version of the bachelor father. Does Daisy Duck share custody of Huey, Dewey, and Louie with Uncle Donald? Does she pay child support?¹⁰

Typical bios at the time:

Carol S. Carol, 18, came to the Center in her 5th month of pregnancy. She was interested in being in an environment where there was less pressure than at home. The baby's father was in the army and was unaware of her pregnancy. Carol was very motivated and eager to learn all she could about adoption. She received a great deal of counseling and was able to work through many of her own issues centered on her pregnancy. Carol delivered a baby boy a month early. She placed her child for adoption then returned home to live with her mother for a few months before going into the Air Force.

Mary G. Mary, 19, came to the Center in the 6th month of her second pregnancy. Her first pregnancy resulted in an abortion. Mary was interested in receiving adoption counseling. Her mother and stepfather were very supportive. Mary's parents had been divorced since she was very young and her relationship with her father was strained, though Mary was very interested in trying to work things out with him. Mary was a very independent young woman who worked throughout her stay at the Center. She placed her baby for adoption and moved into her own apartment in the city. She works full-time and plans to go back to school.

June 25, 1992

For a year and a half, my friends have laughed, enviously, at my "sleeping job." We, modern women of the '90s, had made jokes about what to do with Your-Basic B.A. Degree: Get paid to sleep—and that didn't mean as in the "world's oldest profession." We laughed, but, in truth, I used the term "sleep" loosely. With four or five straight hours of sleep a night, I could function the next day. Two, three nights of interrupted sleep and a whole day (or two?) was lost to an exhausted, in-bed recovery. Physically, I could remember, down to my bone marrow, the illogical, endless nights with a newborn. Why medical residents are punished this same way seems like a medieval torture, a modern-day prisoner of war crime, not to mention being error-provoking.

When I first started working at Madonna, I thought the sleep deprivation would drive me mad. I napped all day long but never got that precious REM sleep that our bodies crave and need. One afternoon in the parking lot of my children's school, one of the mothers, who worked as an emergency medical technician (EMT) for the Chicago Fire Department, saw me snoozing in my car waiting for the school bell to ring. She knew I had just started at Madonna and that I was tired all the time. She gently tapped on the window of my car and whispered something to me that I'll never forget. She said, "It takes a full six months for your body to get used to a completely different sleeping schedule."

Yes, my circadian clock was in shock, but without this off-the-cuff, anecdotal advice, I wouldn't have made it to my six-month review at Madonna. Who knows if it's true? I thought of "enough sleep" the way Campbell's soup was advertised: "Soup (sleep) in the cupboard is like money in the bank." Somehow neither the soup cans nor the right amount of sleep could be taken away from you once they (and it) were properly stored away.*

This much I do know: my personal calendar and a quick review of those "low barometer" days (which so enlivened the L. & D. ward) would show, in lock-step, an uncanny and overlapping similarity. A class field trip to the Brookfield Zoo with Grade Two on the school bus would have been preceded by a night of premature labor with a 15-year-old resident who hadn't been drinking enough fluids. Maybe she had decided to start a diet; maybe her boyfriend hadn't called, or later in the M/SJ program, maybe he had thrown her down a flight of stairs, or hit her over the head with a baseball bat.

When 16-year-old Germaine went into labor at 11 p.m., I was scheduled for ten days of vacation the very next morning. My children and I were to board an American flight to Boston at 11 a.m. and some (any?) sleep would have been helpful. Germaine delivered at 5 am in the

morning and I was delighted to be there, but crawled home to sleep an hour or two before the real fun began.

July 6, 1992

Now, after an exhausting vacation which included very little "extra" sleep, I realize the best part of Germaine's delivery for me was that I was finally able to shed Rachel's memory, the gang-banger who was mutilated and murdered four months ago. For over a year Rachel had been my only actual delivery to date.

I had kept the thank you note she sent to me: "Thank you so much for being in the delivery room with me. I really needed all the support you gave." And she signed it: "Love, Rachel and Richard." (Note the AND!) But now, I get the creeps when I realize how much physical and psychological torture the owner of that large oval script suffered.

Up to this point I hadn't been in a start-to-finish labor at Madonna. Most often a resident would go into labor at night on my overnight shift. I would dash her to the hospital after getting in touch with the on-call staff and then close the gate. At the hospital I would greet the St. Joe's Emergency Room night staff, gossip a little, get through registration, wait for the wheelchair, and then go upstairs to settle our resident in.

Cervical dilations would be checked, monitors and cables hooked up, bloods drawn, urines collected, records retrieved. The normal Madonna resident would then deliver sometime the next day on someone ELSE'S shift, while I was at the Brookfield Zoo with thirty screaming 7-year olds in the pouring rain. When I returned to work that same/next night, I would read about the baby's particulars. Name (gender) and exact measurements would be written on the message blackboard until staff decided that these numbers fostered unfair competition; then, just the baby's name and time of arrival were recorded. Idealistically, M/SJ did not want to influence those residents who hadn't decided whether to parent or place their babies.

In other all-women environments such as a college sorority, the message blackboard would be filled with frat party details or last minute tailgating logistics. Toward spring, perhaps the announcement of wedding engagements of this one to that one. Certainly NOT the baby's due date—or its gender, height and weight . . .

Germaine was a quiet, young African-American girl who, if she could have looked at my personal calendar, would not have selected the night before my vacation to go into labor. She was kind in that way, but her little boy suddenly was in a hurry. Her crazy-eight pacing through the living room and into the dining room and kitchen during the shift report had taken on an animal-like urgency: she was no longer comfortable in her own skin. Language had become

subliminal; Germaine understood loud voice commands but little else. An instinctive, physical sign-language was used to express the female mammal's search for enclosure and her immediate need for shelter. Although her bag of waters was still intact when we left Madonna, her contractions were four minutes apart.

Germaine was dilated to six centimeters when we arrived at the hospital; she delivered a 19", 8-pound-baby four hours later. Unlike Rachel's delivery, a forceps vacuum-device was not needed. Nothing unusual or bizarre happened, and Germaine pushed the baby out on her sixth or seventh major contraction. For Germaine it was a textbook Lamaze delivery.

July 9, 1992

One of Germaine's best friends is Jade, a beautiful 15-year-old Jamaican girl who is thirty weeks pregnant. Germaine and Jade have been part of the DCFS fabric for seven years or more. They both have cycled in and out of foster homes, emergency shelters, and group home placements separating and merging again months, sometimes years later with random bureaucratic serendipity. Germaine and Jade are probably more like sisters to each other than are either of their own biological sisters.

Shortly after Germaine's delivery, Jade started to have premature contractions. At first the doctors thought her contractions were from dehydration. I thought she was having sympathetic M/SJ "amoeba-like" labor because she and Germaine were so close. We spent quite a few nights at St. Joe's waiting for a liter or two of saline with dextrose to drip into her arm intravenously. With the extra volume added to Jade, the contractions on the monitor would taper off and we would be sent home to Madonna.

This is quite the reverse of a kidney patient who needs to shed liquid volume during dialysis treatments. I know this first-hand because I was a dialysis technician in Boston in 1970 when the procedure was still new. We used large tubs of dialysate to draw the potassium, salt, and other impurities from the blood. The patients had shunts and/or fistulas to make the blood exchange easier, but the donor kidney rejection rate was way over 90%. This was years before doctors discovered anti-rejection medications and synthetic red blood cells. One of my patients was a young girl who had contracted strep throat on her honeymoon and within days her kidneys had shut down. Every time she had a period, she needed a blood transfusion so trying to match her blood for a donor cadaver kidney became less and less likely. I am not sure she ever made it off the machines

However, Jade's episodes started to increase, and her contractions became more and more intense. At week twenty-eight, Jade's cervix started to dilate, and she was quickly put on

medicines to slow down a premature delivery. As her body adjusted to the medications, higher doses were given, then given more frequently. For weeks Jade has been on an every-two-hour medication schedule. When her pill schedule was 11 p.m., 1, 3, 5, and 7 a.m. we would try to work out a sleeping deal. I would make sure she got the first two doses, and then she would come to my door for the 3 o'clock dose, and I to her door for the 5 o'clock, and then I'd beg the a.m. staff to check the 7 a.m. dose. Both of our alarm clocks would ring no matter whose turn it was to travel.

The doctors ordered a home monitoring machine that was hooked up to the telephone. Nurses in Michigan would read the transmitted information and then call St. Joe's if she had more than five (later upped to eight) contractions in an hour. Jade monitored herself twice a day, later three times a day. Sometimes she could feel the abdominal activity, sometimes not. We both would say a little blessing to the Fertility Goddess to be allowed to stay home that night.



LOW BIRTH WEIGHT

From the October 11, 1992, *Chicago Sun-Times*: "Seven percent of all deliveries in the United States are low weight babies, ranking the United States roughly 28th in the world for such births and putting the U.S. in the same grouping as Albania, Chile and Turkey."¹¹ Guttmacher's *Sex and America's Teenagers*, puts it like this: "Poverty status is one of the strongest predictor of low birth weight, especially among teenage mothers."¹² Unmarried women, women who smoke or use drugs, and women who don't get prenatal care are all at risk of having a baby that weighs less than 2500 grams (5 lbs 8 ozs).

Pregnant women in stressful war zones (such as Chile, Bosnia) have low birth weight, as do African-American women from every economic and educational background in the United States. A black woman's risk of having a seriously underweight baby is three times that of a white woman's. Some researchers think that it's a matter of "racism" rather than "race" that causes stress. Stress impacts health status through changes in neuroendocrine functioning that produces catecholamines that then start a premature delivery.¹³ The average cost of a delivery

¹¹*Op. cit.*, *Chicago Sun-Times*, p. 33.

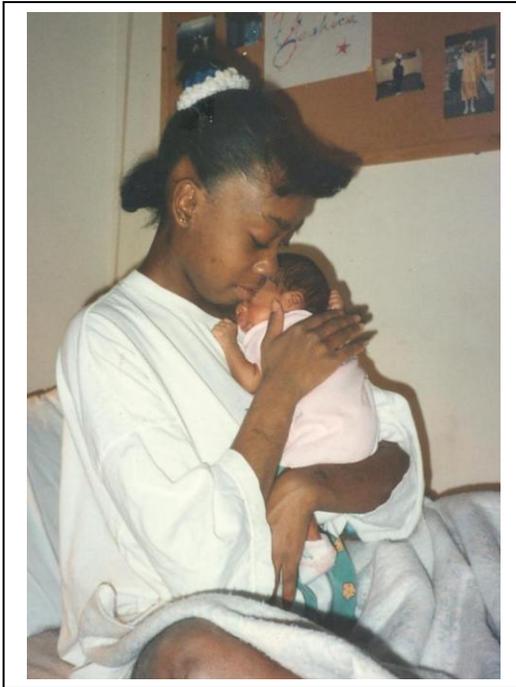
¹²*Op. cit.*, *AGI*, p. 62

¹³Richard J. David and James W. Collins, "Bad Outcomes in Black Babies: Race or Racism." *Ethnicity and Disease*, (vol 1, 1991) pp 236-244.

subsidized by Medicaid for a low weight baby is \$18,950; for a normal size baby it is \$3,533.¹⁴ (See Figures 5A and 5B at end of chapter.)



Residents with Low-Weight Babies:



July 11, 1992

Paula is a bitch. I asked the am staff to take a written shift change report from me. I wrote: “Dear All, Paula has mentioned that a 7 am shift report would be a courteous thing to do. I am sorry for the oversight. Usually I try to leave pertinent notes, particularly because things have been relatively quiet in the house. So PLEASE wake me up. I might be crabby, but it’s better than wishing I were up, if in fact you want me up.”

Her response in the log was: “We don’t wake adult residents up to work. Please be available for shift reports as part of your job.” OK, I’m awake every two hours and you want me to get downstairs to tell the am staff that nothing happened during the night? Really?

This was also a particularly stressful time with my ex and our daycare arrangements. We had a backup daycare plan at the YMCA at North Avenue, but he wanted me to tell him which

¹⁴*Op cit.*, *Chicago Sun-Times* (See Fig. 5B)

days I would need to drop off the kids. I told him I would need a crystal ball to anticipate which nights I would be in labor with a girl, but he pretended not to understand. I'm not sure whether he was being a typical clueless man or an asshole ex-husband.

July 15, 1992

Life in the only three-room was like living on the front line of the Chicago Bears, like living in the trenches in WWII. Threesomes do not work well or they work malevolently well because of their stability. "Like a tricycle or three-legged chair," Harriet Goldhor Lerner, Ph.D. says of sturdy triangle relationships in her *Dance of . . .* books. She continues, "Triangles are present in all human systems. When anxiety mounts between two people or conflicts begin to surface, a third party will automatically and unconsciously be drawn in."¹⁵

In the only Madonna three-room, tension and anxiety were the normal pattern. The disagreeable, contrary Jameka had been a 1-in-3 in the room. During Jameka's reign in the room, the other two roommates formed the other legs of the triangle in opposition to her but would quickly ally with her against the weaker third when she needed something. (Hair gel, CTA token, cigarette . . . in exchange for God knows what.)

Perhaps this was a teen thing; maybe it's what gives women a fickle reputation. Certainly most women remember being betrayed by another woman in junior high or high school. I don't know whether men are more direct in this regard. Maybe for males going through puberty physical violence is more satisfying than the slower, more subtle female psychological, passive-aggressive techniques such as the torture of exclusion and subtle verbal taunting.

July 22, 1992

Karla is 16 years old. She is a light-toned, African-American woman who moved into Madonna because her parents wanted her to have peer support during her pregnancy. Her mother is a school teacher and her step-father is an electrician for the City of Chicago. Karla is bright and creative. She is a talented artist with a special flare for fashion design; she also has a special little flare for pushing interpersonal buttons. She can bait and then hook almost anyone into a power game with her.

I remember what my pediatrician said about my children's "terrible twos" which seemed to go on for three or four (ten) years: "You don't want a passive baby. Terrible Twos will grow into much more interesting adults than those quiet, docile babies." And the same was true with

¹⁵Harriet Goldner Lerner Ph.D., *Dance of Anger, a Woman's Guide to Changing the Patterns of Intimate Relationships*, (New York: Harper & Row, 1985) p. 161.

Karla. She, like Ginger, was a whole IQ range higher than the other residents, but both were exhausting!! Was I really wishing they weren't so smart so that we could manage and control them better?

Karla is so skillful at drawing attention to herself that the content of her anger is often overlooked. She hates being in a group home. Like spoiled little Michelle from Evanston who abused drugs, Karla just wants to be home. She has become a willful 2-year-old, but this time her mother has vowed not to cave into her temper tantrums. Staff has tried not to step between the mother's wishes and the daughter's shocking behavior . . . until household Clorox bleach was found in one of the roommate's contact lens cases.

July 31, 1992

Karla was dismissed from the program. The resident wasn't injured this time, but Karla's boldness had shocked all of us. She narrowly averted an assault charge filed against her . . . this time. M/SJ was still a blend of socio-economic groups. The DCFS kids were thrown in with private and referred clients one of whom, at this point, was the second developmentally-challenged girl who was admitted on my watch. It seemed, even to staff, that Olivia had a "Kick Me" sign on her.

Shortly after the bleach episode, Olivia told staff she was afraid of another resident named Lakeisha. Apparently a couple of days ago, Olivia accidentally knocked into Lakeisha, splattering her with a little bacon grease. Olivia is mentally delayed, and sometimes she is physically awkward. Maybe she has a touch of Cerebral Palsy, but I don't remember.

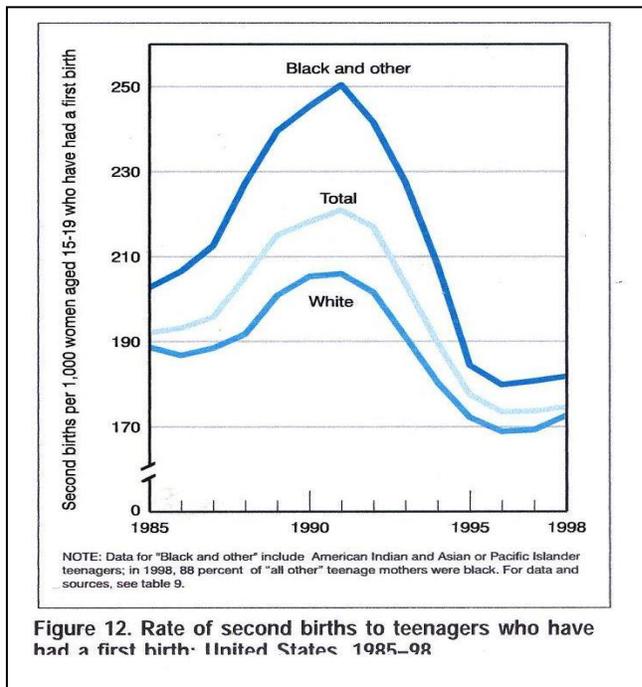
Over the weekend Lakeisha complained to Karla, who said she would have done something to Olivia if Olivia had burned HER with bacon grease. So Lakeisha did. She later confessed that she put dish washing detergent in Olivia's tea and spit into her food. Lakeisha poked her in the back with toothpicks and laughed at Olivia when she ran out of the room. How long before staff was alerted to the situation? Who really knows if Lakeisha even needed the alleged bacon grease provocation to pick on Olivia? How much of Lakeisha's spit has Olivia swallowed?

Karla and Lakeisha had formed a nefarious alliance just as Jameka and Lydia had. When Karla was discharged, Lakeisha lost some of her dominance. Thankfully 18-year-old Lakeisha delivered shortly after Karla left, and she was discharged from the program. (Even now when I say "thankfully," I wonder about those poor little babies, like Ginger's baby, who go home with teens so skilled at social warfare.)

August 13, 1992

Jameka's memory returned to Madonna in another way. Latasha called Linda to say she was pregnant again with her second baby and was due in two months. A year later when Latasha was pregnant for the third time, she returned to M/SJ but would leave before the month was out. Latasha told Linda that Jameka and Amber were also pregnant. We already knew Amber's first born was living with an aunt. I wonder where the teddy bear ended up. I would have thought her C-section would have scared her into using birth control, but apparently I guessed wrong. "Our" teens were becoming teen pregnancy statistics. (16)

In a *People Magazine* interview, Leon Dash, author of *When Children Want Children* (1989), was asked if inner city kids were influenced by Murphy Brown's values, and he reported:



These kids grew up in deep poverty, totally isolated from mainstream America. They are aware of conventional values, such as postponing sexual activity or waiting until you're married to have babies. But they feel these values don't apply to them. These kids are bright but undereducated; generally the public school system lost them in the second grade. Most of them know their lives are going to be limited if not bleak.

[I can vouch for that when I taught Foundational English at Truman College from 2007 to 2012. My students read at

about an 8th grade level and most could not write a full sentence without error. Most of these same students were in remedial math as well.]

Half of the teenage girls who have a child have a second one within two years of the first. The second child is born before the first one begins to

16 Stephanie Ventura. "Nonmarital Childbearing in the United States, 1940-99." *National Vital Statistics Reports*, Vol 48, No. 16, (Revised 18 Oct 2000) p. 97. <http://www.cdc.gov/nchs/data/nvsr/nvsr48/nvs48_16.pdf,> (July, 2013)

walk. The first child is still a doll. It hasn't reached the demanding period that begins with the terrible twos.

In answer to the initial question, "Would a sitcom like *Murphy Brown* influence these kids?" He answered, "No. They probably never watch it."¹⁷

August 26, 1992

My little Hephaestus, David, turned 6 years old today. Lego-mania is still in full bloom, and he's heading into Erector sets . . . more teeny-tiny parts needing eagle-eye precision.

When I got to Madonna last night, Jade was in her usual position: on the monitor timing her contractions. After the shift report, the Michigan telephone labor technicians (what the heck would they be called?) told Jade to repeat the strip; she had had eleven contractions. Sometimes when the number of contractions was very high, Jade was asked to repeat the reading for another hour. With disappointment, because we were both very tired and because it was pouring rain outside, Jade got back on the monitor machine. In truth she hadn't been having many contractions lately, but within twenty minutes the nurses called to say that Jade already had eight contractions and that we needed to go to the hospital.

Jade's baby is now in her 36th week, and the doctors said they would no longer try to stall the birth. Strangely, when they said that two weeks ago, her daily contractions slowed down naturally, even after they reduced the medicine dose and (thankfully) its frequency. The medicine has been such an integral part of Jade's pregnancy, I just wonder whether this drug, like thalidomide taken in the 1950s, has had a long enough testing period to know the long-term side effects to the babies. Some of the residents after Jade who had premature contractions, who were also prescribed medicines and monitors, shared this same slowing down of daily contractions as they approached their due dates; two girls actually held onto their babies right up to their scheduled dates. Maybe it was a psychological thing.

When Jade and I arrived at St. Joseph's, all of the emergency room staff welcomed us by name, a bad sign for sleep lovers. How many times had she and I been to the ER and discharged an hour or two later? Often the E.R. staff would joke and place side bets on whether Jade would deliver or be discharged after she got enough I.V. fluid. "A McDonald's chocolate shake says no delivery tonight," or "Pizza Hut pepperoni on the way out?" Jade was more uncomfortable than usual, and the nurses seemed to have radar to that; no one bet she was going to leave before

¹⁷Stephanie Slewka. "In The Inner City, Teen Moms Have Motives All Their Own." *People Magazine*. (8 June 1992). Vol 37 no 22. See also: Leon Dash, *When Children Want Children*, (New York: Wm. Morrow, 1989)

delivery tonight. Her face was dark with fear; her beautiful almond eyes looked out sharply over her high, wide cheekbones.

Her boyfriend, Paul, had graduated from the Columbus-Maryville program and had moved into independent living. Paul worked the overnight shift for an office cleaning service and would be off at 8:00 a.m. Jade paged him at 3:00 a.m. and told him she was in labor but not to rush over . . . she hoped she would make it through his shift so he would not lose work time. Already Jade could make priorities and think as an adult. I had not met Paul because he, of course, visited during the day and I worked at night, however, Jade and I had become close in the last month, and I felt I knew him personally. Jade was the cream of the crop: beautiful, smart, centered.

I left the hospital at 9 a.m., when I was sure Paul was comfortable and in control. Jade was dilated to 8 centimeters. The baby could be another couple of hours, or transition could rush to full dilation (10 centimeters) within minutes. Childbirth is that type of thing . . . and again I was in awe of the L. & D. nurses who seemed to be all-knowing.

Jade and Paul delivered a baby girl at 11:30 that morning. Mother and daughter are resting comfortably. How sad to know Jade will be moving out of Madonna. I will miss her.
September 1, 1992

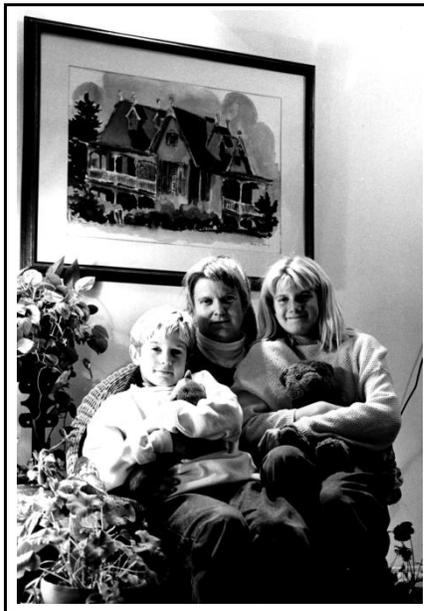
Maybe I'm so focused on Jade and Paul because my own personal life has been turned upside-down. My ex-husband has suddenly moved to the far western suburbs with the children. He sold our Bucktown house within three weeks of putting it on the market, and I have cried every day since. He met an old high school sweetheart at a class reunion; they plan to get married over the Thanksgiving Weekend. No warning, no advance notice. Presto, my daily contact with Julia and David is over.

Our divorce counseling has ended, and my ex immediately started charging me for daycare expenses because I could no longer be with the kids after school. Actually, he started saving the afterschool and daycare receipts, a bill he would present to me in due time via a court order, just because he could. Another look at the Abuse Charts 2D and 2E shows that his passive-aggressive behavior encompassed just about all of the categories listed: emotional and economic abuse, using the children to relay messages, and using male privilege in the extreme. To me, his little ploy was just about as cruel as charging families for the cost of the bullet that killed their fathers in war-torn countries.

In a letter to my brothers and father I wrote:

"My emotional loss is intense. I haven't felt this alone since Mom died eight years ago. I have break downs at inopportune times (in the grocery store, on the jogging path, in a warm/passionate embrace). The kids have radar to my mood swings and will ask openly, "Mom, are you crying again?" (AGAIN?) So far as they know, they are going on an adventure with the Dad and Ditzbag. I have lost twenty-five pounds. The expressions: "I can't swallow that" or "I can't stomach that" make total sense to me now."

Journal: From the 9/1 letter: "I'm trying to stay in balance emotionally. I have fluctuated wildly



between the Jungian Hag Woman (green hair, red eyes, fangs and saliva snapping) and the New-Age, '60s Woman who will find meaning and love in adversity . . . who will let go so that the children will gain the best of both worlds: an intact family in the suburbs (with meals, laundry, schools a walk away)



and ME, the indulgent, eccentric Mommy who lives in a transitional neighborhood in the city."

September 10, 1992

As if to make my feelings of loss surreal, I am spending more and more time at the hospital lately. I drove 16-year-old Mimi to the hospital last night. Although she has vacillated a little about parenting or placing, she has decided to place her baby with an adopting couple who live in Evanston. As soon as we got her propped up in bed, her bag of waters ruptured and there was no turning back. Impulsively, Mimi called the adopting mom who arrived at bedside in speed-breaking moments. The husband was to follow shortly. Mimi was dilated to 6/7 centimeters when she was admitted to St. Joe's, and she went quickly into transition—regular

and intense contractions—as soon as we got upstairs. Her telephone call was about her last coherent act.

When the adopting mom arrived, Mimi was already dilated to 8/9 centimeters. Mimi was in that nonverbal, animal stage and wanted to hold her vaginal opening each time she contracted. Bloody hand prints were everywhere, which was just a little unnerving in this day of HIV+ and AIDS. The nurses and I, and then the lady from Evanston and I, tried to hold her arms back. Holding Mimi back from touching herself, though, didn't seem natural to me. If holding and touching her vagina reassured her and made her feel comfortable, then why not? What would have happened to this "No Touching down There Ban" if she had delivered at home? But here in the hospital we were concerned about a double contamination: Mimi's hands spreading infection to the baby (with the birth sac now ruptured); Mimi's untested blood mixing with ours.

At some point I started to give the adopting mother delivery room instructions: a how-to in delivery room protocol and paraphernalia with booties, gown, mask, hair protection. Only one "extra" was allowed in the delivery room, and sometimes that one person had to show Lamaze labor coach certification to the L.& D. personnel.

Suddenly Mimi started to push, and everyone realized the baby was crowning—the baby wanted OUT. We quickly wheeled her into the delivery room. The baby was dropping fast! We couldn't get her feet up in the stirrups fast enough, and I had to hold her legs back (Job Description: "Must be able to arm press thigh muscle into submission") while keeping her hands from traveling "down there."

I lost track of the adopting mother, but right after delivery I found her outside of the delivery room in tears. She said the nurses had thrown her out of the room and threatened to call security if she didn't obey the regulations. I was exhausted and horribly confused. My own children had been snatched away from me, and now Mimi was placing her baby with a woman who was refused the right to see "her" baby born. It seemed that everything was just a little OFF!!

September 15, 1992

In the end Mimi decided to keep her baby, so it was probably just as well that that unknown suburban woman, that semi-stranger, wasn't in the delivery room when the baby was born. I mean, who was that person after all, and what was she doing lurking around a hospital delivery room in the middle of the night?

October 4, 1992

Today is the annual mass at Madonna. Two years ago, Paula, the executive director told me it was a "celebration of a woman's right to choose." I had just started working at M/SJ the week of the mass and she must have intuitively figured I was a Pro-Choicer. Back then, I wrote a letter to my New-Age, 80-year-old father about the mass. I probably embellished and exaggerated the "choice" part of the mass because he wrote back: "You wrote that every fall Madonna has a mass to celebrate 'a woman's right to choose.' Yes? How come? A Catholic outfit celebrating pro-choice? Do you mean it?"

My father was politically liberal but guarded about religious fundamentalists, which is where he put the Catholics. In fact my brothers and I used to joke that our parents would be more tolerant of an inter-racial marriage than a Catholic marriage. The debate was an academic, intellectual one, not a serious parental taboo and two of my brothers married Catholic women without any family recrimination.

I think the reason my parents were so sensitive to this Catholic question was because they were both born out of the country; my father's parents went to India (1904 to 1913) and my mother's grand-parents went to Santiago, Chile (1897 to 1950) (18). Both families had been involved with the Protestant "Evangelization of the World in this Generation," headed up by John Mott and Robert E. Speer. The Student Volunteer Movement (SVM), in partnership with the YMCA, encouraged global missionary work and every religious sect tried to out-do the other, such as illustrated by an excerpt from my thesis which includes part of a 1910 letter from my Grandmother Elizabeth Cole Fleming. (19)

This denominational (tribal) nature of the Protestants became competitive and fueled the women's missionary movement after the Civil War. It wasn't the fear that the Gospel would not be preached at all, but that it might be preached by others, that motivated this competition for souls. Or as Sidney R. Mead puts it in The Lively Experiment: The Shaping of Christianity in America, "It was not competition between those of rival faiths, but competition between those holding divergent forms of the same faith—and probably not the less bitter for being a family quarrel" (130). Elizabeth made a reference to this "family quarrel" in a March 2, 1910, letter: "We shall go out to the nearby

18 See: "A fascinating Human Record": Me Mum," a transcription of my collection of Browning/Crew letters, journals and public records (2011).

19 See my DePaul MA thesis, 2005: "With my pen directed home, 1895-1910." I transcribed more than 200 of my Grandmother Elizabeth's letters during her travels away from home.

villages at four o'clock. There are Christians in Amar Sidhu but no school for the children. It is Methodist ground. I wish it were ours!" (20)

Over the years however, as prophesied by my father, the M/SJ mass started to de-emphasize the "choice" part. The mass which "Celebrated Choice" turned into a "Celebration of Life" and then into a "Pro-Life Celebration." When M/SJ's executive staff and Board of Directors turned that last corner, most of the staff felt betrayed. Although the annual mass always had an unspoken mandatory staff attendance, many of us group care workers boycotted the Pro-Life one in 1993. I think this event was the final straw and was when we wrote out our grievances. Under the heading, "Inability to admit personal errors promptly, if at all," we wrote: "Requiring staff to be present at the annual mass but not stating so."

The political and personal overtones of the mass aside, it was nice to see some of the former residents and their babies. The mass was also a reunion. Colleen returned every year I was at Madonna, and her little daughter was a beauty. The agony she had over placing versus parenting would be buried for another decade or two. Victoria and Allison came to the mass also. Victoria who placed her baby with the "older" woman showed us her engagement ring and photos of her fiancée. I didn't recognize Allison. She was slender (not even skinny!) but her face was full; she didn't seem to have a trace of the emotional, diet-related problems of last year. Her aunt and uncle brought her from St. Norbert in Wisconsin. Unhappily, her father still won't talk to her.

Jade came. She and Paul were already on the outs. Jade looked absolutely radiant. Her hair was braided and wrapped around her head. She tended to her daughter effortlessly. I wondered where these young teens learned this most natural maternal bonding when their own mothers were drug addicts, prostitutes, maybe physically abusive . . . and almost always emotionally absent. (Nine months later, Jade ended up giving legal custody of her daughter to her maternal aunt.)

October 10, 1992

The Curse of Rachel's delivery lasted more than a year, but now that I'm in crisis about my own parenting rights and have limited access to my children, I have been in a delivery a month with teens who get pregnant easily and then make an impulsive parenting decision after a coin toss.

Octavia is a large, plain African-American teen. I think she is 17 years old. The most unnerving thing about Octavia is that she sucks her thumb . . . ALL THE TIME. She's a walking

20 *Ibid*, p. 20.

illustration of babies having babies as she walks to and from the bus with her thumb in her mouth, her forearm propped up on her hugely pregnant belly. When she's at M/SJ watching TV, she "worries" a little piece of cloth as she sucks her thumb. OK, I can't help wondering if she sucked her thumb and conceived her babies at the same time.

Yes, babies.

Her first daughter lives with her fraternal aunt. I don't know how frequently Octavia visits her. Octavia had the name of the first A/F tattooed on her forearm. The second A/F didn't like that so he doused the guy's name with perfume and set the fumes on fire. Of course, the fumes were still attached to Octavia's skin and she ended up with third degree burns. The St. Joe's staff, much to their credit, wanted her to visit the psych ward, but the M/SJ group care worker was able to bring her home. I disagreed with that decision. Couldn't Octavia have used a little psychological advice?

Octavia's bag of waters broke at 11:15 p.m., just after the shift change, and she delivered an hour later. Hmmm . . . Octavia has already had as many children as me in less than half the time.

October 23, 1992

My fifth delivery and my fourth in four months, was Opal, a 15-year-old African-American girl who delivered a month early. When we went off to the hospital at 1 a.m., I was angry with her because I thought she was simply dehydrated. Madonna's archaic heating system had already claimed a few midnight runs to the hospital, so I had written a large note on the bulletin board: "Drink more fluids!! PLEASE!!"

When we got settled at the hospital, her "auntie" came in to help things along. She was a nice woman about my age, maybe much younger but with more miles on her bones. She didn't have children of her own (was she sterile?), yet I could feel the special relationship she had with Opal . . . and Opal was grateful that she had come to the hospital. I showed the auntie how to get into her delivery room fatigues and gave her a quick Lamaze run-down with the stages of birth. I told her to stand at Opal's head if she felt queasy about the sight of blood, but I also warned her that the St. Joe's staff might not let her in the delivery room because she didn't have the Lamaze certificate.

Opal was in transition a long time. She was at 9 centimeters for almost forty-five minutes—an exhausting point to have labor stall. Her contractions were enormous, and with each one she wanted her legs lifted straight up in the air. The auntie took one leg, I took the other, and Opal would moan and pant against the contraction. Lights, camera, action. At some

point I looked at Opal's labor as though I were a movie director: there was something incredibly erotic, something surreal about her young black body contrasted against the white hospital sheets . . . with her legs thrown straight up in the air.

This delivery position looked absolutely convoluted to me. I had wanted to squat during labor, particularly with my second which was a "back" labor. I did NOT want to have both of my legs jutting up from the bed at a 90-degree angle. Latasha had wanted to be on all fours which many women seem to prefer (if given choices). I wondered how the miracle of birth had become so institutionalized that the laboring woman's comfort was of little importance. Giving birth, the most natural of human events, had become depersonalized and streamlined.

Margaret Mead's research has shown that women in a majority of non-European cultures (62 out of 76 surveyed) use sitting or standing position for delivery. Medieval women also preferred this upright position while in labor and used "a delivery chair" during labor.²¹

Finally when Opal was ready to deliver, it was 6 a.m. I won the bet this time. At 4 a.m. Opal was still dilated to 7 centimeters, and the nurses thought she would continue well into the morning. Incredibly, unlike with Mimi and that stranger from the suburbs, they let the auntie into the delivery room. I watched from the door, which actually was the best seat in the house. Opal's last contraction sent the baby flying, liquids and all. From my angle, the baby seemed suspended in midair for at least a second, and I worried whether the doctor would be able to catch it. Had I overlooked a safety net between the doctor and Opal? I didn't see anything but a shiny, hard tile floor.

Then, with her legs still up in that uncomfortable-to-me position, they checked to see if she needed stitches. A few. In recovery, all seemed OK. Auntie in tears of joy and I am exhausted. I have been up all night. Home to crash!!!!

October 31, 1992

Another Halloween night. Seventeen-year-old Precious is depressed because her boyfriend was arrested for gang activity. She thinks he shot someone, but we don't know the particulars because he is in jail and the street network hasn't produced the details yet. While the other residents had a Halloween party, Precious sat in her darkened room, her knees pulled up to her chest, head in her folded arms, rocking on her tailbone.

Pumpkins were carved last Wednesday night just after the house meeting. An M/SJ board member was able to get twenty-five pumpkins donated to the center; another was able to

²¹*Op. cit.*, S. Hammer, p. 290.

get some candy (just what they don't need!). Most of the jack-o-lanterns are the scary variety—my favorite. The group care workers dressed up in costumes and took the younger girls out trick-or-treating in the neighborhood. The house looks festive with ghosts, skeletons, pumpkins, and Indian corn all around.

November 2, 1992

Monday morning. The *Chicago Tribune* worked faster than word of mouth. "Alleged gang member denied bond in 3 North Side murders" was the headline. Precious's boyfriend was held without bond on charges that he killed three people and injured another during a ten-minute crime spree. Metro Chicago: Section Two, way back on page seven—long after other double witching pranks kept our Boys in Blue busy on an infrequent Halloween Saturday night of mischief. A normal Saturday night in the city could produce a flurry of gang activity, but the horror of having Halloween fall on a Saturday produced a night of living hell for most of the weaker street prey.

With a semiautomatic handgun Precious's 19-year-old boyfriend opened fire. The first victim tried to run away but fell during the gunfire. According to a witness, the A/F lifted Victim No. 1 up by the collar of his jacket and shot him in the back of the head three times. The A/F then turned on Victim No. 2 and shot him in the buttocks as he tried to escape. Immediate death resulted when the bullet pierced an artery. Precious's boyfriend drove two blocks, cornered the third man, placed the handgun before his left eye and fired once. Victim No. 3 died instantly.

The injured man survived eleven gunshot wounds: six shots to the right leg, four to the left leg, and one to his back. Sixteen gunshots in less than ten minutes. How many shots were fired at the victims' backs? Had Precious's boyfriend not heard of the Marquis of Queensbury's boxing rules for fair fighting?

The Assistant State's Attorney felt the murders were done in "a cold, calculated, premeditated manner." I guess I feel the same way. It gives me the creeps to think that Precious was intimate with this man/predator. What will she tell her child about the biological father when the time comes?

November 15, 1992

I realize I'm not reading the resident's biographies anymore. How many times must one read: FAMILY MEDICAL PROBLEMS: "Mom is a drug addict—Dad too." MOTHER'S OCCUPATION: "None." FATHER'S OCCUPATION: "Unemployed; was in pen—stealing; on house arrest—was on drugs also." The M/SJ group care worker has written additional

information on the Intake Forms, using margins and asterisks to say: "She doesn't want to be with A/F—he has been physically abusive in past!! He may want baby!!!"

One DCFS client "yearns to have her basic needs met without fear of loss, disruption or punishment . . . planning for the future may seem superfluous given that she views her future as precarious." This was a relatively mild coda to a case history that said when the resident was 14 years old, the mother was incarcerated for aggravated arson. The mother felt others were trying to hurt the family. When she thought people were trying to break in, she nailed down all the windows in the apartment. Another time, when she thought the landlord was trying to harm them, she set fire to his apartment building, which led up to the aggravated arson charge.

Is it unsettling to realize the mother never received psychiatric treatment for her phobias? At 2 a.m., when this particular resident feels creepy or vulnerable or has nightmares about the bogeyman climbing IN her second floor window, do I react clinically as though I've memorized her DCFS chart, or do I comfort her as a surrogate mom would when a child is scared in the middle of the night? I mean, should I say, "Your mother was NUTS, but you are safe here with me . . . the white stranger you see only at night, if at all?" A precarious future, indeed!!!

Typical profile of new resident:

Taneeka, 15, came into the system when she was 5 ½ years old and her older brother 8. The DCFS investigation revealed that her mother had not been home for days, men were in and out of their apartment, and there was no food in the home. Her mother is an alcoholic and father is on disability for a nervous condition from a head injury. Taneeka was raped repeatedly by an older cousin when she was 9-11 years old and later by a stranger when she was 13. She did not receive counseling for either violation, and neither man was charged because they were first-time offenders.

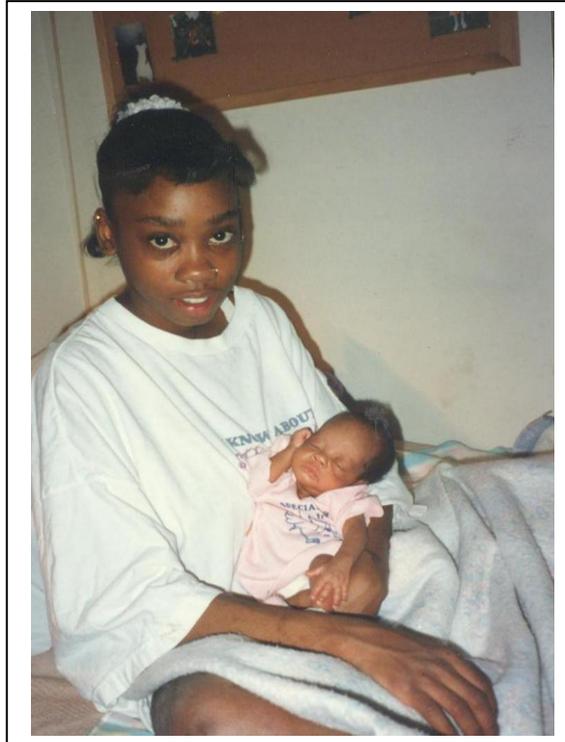
She first ran away from home after she graduated from the eighth grade. She told her social worker that her boyfriend "Sergio" (26) was shot four times and bled to death right across the street from her paternal grandmother's home. She reported it was due to a bad drug deal. "Sergio" was an "Elite" member of the "Insane Vice Lord" gang. Taneeka reports that at "one time" she was a member of the "Insane Vice Lords," but she is no longer.

Currently, she has been staying in her bed all day and refuses to go to school. She says that she is bored with school. She feels it is too easy to just go to classes, pass and get a diploma, and she resents being told to go. Taneeka likes cooking, dancing, and tumbling.

December 30, 1992

Sapphire, a bright, pretty 14-year-old African-American girl had a C-section. Poor little thing was sent home after four days so she could be home for Christmas . . . to take care of her mother's four other children. Sapphire had been a major caregiver for so long that when we were waiting at the hospital for her ride to the West side, her baby didn't cry for anything. Sapphire was right there, clear-eyed and shower-fresh with bottles, diapers, burping cloths.

I had felt completely turned inside out after my deliveries. Other mothers and I have felt certain a lobotomy was performed right along with our episiotomy. In exhausted agreement, fellow 30-something mothers would mumble that our much-needed brain cells, in fact—whole IQ points, rushed out with our breast milk. My two, five-day hospital stays after each ectopic pregnancy, complete with room service, TV, friendly visitors, get-well cards, flowers . . . now seem like luxurious vacations to the Heartland Spa compared to Sapphire's planned return to her mother's active nursery.



Sapphire and I waited at the emergency room at the hospital for her ride home with one of nuns from the shelter next door to Madonna. Sapphire, her sisters and mother had spent so much time at the shelter running away from the mother's abusive relationships that the nuns felt like a bonafide family to her. For one brief hour then, 14-year-old Sapphire would be treated with all the dignity and respect a new mom should get.

The 1992 Wish List:

WISH LIST

Everyone has a real or imaginary list of things they would like to have. Some items may be frivolous, others are necessities. The following is our Wish List. Are you the one able to grant us a wish?

- Roof top TV antenna
- Dictionary
- 25 Twin Size Comforters (Cream color)
- Help with creating a Video Library of popular movies
- White Acrylic Outdoor Planters for patio
- Word Processor
- Cubs Tickets!
- Games: Scrabble, Pictionary, Monopoly
- New Ping-Pong Paddles
- Box of Ping-Pong Balls
- Infant Health Care and Infant Development Cassettes
(Johnson & Johnson; \$24.95 each; 1-800-537-2336)
- Four Burner Stove

The 1993 Wish List:

MADONNA WISH LIST

Book Bags	Alarm Clocks
Umbrellas	Bottle warmers
Pens	Baby scale
Note books/Paper	Breast Pumps
Movie passes	Dish towels
Blockbuster coupons	Scrabble game
Pot holders	Crib bumper sets
Nylon duffle bags	Laundry baskets
Laundry bags	Picture frames
Infant snow suits	Videos/movies
Infant clothing, 9 - 12 mos.	
Treadmill	

The 1993 Wish List, when the residents could bring their babies back to M/SJ, will include:

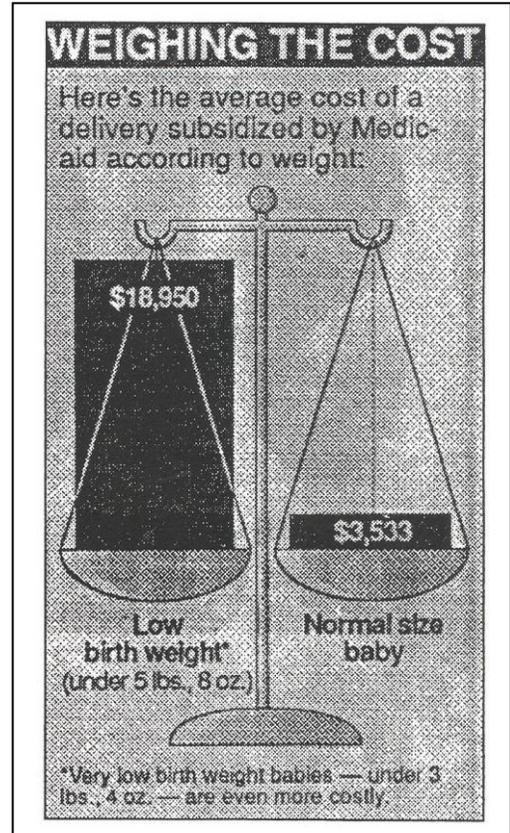
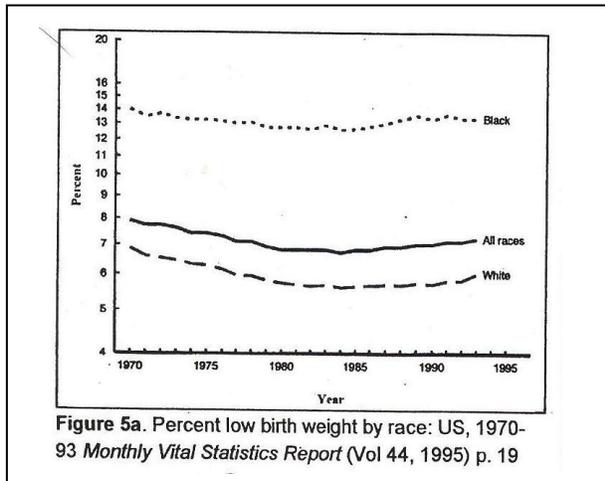
- **Infant snow suits & Infant clothing, 9-12 months**
- **Breast pumps & Bottle warmers**
- **Baby scale**
- **Crib bumper sets**

LOW BIRTH WEIGHT STATS

Figure 5A shows the overall rate of low birth-weight (5lbs, 5 oz) rose to 7.2 percent in 1993, the highest level reported since 1976. (22)

Fig 5B .shows the financial burden (23)

Fig 5A



Racism vs Race:

Age-specific low birth-weight rates for black births were at least 50% higher than white births for each 5-year age group.

The gains in survivability of very low birth weight black infants is offset by the higher frequency of VLBW births among blacks as compared to whites (3:1) (24)

Fig 5B:

- 7% of all deliveries in the U.S. are low birth weight babies—about the same as Albania, Chile and Turkey.
- In Chicago, 1990, 11% of all teen mothers gave birth to low weight babies

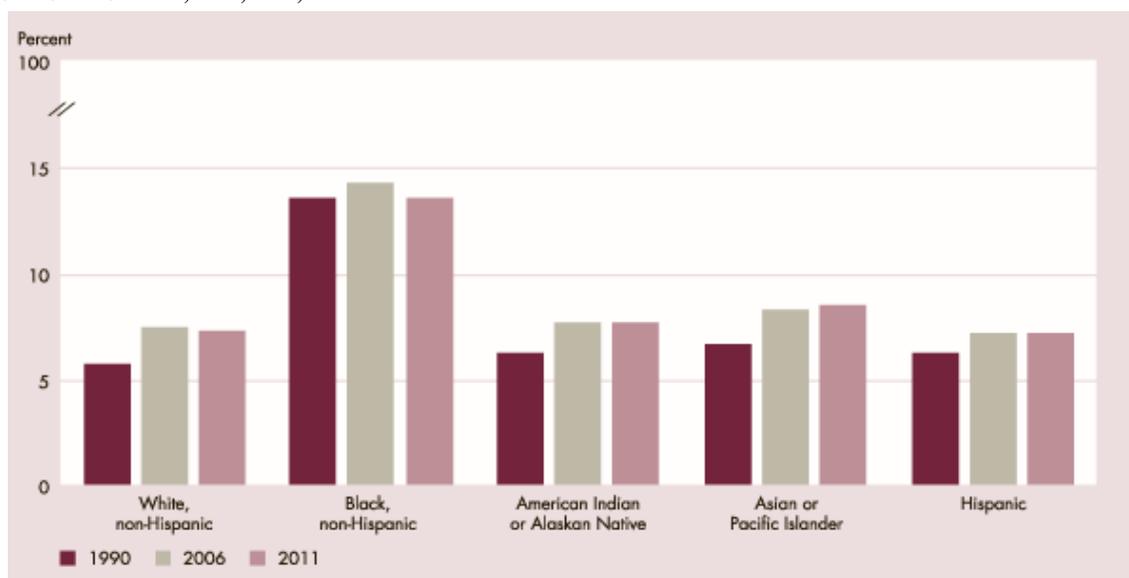
22. “Percent of low birth weight by race: US, 1970-1993.” *Monthly Vital Statistics Report* (Vol 44, 1995) p. 15

23. “U.S Low Weight Births Hit 7%” *Chicago Sun-Times*, 11 October 1992, p. 3

24. “Racial Disparity in Infant Mortality: The Persistent Challenge.” *Infant Mortality by Race and Ethnicity—Illinois, 1980-2007. Illinois Department of Human Services.* <<http://www.dhs.state.il.us/page.aspx?item=54940>> (July 2013)

UPDATE STATS ON LOW-BIRTH WEIGHT BABIES, 2011 (25)

INDICATOR HEALTH1.B: PERCENTAGE OF INFANTS BORN WITH LOW BIRTHWEIGHT BY RACE AND HISPANIC ORIGIN OF MOTHER, 1990, 2006, AND 2011



NOTE: (See source for disclaimer of racial breakdown.).

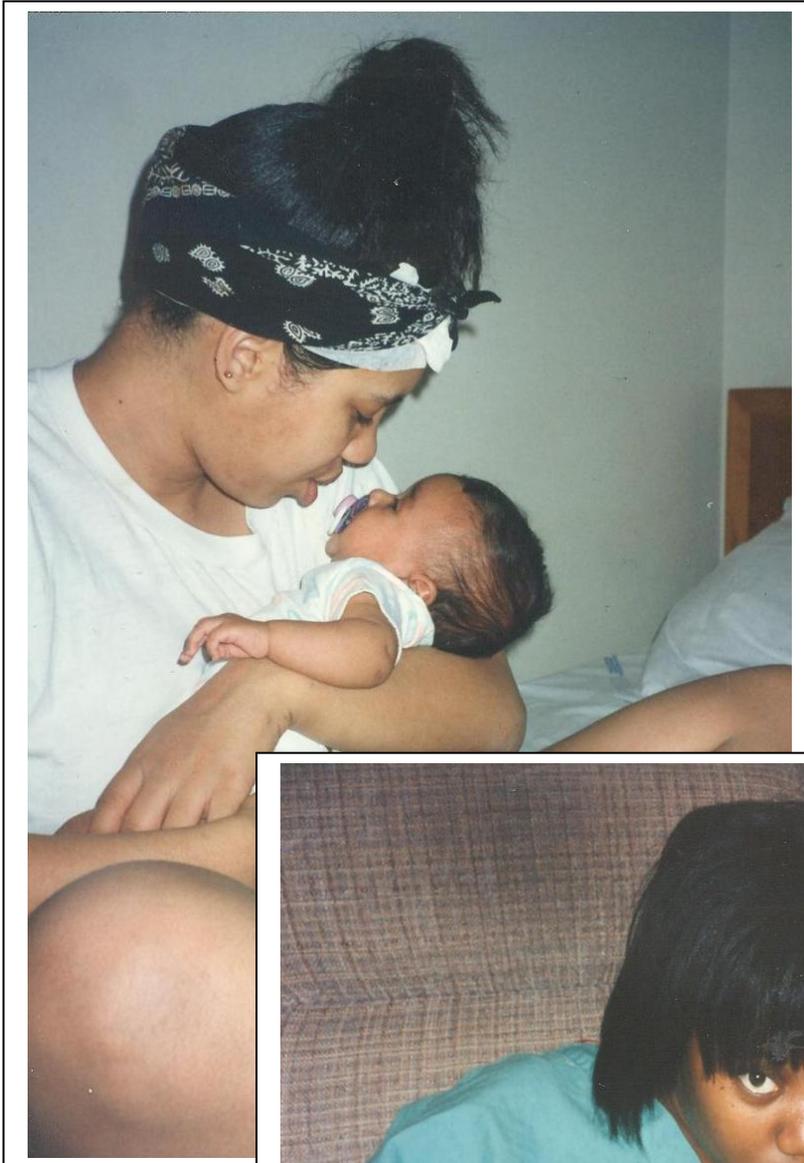
SOURCE: National Center for Health Statistics, [National Vital Statistics System](#).

- In 2011, as in earlier years, Black, non-Hispanic women were more likely to have a preterm birth (16.8 percent) than White, non-Hispanic (10.5 percent) and Hispanic (11.7 percent) women.
- The 2011 percentage of Black, non-Hispanic infants born preterm (16.8 percent) was the lowest reported in the three decades for which comparable data are available. The percentage of preterm Black, non-Hispanic births declined from 19.0 percent in 1991 to 17.4 percent in 2000, rose to 18.5 percent in 2006, but has declined fairly steadily since (16.8 percent in 2001).
- From 1990 to 2006, the percentage of preterm births increased steadily for White, non-Hispanic infants (from 8.5 to 11.7 percent), but has since declined reaching 10.5 percent in 2011. The percentage of preterm Hispanic infants increased from 11.0 to 12.3 percent between 1990 and 2007, but declined to 11.7 in 2011.

[HTTP://WWW.CHILDSTATS.GOV/AMERICASCHILDREN/TABLES/HEALTH1A.ASP](http://www.childstats.gov/americaschildren/tables/health1a.asp)

[HTTP://WWW.CHILDSTATS.GOV/AMERICASCHILDREN/TABLES/HEALTH1B.ASP](http://www.childstats.gov/americaschildren/tables/health1b.asp)

25. "Preterm Birth and Low Birth-weight." America's Children: Key National Indicators of Well-being. *ChildStats.com*. <<http://www.childstats.gov/americaschildren/health1.asp>> (July 2013)



CHAPTER SIX

January 4, 1993

Shortly after the New Year our first "legitimate" HIV+ (positive) resident was admitted. "Legitimate" meaning that others might have been HIV+ but without mandatory testing, we wouldn't have known for sure. We had an HIV+/AIDS in-service before Tiffany moved in. The AIDS nurse practitioner handed out condoms and pamphlets about sexually transmitted diseases (STDs). Basically the AIDS virus is spread through more than casual contact via direct blood/sperm contact. A cup of tainted saliva could be risky to a healthy person. (How do they know it's a cup and not just a few tablespoons of spit? Who goes around offering a cup of their sputum to strangers to begin with? And what about Lydia's impromptu liquid deposits in Olivia's food?)

At the end of our in-service, one of the social workers told the group a hair-raising story: Her husband volunteers for the Red Cross who did a blood drive at a city high school. Of the 200 high school students who donated blood, ninety-five tested positive for an STD, and many were HIV+.

January 8, 1993

A little more than a year ago, L. A. Lakers basketball great, Magic Johnson, announced his HIV+ condition. He later left retirement to play on the 1992 Dream (Basketball) Team in the Barcelona Olympics. AIDS had invaded our living rooms, and Magic had broadsided our collective perception that the disease hit only I.V. drug users and gays, such as the gossip and suspicions about Olympic diver, Greg Louganis. In the 1988 Olympics, Louganis had already tested HIV positive when he hit the diving board; did he have an obligation to disclose to doctors who treated him and to other athletes using the pool that he was HIV-positive? He did not discuss his condition publically until 1995 on the Oprah Winfrey show. By that time, he had lost all but one of his sponsors (Speedo swimwear).

Seven years after the virus was isolated and named, very few of my colleagues, friends or family members could say they didn't know someone with AIDS or someone who has *HAD* AIDS (meaning that the "someone" had already died). During the very long winter of 1991, three of my friends died of AIDS; my best friend's brother died in the fall of 1992 of the deadly disease. All of my gay male friends have watched loved ones or best friends dissolve into nothing right before their eyes. AIDS is one of those horrible diseases, like cancer, that strips away any and all vital human functioning. The ability to eat, void, walk . . . after a while, even

sitting up is just too hard. For more than a year one of my friends had a feeding tube inserted and catheter attached to his prone body. Finally we prayed for his death.



AIDS/HIV+

The AIDS epidemic does not appear to be slowing down. In 1990, 100,000 Americans died of AIDS; 3,000 in 1990 alone.²⁶ In the 1990s, AIDS became the sixth leading cause of death nationally among 15-24 year olds. In 1992, AIDS became the fifth leading cause of death in American women.

How was AIDS acquired?²⁷

45% IV Drug Use

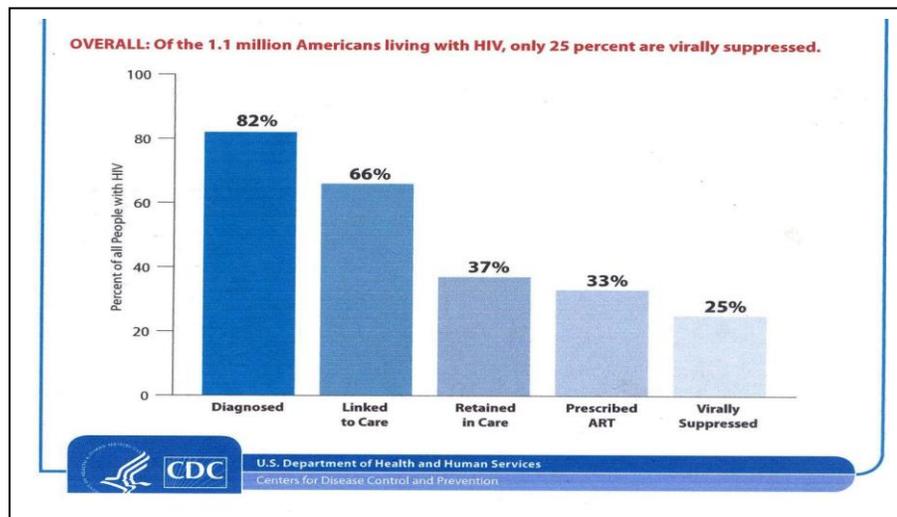
39% Sex with Men

11% Unknown

4% Blood Transfusions

[**AIDS Update:** In July 2012, the *Centers for Disease Control and Prevention* released a comprehensive analysis showing that

- only one-quarter of the 1.1 million Americans living with HIV have their virus under control
- that African Americans and young people are least likely to receive ongoing care and effective treatment (28)



²⁶"The First 100,000 AIDS Deaths," Update, *Family Planning Perspectives* 23 (March/April 1991) p. 53.

²⁷"A Statewide Action Plan for Improving the Health of Adolescents in Illinois," *Illinois Caucus on Teenage Pregnancy* (Illinois Department of Public Health and United Way of Chicago, 1994) p. 5.

28. *CDC Fact Sheet: HIV in the United States: The Stages of Care.*

<<http://www.cdc.gov/nchhsp/newsroom/docs/2012/Stages-of-CareFactSheet-508.pdf>> (July 2013)

January 10, 1993

I became concerned about HIV-and-Me when two things happened: Illinois Masonic Hospital had several HIV+ emergency room procedure scares, and Elizabeth Glazer (wife of actor, Paul Michael Glazer of Starsky and Hutch,) announced she had received AIDS through a blood transfusion. Not only that, she unknowingly passed the virus on to her nursing baby who was now HIV+.

Nearly 15,000 babies were born with HIV from 1978 to 1993; by 1994, one-fifth of them had already died.²⁹ By the end of 1995, AIDS will have killed the mothers of 45,000 U.S. children and teenagers, 16,000 in New York City alone. In Chicago, 3,000 parents are dying or have died of AIDS leaving 8,000 children without parents.³⁰

HIV-and-ME. Back in 1983, at the Illinois Masonic Hospital, I was given three units of blood when my second ectopic pregnancy ruptured my ovary. In the early 1980s Illinois Masonic was considered part of Uptown (and therefore transitionally gay) and was not the trendy Lakeview it would later become. Anyone (I.V. drug user? prostitute?) could have donated the blood that is now part of me. Who knew to test blood for HIV back then? Then, in the early 1990s, Illinois Masonic was in the AIDS news twice in a month: a woman who was receiving a gynecological exam at the clinic was treated with swabs that had been used on an HIV-infected patient, and two weeks later, two children were pricked with a syringe from a medical waste container. No one knew if the syringe had been used on an AIDS patient or not.

At that point, I mustered up all of my nerve and went for testing at the free clinic on Clark at Diversey. It seemed a cliché to venture into the epicenter of the gay world to get an HIV test. ("Where has that needle been? Is it sterile?") I waited a whole day after my results were due back to return to the clinic . . . three weeks and one day of agony during which I died twenty-two times.

The results were negative.

Even though I had wonderful health insurance from the CBOT, most of my colleagues in the break room believed that someone's insurance company could drop a customer for merely HAVING a HIV test. Rhetorically thinking, would an insurance provider want to carry insurance for someone with "risky" sexual habits? It was a Catch 22.

²⁹Daniel Daley, "Reproductive Health and AIDS-Related Services for Women: How Well Are They Integrated?" *Family Planning Perspectives* 26 (November/December 1994) p. 264.

³⁰"AIDS and the Motherless Child," Update, *Family Planning Perspectives* 25 (March/April 1993) p. 50

January 15, 1993

Tiffany is an 18-year-old Caucasian girl from a small town in downstate Illinois. She has been HIV+ for five years. She was raped by an infected man when she was 13 years old.

Tiffany described a prototypical rape case: the man approached her as she walked home from school and said her mother had sent him to drive her home. A few blocks later he pulled his car behind an abandoned building. As he raped then sodomized her, he told Tiffany his mission: to infect as many women as he could with HIV+ before he died. When the man was finally arrested, he confessed to raping and sodomizing more than ten women and girls. Although none of the victims became pregnant by this knuckle-scraping gorilla, all tested positive for HIV: Mission Accomplished.

As sorry as I felt for her, Tiffany was not very bright by any standard. In addition, she was terribly needy and she hovered around the staff office day and night. When she started to have premature contractions, we could not get her to drink more water. She said she didn't like water and would only drink carbonated soft drinks. Tiffany didn't like brushing her teeth either, or bathing, or changing her clothes. Basically, it took a supreme effort to bond with her, and one could not help wondering what the A/F was thinking when he hopped into bed with her. So far the A/F tested negative for HIV.

The unbelievable fact about this unlikely couple was that they already had a 2-year-old baby boy. Their son was born with the HIV virus (meaning his blood tested positive) but after six months his blood chemistries had switched to HIV negative. To me, going from HIV positive to HIV negative sounded like a contradiction in death terms. Does AIDS EQUAL DEATH . . . or not???

January 21, 1992

Of course, when a mother without HIV+ nurses her baby, the mother-to-infant hormonal protection against infectious diseases (mumps, measles, chicken pox . . .) can increase to six months or more. For this reason, and for a whole long list of bonding reasons both psychological and physical, breast feeding is encouraged . . . unless, of course, the mom is HIV+.

Tiffany's son shed her deadly disease, along with her protective antibodies, by his sixth month. She hoped this would be true with her unborn daughter. (Sex determined by ultrasound testing.)

January 22, 1993

For Tiffany the bigger hope is that her daughter has not been infected by the AIDS virus in utero. The smaller hope is that Catholic Charities can find a place for her to live after the baby is born. Tiffany's son and the A/F live with his parents, who do not like Tiffany or the horse she came in on. In fact, the reason Tiffany had moved to Chicago in the first place was because the A/F's parents refused to allow her to visit their home after they found out she was pregnant again.

Obvious questions to this sensational tabloid would be:

- 1.) Wasn't the A/F responsible for his own personal sexual liaisons—not his parents?
- 2.) Where was Tiffany's biological family?
- 3.) How could a mother's visitation rights be discarded so matter-of-factly? (A particularly sensitive subject for me, as my ex-husband's fiancée had called the police on me when I tried to visit my children after school one day shortly after their move to the far suburbs.)

February 2, 1993:

Shannon came to Madonna to eat and get fat. She was referred to Catholic Charities from an emergency shelter the week of Thanksgiving. Shannon, 21 years old, is a black-eyed Irish woman with a huge mane of hair that sometimes is unruly and wild, sometimes shimmering with blue/black highlights. I would have thought the peaceful, ample grounds and relative ease of the old convent would have jump-started Shannon into constructive planning about her future, but I guessed wrong.

In all ways she seems bright and with it. We have nicknamed her "Junior Staff" because she has an opinion and an answer about nearly everything, which makes her most recent emergency shelter venture a bit of a puzzle to me. The details are sketchy, but in unguarded moments she will murmur something about the A/F, an African-American man who lives on the South Side with a new girlfriend. It seems he lost interest in Shannon (like Butch did with Gina) in direct proportion to her expanding girth and impending delivery.

In a perfect system Shannon would have received psychiatric counseling. Why was she unable to make "a go" of things? Not quite a "victim" of our paternal society or of a specific man, Shannon seems content letting others make her life happen rather than taking an active part in it herself. Minus the heroin addiction, Shannon reminded me of the voiceless Wendy who made a placement decision by default, three months after her daughter was born.

In this imperfect system, Shannon was somehow able to get right up to delivery without a plan AND three weeks behind in rent. Perhaps because she was so "other" focused, so gregariously extroverted, she slipped by the social worker's scrutiny. Maybe because she always offered to make dinner, take on extra house chores, and listen to the younger residents, staff unconsciously backed off on the standard interrogation about her resume and job interviews.

In short, she was good company . . . until her daughter was born and the two had nowhere to go. By some fluke of fortune, the baby was born with a viral infection and needed to stay in the hospital for ten days. Shannon was forced to be somewhat introspective when she was discharged alone from St. Joe's, empty-armed and plan-less.

February 8, 1993

Complicating everything has been the sudden interest the A/F has shown. Sexual interest, yes. He teased her with the promise of a get-away weekend in a downtown hotel and a post-maternity shopping spree on Michigan Avenue. No interest, however, in child support or food and shelter for Shannon and baby. Has he left the other woman? Is the other now pregnant? How many flowers has he pollinated?

When staff questions Shannon, she shuts down emotionally. The baby gets out of the hospital in three days. Where are they going to live? At this point, Shannon shrugs her shoulders and says, "I guess we'll move back into the shelter."

February 14, 1993

A volunteer nurse from Rush-Presbyterian Hospital offered to be Tiffany's labor coach. Tiffany delivered during a late January snow storm and moved back downstate almost immediately. The A/F's family weakened and let her stay with them until public aid could find an affordable apartment for mother and newborn daughter.

Long before public aid could implement the plan, though, we heard from Tiffany. She was in tears. She told Linda she contracted genital herpes from the A/F. It turned out that not only had the A/F been unfaithful to Tiffany here in downstate Illinois, but he also had a wife and child in Mexico City. Has he visited his other family lately? Was he able to spread this deadly love message south of the border? Is he an International Sex Weapon? Has the guy not heard of condoms? And did his parents still blame the women in his life for leading him astray?

And what was he able to pass onto the woman who gave him the genital herpes?

February 20, 1993

On the heels of Tiffany's herpes news, another resident came back from the St. Joe's clinic saying that she had a bladder infection. When she brought her medicine to the staff office (where the teens kept all of their prescription drugs including their HUGE vitamin pills with iron), the group care worker noticed that the medicine was tetracycline and not the usual sulfa drug used for urinary tract infections (UTIs). When staff called the clinic to double-check the diagnosis, she found that our young resident had chlamydia, not a bladder infection. Chlamydia is a bacterial infection that can cause pelvic inflammation disease (PID), a very serious condition often requiring hospitalization and I.V. antibiotics. Chlamydia trachomatis infections are common in sexually active adolescents and young adults in the United States. More than 4 million chlamydial infections occur annually. (31)



SEXUALLY TRANSMITTED DISEASES (STDs)

STDs have become so rampant among patients in some family planning programs that providers worry that their clinics are turning into STD clinics. Some agencies now spend more money and time on medications than on birth control methods. Every year 12 million Americans acquire an STD; one-quarter are teenagers.³²

During the 1980s, Americans over 20 years old had 100,000 million cases of STDs. They also had 25 million unplanned pregnancies, 12 million abortions, 8 million unwed mothers (2 million teenagers). These rates are the highest of any industrialized country in the world.³³
[Update on STDs: CDC Snapshot: 2011(34)]

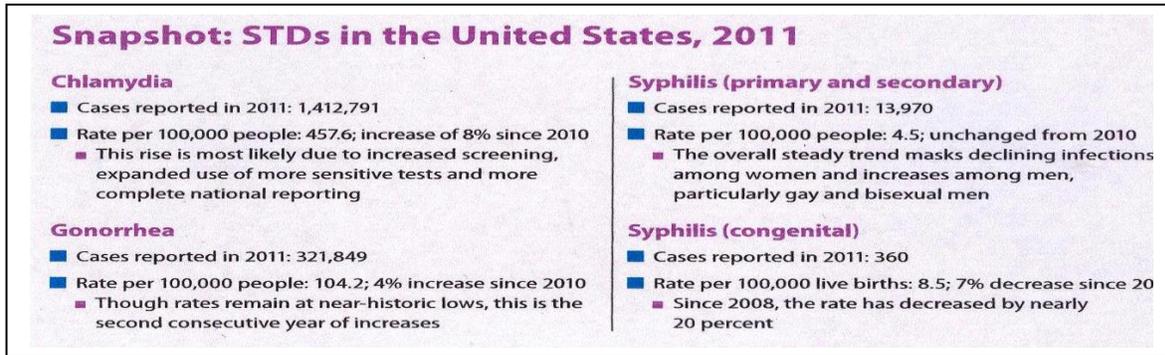
31. *Centers for Disease Control and Prevention*. Recommendations for the prevention and management of Chlamydia trachomatis infections, 1993. MMWR 1993;42(No. RR-12).

<<http://www.cdc.gov/mmwr/preview/mmwrhtml/00021622.htm>> (July 2013)

³²Patricia Donovan, "Family Planning Clinics: Facing Higher Costs and Sicker Patients," *Family Planning Perspectives* 23 (October/November 1991) p. 198.

³³*Op. cit.*, M. Males, "Poverty, Rape," p. 408

34 . *CDC STD Trends in the United States, 2011*. 2011 National Data for Chlamydia, Gonorrhea, and Syphilis. <<http://www.cdc.gov/std/stats11/trends-2011.pdf>> (August 2013)



Economic Costs: \$16 billion in healthcare costs a year. (One-half of the 20 million new cases a year are ages 15-24.)



March 3, 1993

The photos of a trim 15-year-old Zoey with long, blonde hair laughing with her school chums seem miles removed from the 16-year-old pregnant Zoey lying on a bed at the Madonna/St. Joseph Center. Miles away and many, many pounds away. Zoey's body has betrayed her. The reason she is lying on her bed with her feet elevated on a stack of pillows is because she has toxemia.* Toxemia, also called eclampsia, started in her 26th or 27th week at the beginning of her third trimester.

The abnormally high fluid retention (edema) has caused her blood pressure to soar, which in turn, has produced blinding, crippling headaches. Her feet sometimes turn blue because of the bad circulation caused by this water weight gain, and her toes puff out sausage-like. Incredibly, despite her weight gain, fluid discomforts, shortness of breath and headaches, Zoey can still laugh at herself. She looks down at her fat little toes and says, "This little piggy went to market, this little piggy stayed home."

March 10, 1993

Zoey was scheduled to have her labor induced (by I.V. pitocin drip) this morning. We arrived at the emergency room at 5:30 a.m. and were taken right upstairs. Zoey had pre-registered so there were no paperwork delays in the Admitting Office, which is often a maddening tangle of bureaucratic forms crisscrossing and zig-zagging over insurance responsibilities and next-of-kin.

Zoey's mother was due in at 9:30 or 10:00 and would take over as the labor coach. In an effort to make Zoey as comfortable as possible, the birthing room was reserved for her. I hadn't

been in the room officially before. The room seemed like a clean hotel room: a private bathroom, sofa, ample closets plus a few abstract, pastel prints of women engulfed in their robes drawn by a Southwestern artist I recognized but couldn't quite name.

Zoey knew all of the doctors and all of the nurses, and all of the doctors and all of the nurses knew her. She had been on weekly and then twice-weekly O.B. visits for over a month now. All was well for the first few hours of the pitocin drip. Sometimes the monitor would show a contraction wave, but at 9:00 she still didn't feel any contractions. The wonderful thing about Zoey was that she kept her humor right up to delivery. Every doctor or nurse who came into the birthing room would first go to the monitor, grab the tail of the contraction strip and then study it. As they did this, each said (looking at the paper strip in his or her hand), "How do you feel?" or "How far apart are your contractions?" . . . and Zoey would say, "Me? Or the machine?" We joked about her contractions or lack of. When the machine said she had one and the wave stretched across the top of the strip, Zoey would be oblivious to it as she watched *Oprah* on TV. Sometimes she said she "felt something" but there would be no movement on the strip at all. Only after her mother had arrived and I was leaving, did she say, "Hey! I FELT that one!!"

Modern technology had joined Lamaze to produce a labor and delivery our great-grandmothers would not understand or recognize. The Lamaze movement, in fact, was an effort to move away from my mother's type of labor and delivery when most women were heavily sedated at the first signs of discomfort. My mother's scopolamine-induced deliveries produced a "twilight sleep" during labor--although a painless one to be sure. Scopolamine, (introduced in the early 1900s and used during childbirth well into the 1960s), is an alkaloid of belladonna; given with morphine the combination can cause delirium, hallucinations and uncontrolled behavior sometimes resulting in injury if the mom is not supervised and restrained. My mother shared a rather unsettling hallucination she had from one of her "twilight sleep-deliveries" (I hope not mine!) when she WAS a bottle of champagne "popping" on delivery.

Regarding the modern technology side of Zoey's delivery (a baby boy at high noon), I had a deja vu experience at the other end of the life spectrum when a friend's mother was put on life-support following a massive stroke. Monitors recorded her heart contractions and lung operations; her blood pressure, pulse, and body temperature were likewise displayed, watched, analyzed.

Soon a decision had to be made: she was not "really" alive without a brain wave, yet her chest heaved up and down with each "breath" the artificial lung machine took (made?). When it

came time to let her die, to "unplug" her from this world, all in the room watched the heart monitor as her heartbeat gradually slowed down and then stopped.

When did she "really" die? Two days before when she lapsed into a coma? Or when the machine said she did?

March 20, 1993

The winter has been a long one. St. Patrick's Day in Chicago is almost a high holy day with the St. Paddy's Day Parade and the wearin' of the green—which includes the Chicago River itself, when bright, orange dye turns emerald green when it hits the water. But last Wednesday was wet and cold, the roads a sheet of ice. Like New Year's Eve, even without bad weather conditions, St. Patrick's Day is a motorist's nightmare when alcohol is factored into the equation.

This year my friend Polly Kelly, of Kelly's Pub in DePaul, invited me and the kids to ride IN the Kelly's horse and buggy, IN the parade (wave royally) and then join them after the parade for a huge St. Patrick's Day Irish party (shamrocks, Irish step dancers, corned beef and cabbage, green soda and beer) at a downtown hotel. I drove the kids back to the suburbs late and was glad I had been able to switch a shift with a co-worker at M/SJ.

I was doubly glad that I switched shifts when I found out what I had missed at Madonna. St. Patrick's night turned out to be a nightmare for the overnight staff when one of the DCFS teens decided to stay up past curfew. What started out as verbal jostling: "Turn off the TV and go to bed." "Says who?" "Says me, because I say so," ended up as a knife-threatening exchange of egos. Plants in the hallway were pulled off the landing, and a hole was carved in the wall. The police were called, the kitchen knife removed from the girl, who was taken away to an emergency shelter. She had wanted to go to the emergency shelter (ESC) from the beginning, so I guess she won that battle.

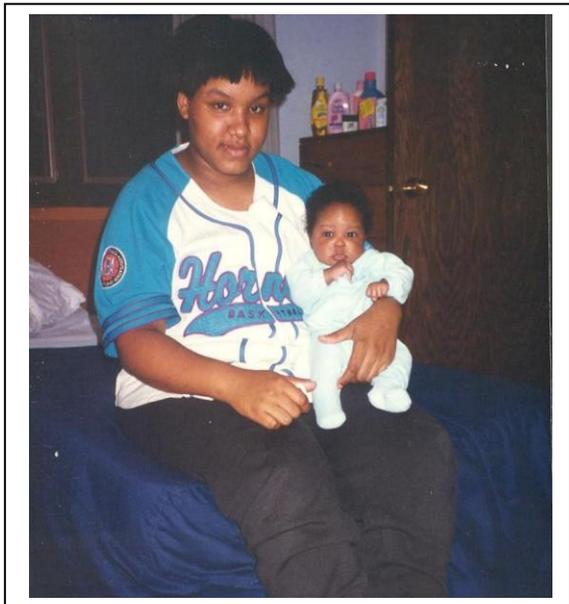
Although tempers had escalated before, this was the first physical threat with a weapon that I knew about. A not-so quick look around the kitchen revealed a cornucopia of disaster at every turn and in every drawer. Madonna had an amply stocked kitchen with at least a dozen large knives tucked away. Up to now my thoughts about the kitchen utensils had been to keep them from being stolen—not to worry about a resident playing Zorro with them. But more often now, particularly with the more volatile DCFS clients, the residents would get into verbal, pushing matches against each other. Jameka was a formidable foe as were Lakeisha and Karla, but Shannon, Mimi and even funny Zoey had violent, loud tempers also.

Madonna was beginning to show the wear and tear of this more physical group of teens. The wallpaper in the living room was peeling and the carpeting throughout had dark stains. The

sofa in front of the TV had lost its firmness, and each of the lazy boy chairs tilted off to one side when the legs were in the up position. The wall spaces around the two public telephones on the second floor had become a maze of graffiti: a mix of old and new messages, scraps of telephone numbers, boy's names and profanity have been scratched into the walls themselves. The cute little floral note pads with attached pens (on our Christmas wish list to the M/SJ Board of Directors) had long ago been borrowed or removed. In truth, they were yanked off their moorings almost immediately.

March 22, 1993

The interesting part about Aretha, my over-night substitute, was when I asked her what payment she wanted for taking my shift. She said, "A date." Well, ok, I'm not the only one looking for a date, but if Aretha can't find a date, I'm in good company. She's a bright and beautiful black woman who is in graduate school at the University of Illinois School of Social Work. So, the next evening, I went to my land of men at the CBOT, and thought I knew the perfect man—a handsome black trader who drove a snazzy red car. I asked Fernando if he wanted a date with a beautiful black goddess, and then I described her. He looked at me sideways and said, "That's Aretha. She's my first cousin." More than having my two separate gender worlds collide, I felt finally assimilated into Chicago, my adopted city, and I could find inappropriate dates for random family members.



Shortly after the kitchen knife episode, one of the adult residents said her room key was missing and she couldn't find her checkbook. The resident suspected another adult who suddenly had enough money for take-out food and new clothes. Room checks for more than just cleanliness were becoming routine at Madonna. A room check was made, and the missing checkbook and Jewel card were found under the trash can liner. Fifty-three boxes of Avon jewelry donated by a M/SJ board member were also found in a giant garbage bag in the resident's closet.

The resident was arrested for forging another's signature on checks. Charges were also filed by M/SJ for theft of property. For the second time in three weeks a Madonna resident was escorted out in handcuffs. I remembered the feisty Cassie from my early days at M/SJ, the young woman who was arrested at Madonna for stealing from the family for whom she baby-sat. I wonder how much stuff does make it out the front door.

In rebuttal, the residents at the next Wednesday House Meeting claimed they saw staff take food out the door all the time. The fact that a residential home on the South Side was in the local news for exactly this issue didn't help communication channels within the house. TV newscasters interviewed the residents of this South Side home up-close-and-personal and they all said staff took the best meats and vegetables home to their own families.

April 7, 1993

Staff morale has cycled down again; almost as low as when Karla acted out with the bleach. Linda took a maternity leave just before the physical violence and stealing began. At a staff meeting we decided to interview potential residents more thoroughly, more critically. Off the record, we wished we could ask, "Do you know Jameka? Or Lydia? Or Lakeisha? Karla? Ginger?" And if "Yes," we'd circular-file their application.

Linda had always said we wouldn't take in residents who had less than a 77 IQ, but social and emotional intelligence are hard to measure. How is a person's stress level factored in? Maybe on test day Cynthia was having an incest flashback, or Precious's boyfriend had made threatening telephone calls, or the bogeyman tried to climb in the window during the night

April 18, 1993

With complete serendipity, and almost overnight, we had a new group of women at Madonna who were almost as cohesive as Madonna's "Golden Age" with Victoria, Allison, Beverly and Elizabeth. As we still needed private referrals, M/SJ began an outreach program with a West Side Hispanic drop-in center. Mercedes, Marita, and Rita were all of Latino

descent—not "Hispanic," I was later told, as not all Spanish-speaking people are from Spain. (Are all African-Americans from Africa? Am I still considered Scots-Irish six or seven generations after the fact?)

Early spring was also the height of "Puzzle-mania." Huge 1000 piece puzzles were spread out on the table in the room with the bluish wallpaper, aka the Blue Room. These took a cooperative effort, often until late at night, and I was the worst offender. I would make them all promise NOT TO LET ME EVEN SIT DOWN TO PUT IN ONE PIECE . . . and we would laugh about the nature of addictions . . . "puzzle-mania" being one of the most sleep-depriving of the mind drugs.

Cinco de Mayo, 1993

Mexico's national holiday marks the Battle of Pueblo in 1862, when Mexican troops defeated the invading French forces of Napoleon III. Chicago's Hispanic population is one of the largest in the United States; most of the city's public information is given in both English and Spanish. I learned to drink margaritas during this holiday—in the name of research, of course.



HISPANIC BIRTH RATE

Hispanic women have higher birthrates at all age levels than do non-Hispanic white women, but particularly for Hispanic teen mothers.

In 1990, the birth rate was:

- 100 per 1000 for Hispanic teenagers compared to 55 per 1000 for non-Hispanic teens.
- During 1986 through 1990, the Hispanic teen population increased 12% while the non-Hispanic white teen population declined 10% ³⁵.
- Thirty-two percent of white teen births in 1993 were to Hispanic women. ³⁶

Latin women are a fertile group:

- They have children at a rate almost 40% higher than that of non-Hispanics.
- In 1988, the birthrate for Hispanic women was 94.0 per 1000 compared to 67.6 per 1000 for non-Hispanic woman.

³⁵*Op. cit.*, *MMWR*, (Vol. 42, 1993) p 25.

³⁶*Op. cit.*, *Monthly Vital Stats Report*, Supplement, (Vol. 44, 1995) p 4.

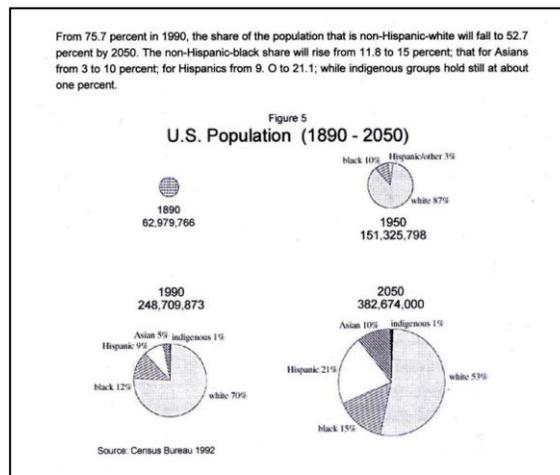
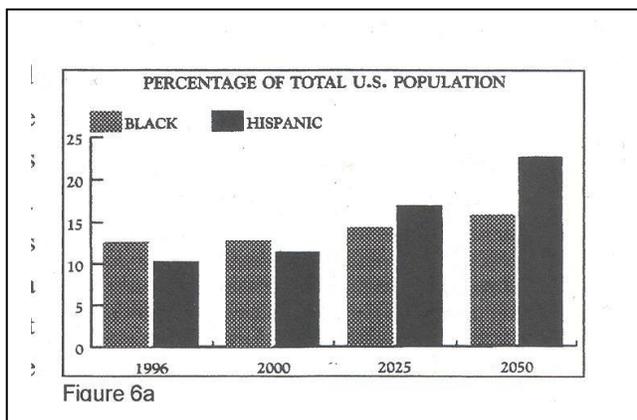
- The fertility differential by education is largest among women who are not high school graduates (126.5 births per 1000 Hispanic women vs. 75.0 births per 1000 non-Hispanic women).³⁷
- In 1988, Hispanic women represented 8% of all U.S. women but had 11% of all the births.³⁸

Today, as a minority group, Hispanics represent a smaller percentage of the total U.S. population than do African-Americans (10% vs 12.5%) but demographic predictors indicate a change at the turn of the century.

According to *Harper's Magazine*, if current fertility rates continue, by the year 2025 the Hispanic population will be 17% of the U.S. population while the African-American percentage will be 14.5%; by the year 2050 the ratio will be 22% Hispanic to 16% African-American.³⁹ (See chart.) [For surprising updated stats, see graph at end of chapter.]

“Our Next Race Question” Harper’s, 1996

Census Bureau Projection, 1992 (40)



³⁷"Hispanic Fertility Rate 40% Higher Than Rate of Non-Hispanics," *Digest, Family Planning Perspectives* 22 (May/June 1990) p. 136.

³⁸*Ibid.*

³⁹"Our Next Race Question, The Uneasiness Between Blacks and Latinos," *Colloquy, Harpers*, (April 1996), p.57
40 [Leon F. Bouvier, John L. Martin](#). Four Hundred Million Americans!: The Latest Census Bureau Projections. *Center for Immigration Studies*. (January 1993). <<http://www.cis.org/CensusBureauProjections-400MillionAmericans>> (September 2013)

May 8, 1993

Mercedes, 18 years old, is loud and opinionated. Second-generation born in the United States, she speaks without a hint of a Spanish accent. And speak she does, almost incessantly. Mercedes boasts about how much beer she can drink, how many boyfriends she has, and about what her family is able to give her: a car when she turned 16, clothes, jewelry, an option to keep the job she got through M/SJ, and live rent free in one of her father's apartments. Her mom will even baby sit. Life for Mercedes was going to be a bed of roses.

Although the St. Joe's doctors and nurses have talked to Mercedes about her diet and low weight gain during pregnancy, Mercedes continues to eat fast-foods and cookies if she eats anything at all. Vanity and pregnancy do not mix. Zoey could have told her that; but because Zoey decided to parent her baby, Zoey and Mercedes didn't overlap at Madonna. They missed each other by a couple of weeks.

In fact we rarely discussed placing Madonna babies for adoption anymore. The last women to place their babies lived at M/SJ more than a year ago. Remember Cynthia with the lithium imbalance? Or Allison with anorexia nervosa? Beverly finally did place her daughter with the birth defect after three months of soul-searching, and of course, we all still wanted to be a part of Elizabeth's million dollar Christmas adoption way back when. Someone else might have placed a baby within the last year; but the women who would have even considered the other option, like Mimi or Shannon, ended up parenting because they were unable to make any decision at all.

May 10, 1993

Mercedes continues to party hard on the weekends. She claims she has stopped drinking, but she continues to smoke cigarettes on the second floor smoking porch. One weekend she came back to Madonna with a rose tattoo on her shoulder; another weekend she had her eyebrow pierced. Mercedes does not let her parents see these symbols of Americanization, signs of her growing independence. She had to skip a few home visits until her earring could be safely removed.

Mercedes' parents were both born in the United States, but her maternal grandparents moved back to Mexico years ago, and her paternal grandparents had separated. Mercedes has the option of moving down to Mexico with her grandparents after the baby is born, but she already knows the yesterday pace South of the Border. (Or is that the *mañana* pace of tomorrow?) Besides, what would her *abuelitos* think of her tattoo?

Mercedes's family has embraced the American Dream and done quite well. Her father is a self-taught electrical engineer who owns and runs several heating and air conditioning businesses. Her mother worked hard next to her husband early on when the times were rough, but now she has the luxury of weekly manicures and hairstyling, and daily luncheons with friends after shopping. She doesn't always understand her daughter, but she has encouraged Mercedes to bring the baby home after delivery. "You've made your bed, now sleep in it," is her philosophy.

Maybe if the mom weren't so self-focused and the dad weren't so tied up in his work world, they would notice that Mercedes wasn't gaining the weight she should. Madonna staff and the Catholic Charities social workers have tried to meet with Mercedes' parents, but the meetings have all had to be rescheduled at the last minute. Right now we are at an impasse with Mercedes.

May 12, 1993

Fifteen-year-old Merita, on the other hand, is a beautiful, soft-spoken Mexican teen who still struggles with her English. She was born in the northern mountains of Mexico fifteen years ago. Fourteen years ago with her entire family, she moved to Humbolt Park on the West Side of Chicago. Although the neighborhood is gang controlled, the family has held together.

In this context it is hard to imagine how or why Merita became sexually active, and her pregnancy is hush-hush outside of the immediate family. She does not talk about the A/F; she giggles and acts embarrassed about any and all sexual innuendo. Merita follows Mercedes around the house and although she tries to imitate Mercedes's speech pattern, she is puzzled about the eyebrow ring but thinks the rose tattoo is beautiful.

May 18, 1993

Mercedes and Merita were due within a week of each other. Merita weighed twenty pounds more than Mercedes. I don't think the three-year age gap had as much to do with the differences in their pregnancies as did Mercedes' family's acculturation to the United States, a whole generation ahead of Merita's family. However, the three-pound weight difference between the two babies reflects sad statistics about Mexican-American babies born in the United States. The *Monthly Vital Statistics Report*, Supplement, October 25, 1994, says this about low birth weight for Hispanic women:

The very favorable pregnancy outcome, as measured by low birth weight, for Mexican women is an anomaly. The prevalence of traditional risk factors, including elevated rates of teenage childbearing, low educational levels, and inadequate prenatal care, would appear to place Mexican infants at great peril.

Interestingly, the rate of low birth weight babies for Mexican mothers born outside of the U.S. (5.1 percent) is substantially lower than that of their U.S.-born counterparts (6.5 percent). This suggests that the protective practices of Mexican mothers born abroad, which contribute to their good birth outcomes, may not be sustained in the second generation of Mexican mothers (born in the US).⁴¹

May 20, 1993

Maya, 17, was in the group too. She was a beautiful Filipina teen with long, shiny black hair and four older brothers. As seems typical of Asian implants to the United States, Maya tested well in both math and science and was accepted into Lane Tech, considered one of the best public magnet high schools in the city. When Maya moved into Madonna, she transferred out of Lane Tech and into the local Catholic school to finish her senior year. She hardly missed a beat. With Maya, the house was filled with wonderfully exotic smells at dinner time: tostadas, enchiladas, egg rolls . . .

Maya provided a nice balance between Mercedes and Merita. She was Americanized but she was also caught in Old World mores: the A/F's family would not accept her as their daughter-in-law and he was sent back to the Philippines. This was a huge insult to Maya's family, as it would have been to any family. I couldn't understand it; Maya was smart and lovely, plus she and the A/F had dated all through high school. But I don't think I was ever privy to Maya's "real" story. With four older brothers, shouldn't her sexual autonomy have been protected?

May 25, 1993

Maya seems to take life in stride. Other than the A/F's family, not much ruffles her. In addition to being bright and beautiful, she is an excellent cook. Maybe because of the typical gender separation at home, she was expected to feed her brothers, but now that she is living at Madonna we all want her to feed us. We beg and whine to her like spoiled children, "More egg rolls, PLEASE, Maya!"

Even though Maya hadn't finished high school before she moved in, she turned 18 in March so she was considered an M/SJ "Adult." She and Mercedes, roommates, have become

⁴¹*Op. cit.*, *Monthly Vital Statistics Report*, Supplement, (Vol. 43, 1994) p .22.

fast friends. Some nights when I arrive on my shift there are trays and trays of cookies. "Which ones do you like best?" they would offer temptingly. One day I asked them to cook a special batch of cookies for Julia and David. My thinking was that I would try to pass the cookies off as my very own home-cooked specialties . . . but kids are born knowing the intimate details of their parents deficiencies, and mine laughed right out loud at me, cartoon-like with huge laugh bubbles coming out of their mouths. "YOU didn't make *these* cookies, Mommy!" Even they knew I couldn't bake without burning the bottoms of the most common, hum-drum cookies.

May 27, 1993

Maya went into labor last night. Her mother plus two brothers came over to Madonna while we timed her contractions. I had some reservations about the brothers when they arrived with beepers attached to their jeans. As out of touch as I sometimes think I am, I do know beepers are worn by drug dealers. While the residents were not allowed beepers at Madonna, I didn't think we had a rule about visitors having (wearing?) a beeper. Here, late at night in the Blue Room, the late-hours (adult) TV room and 1000-piece puzzle room, Maya's mother and I timed her contractions while the brothers wore a path to the pay telephone with each new series of beeps. What drugs were they selling/buying? My attentions were on Maya and the frequency of her contractions. They all left M/SJ for St. Joe's at 1 a.m. when her contractions were consistently four minutes apart.

June 10, 1993

Maya has left. So have Mercedes and Merita. The egg rolls, tostados, and chocolate chip cookies are gone. Sadly, so are my nightly massages given by Maya using a technique she learned from her mother, a professional therapist in deep-muscle massage. The house feels different. We have packed away the 1000-piece puzzles. We are gearing up for another big change at Madonna. Starting July 1st, DCFS residents AND their babies will be able to live at Madonna after delivery. The Blue Room will become the Day Care Center. A resident accepted into this new program (room for six parenting mothers) will be able to live at M/SJ for eighteen months with her baby while she completes high school or gets vocational training. Independent living for these teen mothers is the goal.

June 21, 1993

The first day of summer. Rita delivered last week. Although Rita was part of the group of Latinos from the West Side, she kept pretty much to herself, a difficult accomplishment living

in the three-room as she did. In many ways, she quietly out-shown all of the residents. She was a mature, 15-year-old teen whose father threatened to disown her if she parented. Rita intuitively knew she was too young to be a mother, but as a teen she wanted to have the decision to be hers—not her father's. Rita rarely mentioned her mother. I gathered that the mother was emotionally absent and Rita often had to run the household.

Unlike a former Hispanic resident from two years ago who told her father she had been raped (thereby forfeiting personal responsibility for becoming pregnant), Rita struggled with her parenting decision intellectually and emotionally. More importantly, she didn't blame anyone else for her own unexpected fecundity.

To make matters a little more confusing for Rita, however, was the fact that one of her three roommates had delivered prematurely. African-American Shanika, for whom the anti-contraction medicines hadn't worked, gave birth to a 2.5 pound baby who had to stay at St. Joes until he weighed 4.5 pounds. In real time this was a little over a month, during which time Shanika fell apart. She openly wept in front of Rita about needing to be with her baby; she (figuratively) beat her (literal) breasts and said her baby needed her. Melodramatic in part, but understandable in an incredibly young new mom.

Only when 14-year-old Shanika became overwhelmed with the particular details of her unbelievably tiny baby, would she act out. Could she help it that she was low at the very same time Rita got stuck in the cul-de-sac of her parenting/placing decision? Old-time M/SJ group care workers were afraid Shanika wouldn't bond with the baby if she were afraid to touch her baby.

I brought in my photo album of my David when he was a newborn to show Shanika. David was at his worst when he was a few days old and had an I.V., finally, IN HIS HEAD. Monitor patches and cables were everywhere, bruises from old I.V.s dotted his frail body, his newborn shape looked like the shell of a beetle, as though rigor mortis had already set in.

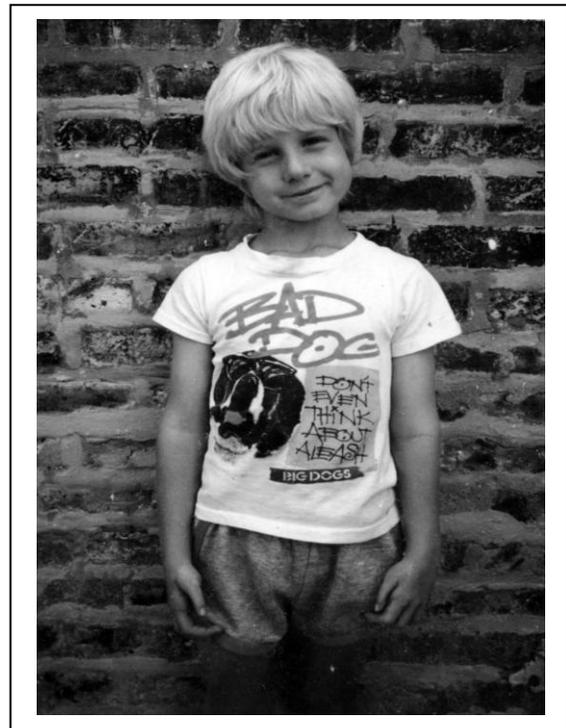


Like Shanika, I was afraid to touch my baby. Lights would blink and alarms would ring if he wasn't positioned just so. My O.B. called me almost every day to ask how my nursing was going. One of my son's particular birth problems was a Trachea-Esophagus Fistula or TEF that was repaired surgically when he was a

week old. Swallowing was a key problem, and I was afraid to nurse David, not to mention touch, then hold him. After his surgery I used a breast pump so he would be fed my breast milk through the feeding tube inserted into his stomach.

My intuitive, male O.B. called me to prod me into nursing David for the same reasons we M/SJ staffers were afraid Shanika would not stay focused on her baby. Without the immediacy of a newborn baby at your bedside, an absent, hospitalized baby can become an abstraction (such as Shannon's mini vacation). On the positive side of this equation, a mother who has placed her baby for adoption can make this abstraction her reality. Of course, a different matter for Beverly whose little girl's hand deformity momentarily stalled her adoption plans with *The Reader* couple. But Shanika was parenting, and she had to pull herself together. Her baby needed her. Like right NOW.

I showed her photos of my cute, 7-year-old David swimming, playing with his cat, dressed up for Halloween, opening Christmas presents . . . In short, a normal kid after the trauma of infancy and three or four surgeries were over.



June 25, 1993

Rita's baby is in temporary quarters. Similar to Colleen's quandary, Rita seems frozen in limbo. We sat down together to write about her feelings. She wrote another letter to her baby, and she seemed to distance herself from her social worker who had helped her select an adopting couple. All of the girls who place their babies for adoption write a letter to the unborn child.

The letter is to help both sides, mother and child, mend psychologically after the placement. Often the letter will tell the child a little about the mother and why she decided to place him/her for adoption.

Rita made lists of the pros and cons about parenting or placing the baby (a little girl). We wrote down the name of each major person in her life: Father, Mother, Grandmother, younger Sister. As she spoke of each one, I wrote out her train of thought, her stream of consciousness next to each name. Out of confusion came order, at least a little, and a pattern began to take shape.

I was impressed with how noble and mature she was. Rita's biggest worry was that her daughter wouldn't want to find her (Rita) when she (the daughter) came of age. Rita was worried that her daughter would feel rejected and unloved. Even though Rita's father had softened on his parenting stand, she always came back to the fact that she was too young to parent.

What a surprise when I came to work on Monday to find out she had decided to parent after all and had moved out over the weekend.

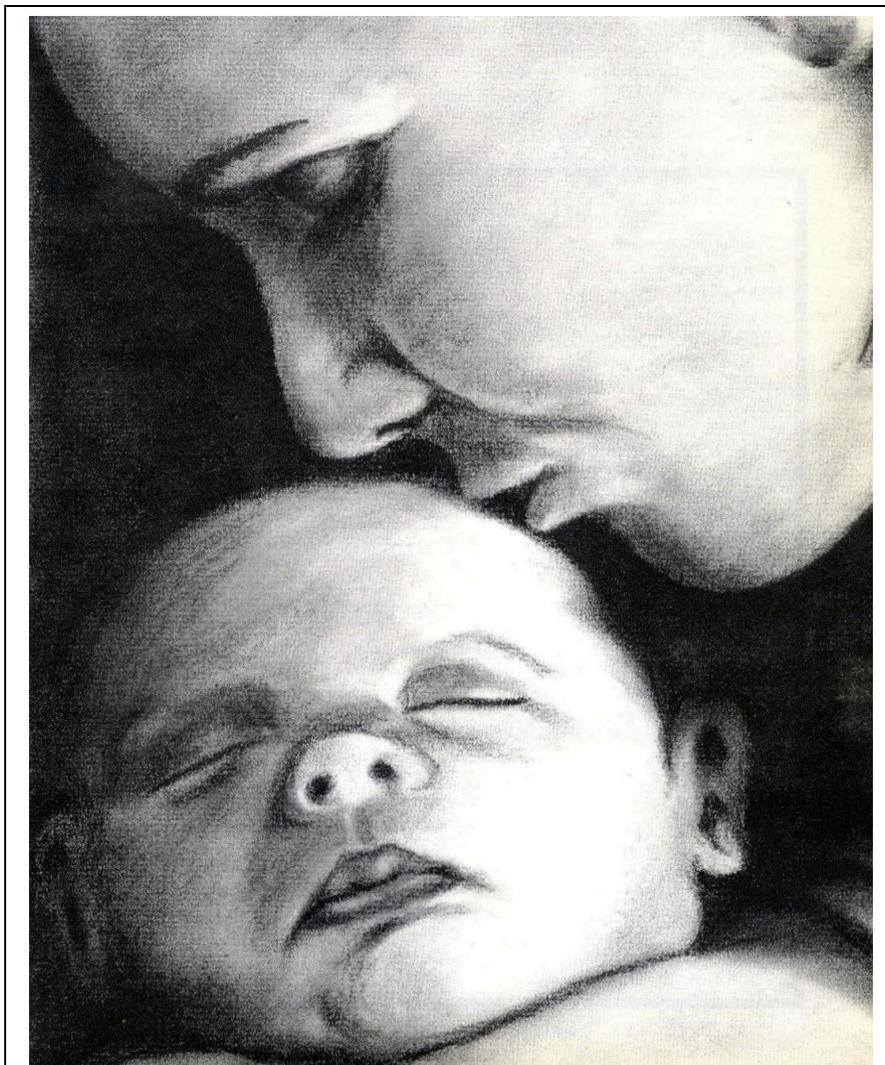
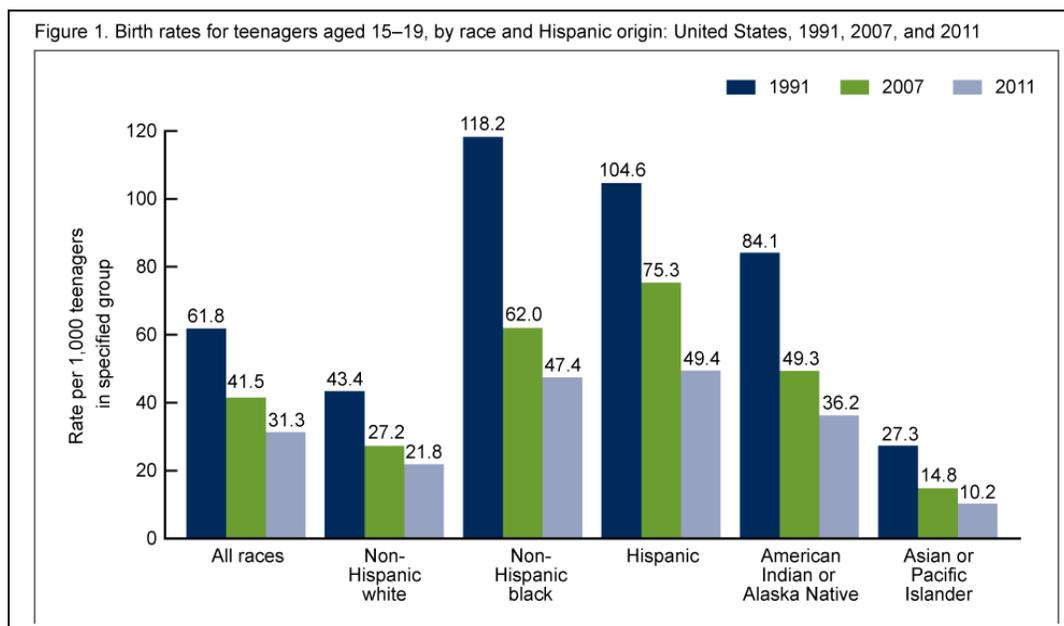


Figure 2: Drawing by Brenda Rienke

UPDATED STATS ON HISPANIC BIRTHRATES: MUCH LOWER THAN PROJECTED. (42)



Key findings

- Birth rates for teenagers fell for all race and Hispanic origin groups from 1991 through 2011 with much of the decline from 2007 through 2011.
 - Declines in birth rates among Hispanic teenagers were the largest of any group, with rates falling by at least 40% in 22 states and DC.
- Birth rates for non-Hispanic white teenagers fell at least 20% in 30 states from 2007 through 2011.
- The largest declines in birth rates for non-Hispanic black teenagers—30% or more—occurred in eight states from 2007 through 2011.

42. Brady E. Hamilton, Ph.D.; T.J. Mathews, M.S.; and Stephanie J. Ventura, M.A. “Declines in State Teen Birth Rates by Race and Hispanic Origin.” *Centers for Disease Control and Prevention*. NCHS Data Brief, Number 123, May, 2013. <<http://www.cdc.gov/nchs/data/databriefs/db123.htm>> (July 2013)

CHAPTER SEVEN

A Few Figures from Madonna: January 1989 to June 1993

Served 160 clients:

- 105 stayed until delivery
- 37 opted for adoption—but trend for parenting is going up:
 - 1989—50% placed baby for adoption
 - 1992—16%
- 50% were Catholic
- 63% were NOT below poverty level
- Ages:
 - 96%—under 18 years
 - 20%—between 19 and 22
 - 37%—23 years and above

Program Proposal: July 1993

Goal: To foster optimal parenting of infants among the pregnant residents of the Center. In the past few years, there has been an increase in the number of girls choosing to parent rather than place their children for adoption. Most of these girls have minimal infant development understanding or life-skills training, and they need assistance in continuing formal education and/or engaging in gainful employment with the assurance that their infants are well-cared for in their absence.

We are currently licensed for ten (10) pregnant adolescents. We would like to offer seven of those spaces to DCFS for adolescents 16 years and older with a cumulative IQ of at least 77 and the willingness to cooperate within the boundaries of our program. The other three spaces will still be available to non-wards to provide homogeneity within the Center at large.

Five of the DCFS clients will be offered the opportunity to remain at M/SJ for an additional 18 month period. The mothers and their infants will be housed in a separate section of the Center. The new mothers will be required to be enrolled in

school or gainfully employed. Full-time, in-house daycare will be provided for them. A portion of their monthly stipends will be designated for this provision so that the residents can get used to budgeting for this expense. The monies they budget will be will be banked for them in their own personal accounts and given to them as a “nest egg” when they complete the program.

The parenting residents will be expected to volunteer up to four hours weekly in the daycare program (under the direct supervision of trained staff) learning child development and care-giving techniques. Residents must attend weekly, two-hour seminars with presentations and discussions. Their significant others may attend one of these sessions a month. These sessions will focus on the parent’s new roles and responsibilities and teach new communications skills.

We plan on initiating opportunities for follow-up contact after the resident leaves the program. The infant specialist will have a phone “warm-line” for phone conferencing two hours a week. The specialist will also lead monthly sessions for the residents and their extended family.

Finally, we will train each resident in the program in meditation techniques so that they can begin to negotiate peacefully to get their needs met. Because literacy is also going to be stressed in our program, we will incorporate a computer generated program in communications skills that “talks back” to the residents. It is called “Giraffe Talk” because it encourages the residents to “stick their necks out” and to say exactly what they want. The program encourages self-honesty and builds self-confidence while it encourages reading in a fun way. It also teaches non-violent methods of communication.

We are aiming at the “older” adolescent for several reasons. Continuity is one. If they can graduate from high school while they are at Madonna and can enter into our excellent employment program, they can begin to save money, gain health benefits, and move directly into independent living.

July 7, 1993

My first night back to M/SJ after vacation was different right from the start. I had been away for a week and a half, and during that time M/SJ's first parenting teen moved in. Athena, African-American, is 16 years old; her son Tommy, with huge, nut-brown eyes and a head full of ringlet curls, is six months.

I thought the M/SJ plan was to only take in parenting moms who had been residents at Madonna before delivery, but Athena and Tommy somehow slipped in. Now I know how: The two of them could sell sand to an Arab, take coals to Newcastle, and make political promises sound new to the neighborhoods in Chicago. Pretty and smart, even angelic at times, Athena is adaptable and changeable like a chameleon.

The first sound I heard when I walked through the door last night was Tommy's belly laugh. I followed the laugh and found Athena and Tommy visiting Brittany on the teen side of the house. I introduced myself and we all chatted. Athena and Brittany, like Germaine and Jade, knew each other through serendipitous DCFS placements.

The last time Athena and Brittany were together was at Columbus-Maryville a little before Thanksgiving last year. Brittany knew that Athena had a little boy, but she lost track of both of them shortly after Athena's delivery. On the other hand, Athena did not know Brittany was pregnant or that she was living at the Madonna/St. Joseph Center. For them, this was an unexpected family reunion. Tommy is a show-stopper, but as much fun as we were having, everyone had to be reminded that the parenting teens had a different set of rules from the pregnant teens (and both sets of rules were different from the adult rules). In other words, Brittany had to go to bed, with lights-out . . . like, twenty minutes ago.

July 10, 1993

Brittany has been living at Madonna since the beginning of June. Fifteen-year-old Brittany, African-American, has been a ward of the State on and off for several years. She has three half-brothers ranging in age from 10 to 17 years old; all four siblings have a different father.

Most recently the four kids had been put in Protective Custody with DCFS when the mom didn't show up at school to re-enroll the two younger boys after they were suspended for fighting. Apparently her whereabouts had been unknown for ten days. A later psychological evaluation of the 31-year-old mother revealed that she was briefly treated for paranoid schizophrenia, that she has experimented with drugs (marijuana, alcohol and cocaine) since she was 13, and that she was a victim of child sexual abuse by her maternal grandfather.

The mom dropped out of high school in the 11th grade when she was pregnant with her second child. Today the mom is unemployed and no longer on public aid, but she still receives SSI benefits. She has a criminal record and has, on several occasions, spent time in jail for criminal offenses (sale of controlled substances out of her apartment).

Brittany's psychological diagnosis is called a "parent/child problem." Perhaps this is an understatement. The mother allegedly supported her own drug habit by prostituting Brittany, or in other words . . . she sold her daughter's body for drugs. How much would someone pay to sleep with a 13-year old girl with 28DD breasts?

During the mother's many absences from home, Brittany was sexually assaulted by her older brother's friends. The most recent rape resulted in Brittany's pregnancy. Is it any surprise that Brittany's "projective" drawings have some sad figures? Her "Most Unpleasant Concept" was: "People chasing people instead of minding their own business."

Again according to her psychological profile: "Brittany, just under 5-feet tall, has a full scale IQ of 82 with fifth grade achievement. She frequently projects her anger and hostility on others or withdrawals completely. Further, she has ominous and foreboding percepts of crabs, spiders, robots, frogs and she tends to view the world around her with suspicion . . . "

Brittany is moody, and when she is, she is dark and foreboding. She builds an emotional wall around herself made out of ebonized granite. Sometimes she is so far away emotionally you have to SHOUT to get her attention. Other times she violently erupts in anger, explodes her granite wall, and then all 4'11", 140 (pregnant) pounds of Brittany

IS IN YOUR FACE

July 15, 1993

Today is St. Swithin's day. According to *New Columbia Encyclopedia*, St. Swithin (or St. Swithun), 860 A.D., English Bishop of Winchester, is the Patron Saint of Drought. According to tradition, if it rains on his feast day, it will rain daily thereafter for forty days; if it is fair on St Swithin's Day, it will not rain for forty days.

The last three days have been humid and unbelievably hot in Chicago. We all have dreamed of rain and danced to the rain gods but not a drop until finally, late this afternoon heavy thunderstorms. My sinuses have taken over my head. Everyone I know has a summer cold. I called in sick at Madonna.

July 16, 1993

I missed more action at Madonna last night when I called in sick. One of the new teen residents delivered right in her bed at M/SJ. Sixteen-year-old Charlotte had just moved in, so she hadn't had her first O.B. check at St. Joseph's yet. Her Polish-Catholic family was mortified about her pregnancy; they shipped her off to Madonna just as soon as she started to show. Charlotte thought she was seven months pregnant, but clearly she was a little off on the dates of her last menstrual cycle.

At 4 a.m. Charlotte's roommate came to the overnight staff bedroom to say that Charlotte had been having stomach cramps for the last two hours and had a lot of urine (?) dripping from "down there." The staff person who was able to take my shift was an old-time veteran at Madonna and also from the original adult home, Gehring Hall. In fact, she had just graduated with an M.S.W. from Loyola School of Social Work; this was her last week at M/SJ. I was thankful she was able to fill in for me at the last minute.

End-stage labor feels like one has to have a bowel movement. When a woman in labor says she has to move her bowels, it usually means the baby is crowning, that dilation is complete. One look at Charlotte told staff that she was in the last stages of labor—not having diarrhea. Quickly staff found scissors and cut off her underpants to make room for the baby whose head had just emerged.

When my little boy was in the Intensive Care Unit at Children's Memorial Hospital, the nurses told me grisly stories of teens in heavy denial about their pregnancies. Some babies suffocated in the teen's underclothing; some babies, born in the toilet, ended up drowning there too. (When does "denial" become murder?)

Meanwhile back at M/SJ, the on-call staff had called 911 and opened the gate. The paramedics arrived in time to cut the baby's umbilical chord and to escort the new mom and baby to the hospital. As seems to be happening nationwide, once Charlotte's visible signs of (illegitimate) pregnancy had passed, so did her parents' scornful alienation of her. Charlotte and baby were welcomed home by the brand-new grandmother . . . who just happened to have a brand-new layette from Montgomery Ward waiting at home for just the right brand-new baby boy

July 20, 1993

Dehydration and stress have all contributed to late night runs to the hospital, but I have found that the strongest external influence on a woman close to her due date is a sudden drop in barometric pressure. Before working at Madonna,

My *Jeopardy* answer to the Question:
"What External Influence Jump-Starts a Woman's Labor?"
Would have been: "What is the Full Moon?"
Not: "What is a Sudden Drop in the Barometer."

Of course, I don't remember being told this in Lamaze class, but it's common knowledge in the L. & D. ward: a sudden thunderstorm can make the ward bulge to capacity. One summer night, during a much needed but sudden torrential downpour, every bed in the ward—including the four recovery beds—held a laboring lady. I knew this firsthand because the night Jade went into labor last year was one of those nights. Jade and I had hoped to appease the Fertility Goddess, but Her agents in Michigan (who were in control of the cyberspace-contraction machine) had ordered us to the hospital. That night the St. Joe's nurses said they had started the night shift with just one woman in labor, but the instant the barometer dropped and the thunderstorms started, the ward took on a carnival-like atmosphere. Okay, a bizarre carnival with an eerie mix of sounds: the almost animal sound of women moaning during labor, then—the shrill cry of a newborn baby.

August 1, 1993

Latasha is back for pregnancy No. 3. Although Latasha knew Brittany and Athena well, she was restless right away and went on the run the very first weekend she was back at Madonna. Linda, who is back from maternity leave, sat her down for a serious talk followed by a behavior contract. If Latasha breaks her contract, she will be discharged from the M/SJ program.

August 15, 1993

Latasha is on the run. Again. A police report has been filed and the DCFS hotline notified. Her things have been bundled up in a garbage bag, and her room has been reassigned to a new teen.

The few times I had to call the CPD when I first started working at Madonna, I had to give the full address to the CPD radio dispatcher. Often they would get the address confused with the shelter in the back and go there first. Now, all I have to say is, "I have to report a runaway from the Madonna/ St. Joseph Center," and the dispatcher can parrot back the address instantly.

September 1, 1993

Pretty little Maya came back for a visit. With her came her mother and her son, a niece and a brother. Her little boy is three months old and is HUGE! How did such a tiny little Maya end up with such a large baby? Maya graduated from high school with a B+ average even though she had transferred just before spring break and delivered two weeks before graduation. She plans to go on to college but can't decide whether she should start back in January or wait a whole year and start next September.

I can tell Maya wants to talk confidentially. She asked her mother to go out to the car for the diaper bag. As soon as her mother was out of ear-shot, Maya gave the update: Mercedes has quit her job but hasn't told her parents yet. Her mother will only baby sit when she goes to work, but otherwise the grandmother won't let Mercedes out of the house without the baby. This made socializing (Read: Dating boys and having fun) difficult, so Mercedes quit her job and didn't tell them.

How long can Mercedes fool her parents? Maya thinks they're already on to her. Mercedes has suddenly started "dressing" for her clerical job at a neighborhood real estate company. In an effort to lose the little bit of weight she gained during pregnancy, Mercedes has started skipping meals again and smoking more cigarettes. She has been coming home late (from work) and spends hours whispering into the telephone. Once (twice? three times?) Mercedes came home smelling of beer and her mother asked if she'd been drinking. How many "office parties" will Mercedes' mom believe?

Maya is depressed for exactly the opposite reason. She is not allowed to leave her house alone *with* her baby. In the neighborhood, Maya's family has tried to conceal the mother/son relationship to disguise the illegitimacy component. Maya must, as today, travel with an entourage: mother, brother, niece, baby. Way back last spring when we hunched over those 1000-piece puzzles in the Blue Room, who would have guessed that Mercedes didn't have the world by the tail or that Maya would turn into a wannabe parent? Unlike Mercedes, Maya wants to be a full-time mom but she has to wait her turn: both maternal great-grandmothers, the grandmother and even her brothers want to care for the beautiful boy. Does the A/F's family know what they were missing?

September 7, 1993

The first day of public school in Chicago. Most of the current residents go to the Arts of Living, a high school for pregnant teens located in the downtown headquarters of Catholic Charities. The Catholic Charities headquarters is next door to Holy Name Cathedral, the highest

Catholic Church in Chicago where Archbishop Bernardin presides. The girls can get there by public transportation (CTA): they can take either the "L" or a bus. The elevated is faster but the station is four blocks away while the bus stop is only a block away; the Arts of Living students usually allot the extra time and wait for the bus. Victoria's two-mile walk (each way) to work at the St. Vincent DePaul Day Care center seems like light-years in the past.

September 8, 1993

The M/SJ Day Care Center has been staffed and ready for weeks, but the only "real" baby the two workers have is Athena's Tommy. Happily, two residents are due any day now. The daycare center is tailored to the Madonna resident. A memo handed out by the daycare staff stresses that babies are individuals and that child care is not an exact science. The first priority is the well-being of the babies. The second priority is to help build a strong mother-child bond for young mothers who probably haven't had a strong mother archetype to begin with. Judgments are withheld. I wish Jade could have been in the parenting program.

The daycare staff charges \$2.00 a day, payable each Monday morning. Just like with my old daycare provider way back when, payment is required even if the baby is scheduled but the mom decides not to use the service. Sometimes an exception is made if the baby is sick, but most of the residents have a hard time understanding why they have to pay for days they don't use. One nice feature about the M/SJ Day Care Center is that the fees are returned to the mother when she leaves the program. If the resident uses her time effectively, she will have a savings account to draw on when she wants to move on to independent living.



September 20, 1993

Last night, Sunday night, the residents were still glued to the TV when I arrived at 10:30 p.m. They all begged to watch *Studs*, one of the rare programs that treats men like sex toys—like pieces of meat (beef cake) and not much more. Three women who have been out with each “Stud” sit in chairs facing them. They have made remarks about their date and his performance, and he will have to guess who said what about him. These remarks were written down before the show and then read aloud by the emcee.

A Stud wins a point—a festive bow like you'd find on present—if he can guess which woman said he was, "A terrible kisser but a worse dancer!" "He's conceited and vain!" Or, "He cared more about his hair than I do about mine!" The studio audience and the teen audience at home jeer and snort; they are energized by the most insulting comments. "Maybe he's a fag!!!" Brittany blurted out.

A pair of Studs fills up the half hour . . . usually one nerd, one hunk. The winner has the most bows stuck to his tight jeans or upper torso—if he has nice pectorals. With all the bows seductively attached to his thighs and hips, he has subliminally begun to resemble an actual gift package ready to be opened. The nerdy Stud says, "SHEILA said I was a bad kisser and couldn't dance." Presto, he gets to place a bow anywhere on his body . . . but if he isn't sexually provocative when he attaches the bow, he gets booed and humiliated all over again.

When this craze first started happening, I asked the Arts of Living girls if they had finished their homework before I would let them extend their quiet hour curfew to stay up for *Studs*. "We NEVER have homework because we aren't allowed to take the books out of school," they said in one voice. "People steal them, or when they drop out of school they keep the books, so now books aren't allowed out the front door." Now I understand why no one can read or write anymore.

[Update, 2013. I would see this up-close and personal when I taught Foundational Studies at Truman College from 2007 to 2012. No Child Left Behind has left a whole new generation unable to read, write, or do math at grade level. Because of its emphasis on teaching to the test and test scores, high school students haven't been taught critical thinking skills and most do not know how to study.]

September 30, 1993

We are gearing up for the Annual Mass again. Tension is everywhere in the house. This year's residents don't seem to mind the mandatory attendance. In years past, the residents have

protested the command performance—particularly those residents who have selected Madonna for their anonymous pregnancies.

This year, the tension in the house is located solely in the staff office: the Mass has officially become Pro-Life and not Pro-Choice. Although each group care worker cares about her work, most of the staff are Pro-Choice. Maybe the not-so-subtle political statement reflects the very real change in M/SJ programming: the move away from pregnancy ONLY to pregnancy AND parenting. The national trend toward the religious right is thus mirrored in our fertile little microcosm. Coincidentally, two babies were born in the last couple of weeks so we now have real babies plus Tommy in the house . . . just in time for Sunday's Pro-Life Mass.

October 10, 1993

Daniella, 18 years old, gave birth to a daughter a month ago. Although Daniella's relationship with her biological mother has always been guarded, she has a good relationship with her mom's sister and with the A/F's mother. This gives Daniella a strong safety net, a durable female compound, and she spends weekends with one or the other. They are both on the DCFS approved chaperon list; Daniella's mother is not.

Daniella's mother is a lesbian, but what disturbs Daniella is her mother's drug use, not her sexual orientation. In fact, Daniella says she, too, is a lesbian. Daniella has a long history of intimate female liaisons dating back to when she was 6 years old when she witnessed her mother having sex with another woman—the bedroom door had carelessly been left open. A couple of years later, an older girl forced herself on Daniella in the (elementary) school bathroom. She said she did not report the incident because she had mixed feelings about the whole thing. A little over a year ago she met an older, 25-year-old woman who became her lover.

Although Daniella is obviously pregnant, she claims she has never had a boyfriend and was a virgin until her great-uncle raped her when she was 12 years old. The logistics and chronology of events that linked her with the A/F are difficult to piece together. Confusion and weird dynamics describe her relationship with him, particularly now that Daniella and his mother are so tight. And did Daniella's female lover just disappear? Where did she go?

October 12, 1993

Daniella is strongly motivated to finish high school and has registered at Truman College to finish her GED. She has done well and studies a little every night after supper. She hopes to be admitted into an independent living program after her GED program wraps up and after she and the baby have bonded a little more.

One of Daniella's concerns is that for the last four months her DCFS worker has not returned her telephone calls. She needs a clothing voucher for a winter coat, and then she needs to get the paperwork organized and started for her move into independent living. Baby clothes were pulled together when the aunt and A/F's mother threw a surprise baby shower for her, but the whole DCFS welfare system has been under suspicion in Chicago since last March when Amanda Wallace strangled her son Joseph with an electrical cord.

Amanda Wallace and her 3-year-old son Joseph caught national media attention when the facts of his murder were released: To begin with, Amanda delivered Joseph at the Elgin Mental Health Center just outside of Chicago. A psychiatrist there warned that Amanda "should never have custody of this or any other baby." She was a former foster child and had a long history of self-mutilation, including setting herself on fire, eating batteries and drinking drain cleaner. When Amanda found out she was pregnant with Joseph, she stuck soda bottles into her vagina and denied that the baby was hers. (I mean, whose baby was it?) Three times DCFS removed Joseph from his mother, and incredibly, three times judges returned Joseph to Amanda—the last time after her lawyer side-stepped her mental history. Nevertheless, DCFS and Patrick Murphy, the public guardian who was normally all about the safety of the State orphanages, had all signed onto reunification.

Forty-two percent of the 1,300 kids who died as a result of abuse in 1993 had previously been reported to child-protection agencies.⁴³

October 18, 1993

We were worried that our residents were falling through a DCFS, bureaucratic crack. When the Catholic Charities social worker contacted the DCFS supervisor, Daniella was assigned a new DCFS worker. Everything seems to be going smoothly now. Daniella bought a new winter coat and says she wants to take computer classes when she finishes with her GED classes after Christmas.

Many studies have documented the relationship between a teen mother and her link to the welfare system. However, new research has indicated that the adolescent mother, in contrast with the sexually active teen who isn't a mother, feels better about herself and she will have a lower rate of substance abuse.⁴⁴ More research needs to be done, of course, before society, government and/or families should embrace teen pregnancy as the norm, but studies clearly state that a teen mom's lot is improved with at least a high school degree.

⁴³ Michelle Ingrassia and John McCormick, "Why Leave Children with Bad Parents?" *Newsweek* (25 April 1994) pp. 52-58.

⁴⁴ *Op. cit.*, M. Males "Poverty, Rape."

November 1, 1993

Halloween was on a Sunday night this year; the full moon was on Saturday night. Perhaps having babies in the house has settled things down; with horror I remembered the killing rampage of last year's Halloween even without the full moon. The babies were dressed as bright orange pumpkins, the moms as witches or vampires, but Tommy fell asleep before he realized there was candy to be had.

That was probably just as well because a blood test last month revealed that Tommy had an elevated cholesterol level. How? When the doctor asked Athena about Tommy's diet, she told him about the normal baby cereals, breads and fruits, but she also said that she has been pre-chewing food for Tommy since his second month. Tommy has been eating Burger King cheeseburgers and Popeye's chicken for seven or eight months and he already has the blood chemistry of a middle-aged man.

In an Illinois state-wide health survey for 9th Graders (1991), only 23% to 29% of the students reported having milk, fruit, vegetables or juice for snacks. Only 40% reported getting sufficient exercise.⁴⁵

November 4, 1993

Last week, Eliza, one of the younger teens ran away from Madonna on her due date. Perhaps that rash act clearly defines the difference between me, a middle-aged mom, and Eliza, a 14-year-old mom-to-be. Forget the beeper system a lot of Yuppie pre-dads have figured out. Confident that the electronic message from his pregnant, better half will signal him to the hospital, the male can continue to forage for food and shelter in corporate America. But to go on-run, as Eliza did, on the very day *I* would WANT to be connected with civilization (and with my doctor, not to mention pain medicine if needed) is outside of my comprehension. On second thought, maybe she had the drug connection already in place . . .

In the wake of Eliza's unexplained disappearance and with the continuing sugar high from Halloween, the residents have been acting a little edgy, a little testy. Letting the teens watch *Studs* has been a special treat because the show starts during quiet hour when they should be upstairs. At Madonna the staff tries to work exactly like real parents, like a team. The residents know that the evening staff will tell me during the shift report what the over-all house behavior has been, before approval to watch *Studs* is given to the teens.

Last night the residents became unglued during the Wednesday House Meeting and Pregnancy Related, so they were sent upstairs without privileges and I made my room checks

⁴⁵*Op. cit.*, Illinois Caucus on Teenage Pregnancy

early. I was back in the staff office when Brittany came to me to say her roommate was upstairs drinking shampoo. Brittany's roommate, LaShonda, is seven months pregnant and has had a miserable pregnancy—mostly because, like Jameka and Zoey, she has gained too much weight and was out of shape to start with.

One night several weeks ago when I checked on LaShonda, she complained that the day staff had made her go to school even though she had a backache. "I'll SUE if they make me go tomorrow!" I had to remind her that pregnancy and backaches and heartburn were all magically connected, but privately I filed that information about LaShonda away. Not so privately I'm angry that as a society we've resorted to hiring lawyers because we get heartburn or backaches and no one told us we would when we got pregnant.

Sixteen-year-old LaShonda reminds me of Octavia in stature. Both girls are tall and loud. Both girls are attracted to abusive men. Octavia's A/F set her arm on fire; LaShonda's A/F threatened her with a baseball bat last weekend. M/SJ staff was able to convince her to get a restraining order on the A/F, but she is now having second thoughts as she contemplates her benign and sterile world behind the walls of a maternity home where there are rules and curfews.

Whether she drank any shampoo or not, I'll never know. After Brittany left the staff office, I went upstairs to talk to LaShonda. The shampoo bottle was on her desk next to her bed but she absolutely denied drinking any. I half-way believed her, but I also knew that she had an impulsive (and suing) nature. Additionally, I also knew that not much got Brittany's attention at this point.

I called the day staff in charge of LaShonda's case to review the procedure. She told me to call the poison control board who told me that it didn't matter whether she drank any shampoo or not—she needed to go to the hospital for a stomach analysis. They said that shampoo in itself would not harm the baby or the mom, but her behavior could be disguising something more lethal that she DID swallow.

LaShonda's M/SJ worker told me a Critical Incident Report needed to be written for DCFS and that a police report would have to be filed. I called the CPD, but as I dialed 911, I had second thoughts about the "emergency" nature of the whole thing. "I hate to bother you because this isn't an emergency but I have to get a pregnant resident to the E.R. because she maybe drank shampoo." "Yes, I know shampoo is not lethal but the poison control center said . . . blah, blah, blah . . ."

I went upstairs to tell LaShonda to get dressed to go to the hospital, but now at 12:45 a.m., I found all 220-plus pounds of LaShonda tucked solidly and soundly in bed. She refused to

move. I called her worker back. "Now what?" I asked. Again the difference between a real social worker and me, just a mom, seemed galaxies apart. "We have to get her to the hospital even if we know she didn't drink shampoo so we are covered legally. If she won't go voluntarily, we'll have to call the CPD back."

I called 911 again who switched me to the fire department who switched me to a private ambulance service (would the State pay for a private ambulance?) who told me to call 911 again. It was discouraging to realize how much red tape, money, energy and now personnel were involved with this one contrary teen. Call No. 3 to the police department was successful, and they helped put muscle into the E.R. visit. I felt like the mom in the movie *Home Alone*, when she telephoned the police department from Paris. The dispatcher put her on hold and said to her colleague: "Wacko on line 1!"

By the time the police arrived to escort LaShonda to the hospital, her worker had arrived also. At 4 a.m., when the entourage returned home from the hospital, I wasn't surprised to find out that LaShonda hadn't a trace of anything in her stomach but a large amount of dinner.

November 10, 1993

Brittany is getting close to her due date. Her face is darker than usual; her "mask of pregnancy"* makes her look ominous and foreboding. She has disappeared into herself. To get her attention one has to touch her arm and then speak directly into her face. Most of the time she jerks out of her daze angrily. Sometimes, when she cradles her arms protectively over her stomach, her elbows jut out dangerously. That she could alert staff to LaShonda's condition at all was remarkable.

November 15, 1993

Brittany delivered a baby boy named Patrick over the weekend. Mother and son returned on Sunday, and all seemed okay until after dinner tonight when Brittany complained of being hot. The p.m. staff took her temperature at 9:30 and found out she had a fever of 102.4. The St. Joe's on-call doctor called back an hour later, just as I was arriving for work. The doctor said Brittany needed to return to the St. Joe's emergency room. No big surprise there. Obviously an infection had set in and she needed to be checked out and then started on antibiotics.

Each year at least half-a-million women die as a consequence of pregnancy and childbirth; of those deaths 99% occur in developing countries.⁴⁶

⁴⁶Michael Elliot and Christopher Dickey, "Body Politics," *Newsweek*, (12 Sept. 1994.) pp. 22-27.

Less than a year before my mother died, she wrote to tell me a little about the women in our family. I have cherished my mother's letter not because it was one of her last letters to me but for a variety of reasons: With three brothers I sometimes felt the testosterone far outweighed the estrogen in my family; my two ectopic pregnancies had put a damper on my mating urge, and the fact that my grandmother (Alice) had died giving birth to my mother (Patricia) made reproduction almost seem like a death wish for me. (My mother was an Anglo/American born in South America, but she met my father at college in the U.S. and never moved back to South America.).

From my mother's November 27, 1983, letter:

"Medical help was very primitive in Chile and my grandmother (Nan) had a difficult birth with Alice on July 15, 1896. The mid-wife could not dislodge the placenta. My grandfather rode a horse into town and got a hold of the only German doctor available who rode back with him, and then the doctor plunged his unwashed hand up in Nan's body. What a rugged body she must have had—NO infection and all was well." (47)

All was well, until that same little baby girl (Alice) died 23 years later giving birth to her own daughter—my mother, who was born in Chile in 1919. Without antibiotics, it is more amazing how many women survived childbirth (like Nan, my great-grandmother) rather than how many did not (like Alice, my grandmother).

But, now back at M/SJ, antibiotics is what Brittany needed—right now without delay. I went up to Brittany's room to tell her to get dressed, but she had removed herself from the present world. What's the saying? "The lights were on but no one was home." In Brittany's case, I'd say not only was she not home, but the lights had been forcefully extinguished. The on-call staff knew about Brittany and had just arrived in her room to take care of Patrick while we went to the hospital. I knew how urgently we needed to get to the hospital, but Brittany was doubled over in pain and refused to move. She withdrew even further when the on-call staff walked in. A short but powerful Brittany shot her arms out in all directions when we asked her questions about Patrick's feeding schedule.

I had two thoughts as I struggled unsuccessfully to get Brittany's sneakers on. The first was a depressing thought: I might have to call the CPD twice in two weeks because I couldn't budge another resident out the door. My second thought was slap-stick humor: "Where in my

47 Op. cit. "A Fascinating Human Record."

job description does it say I must be able to dress, then lift a 150 pound resident and carry her down a flight of stairs?" (Exactly the reverse of Michelle's fetal position assumed on the office floor two and a half years ago.)

Brittany finally let herself be led out the front door although she went barefoot. Thankfully I was able to lift her into the van as she was unable to split her legs apart for the final hoist into the front seat. I thought back to the my first Halloween at Madonna and the two boys Emily saw scale the wall during the old, pre-electric gate days at M/SJ, and the dilemma I had letting the CPD onto the grounds: "Must be able to defend oneself from drunken Halloween guys gone astray." Again I was grateful to be healthy and strong; otherwise, Brittany and I would still be, to this day, frozen in place in the driveway at Madonna.

St. Joes knows me by now—the 11-7 pm ER shift does. They were friendly, but this time we weren't rushed through to the 4th floor where we could de-camp. The androgynous admitting clerk was flirtatious and funny. S/he reminded me of a much more attractive "Pat" from *Saturday Night Live* with manicured nails and mascara, but husky and square-shouldered. However, now, there was a problem over the DCFS non-pregnancy status: "Who's her legal guardian?" A call was made to a sleeping Linda at home who told them I could sign in for Brittany.

We were ushered into a changing stall. Brittany kept her t-shirt, removed her massive bra, and put a johnny over all. An IV was started. Three hours into this they finally did an internal. I had begun to wonder if they examined "down there" so close postpartum; maybe they didn't. I mean, I wouldn't want to. That's when it's weird to be a woman and have all of this unseen business with weird discharges, smells, tummy tugs, and leaking breasts to boot. It's all a big reminder that we are mammals after all.

Finally the time came to take her in for the examination, but the intern sort of hesitated. He turned to Brittany and asked her if she wanted a catheter (meaning she had to have one). At that point I lost it. I felt a little guilty afterward because his English was not fluent—maybe he was Pilipino? I snarled: "She's 17 and had a baby two nights ago, and she has a fever of 102. You're the doctor. If she needs a catheter, tell me and I'll help you. If she doesn't need one, don't ask if she wants one." He disappeared quickly and returned with the black, heavy-set charge nurse who charged right in. "Brittany! You spread those legs nine months ago; you spread them now for this catheter."

Brittany's claws came out. She was suddenly and finally quite fully conscious. I told her she could squeeze my hand but not with her nails. She wanted to go home. How was she

planning to get dressed? Who was going to lift her back into the van, not to mention back upstairs at M/SJ? Needless to say, they admitted her overnight.

November 18, 1993

Sweet young, fifteen-year-old Jacinta has been having a rough time of it all. Her psychological report simply says, "When Jacinta was only one or two years old, both of her parents discontinued caring for her." Abandonment and its twin sibling—sexual abuse—set Jacinta up for "an impoverished emotional life with a dampened sensitivity to pleasure." But, in truth, Jacinta is her own worst enemy. Where I see a beautiful young African-American girl, quiet and smart, she sees that same girl as weak and ineffectual. Where I see a thoughtful and introspective young woman, she sees an unwanted, plain little girl who needed too much love.

Originally she planned to place her baby for adoption. Many adopting couples could be found for such a light-toned, beautiful girl. Despite her "borderline range of intelligence (IQ 77)," she presents well socially, especially to authority figures and managed to get a scholarship to a North Side parochial school.

Jacinta is painfully self-critical and shy, and in that regard she reminds me of Allison whose introversion resulted in an eating disorder. Again from Jacinta's psychological profile: "She pursues a lifestyle that is introverted, colorless and peripheral." For the above reasons and probably 1000 other reasons, Jacinta felt unworthy and therefore unable to parent. She felt she did not know how to love. But a weird thing happened on the way to the recovery room from the delivery room: Although the birth itself was normal, "She had to be sewn up twice due to some error the first time." (M/SJ notes in log.) Having had all kinds of trauma "down there" including two episiotomies," I couldn't imagine what went wrong that needed two sets of stitches. Ouch.

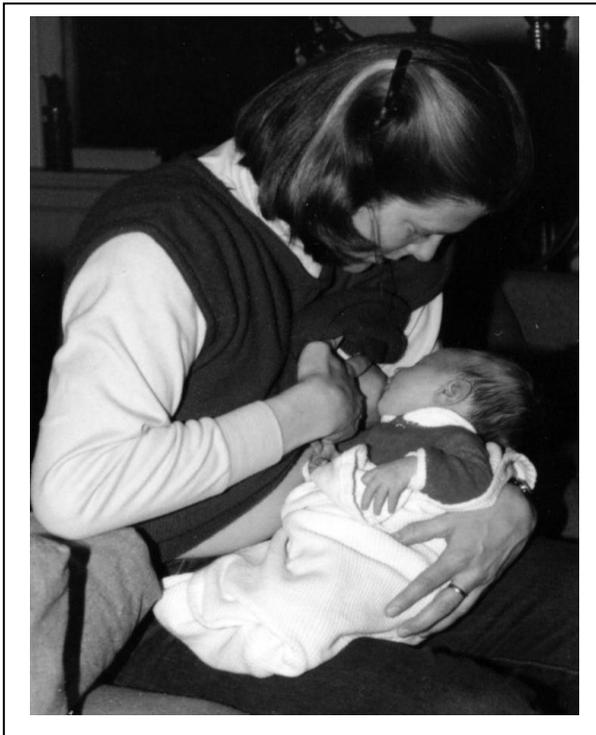
Jacinta recovered slowly. While she mended, she kept her daughter close and then closer. However, the tighter she bonded with her daughter the more she withdrew socially. By the time Jacinta decided to parent, she had become so introverted she was almost nonverbal.

Postpartum depression makes you feel like one of the characters in Alice in Wonderland. Too small, too big, too fat, too thin . . . I nursed my daughter for a full year. The first three months postpartum, I nursed through a solid veil of tears because of my mother's sudden death midway through my pregnancy. I was too sad, too morose, too pathetic . . . How could I suddenly BE a mother WITHOUT a mother?

Death and birth; abandonment and bonding. Mourning the death of a real or of an ideal person is a dreadful time, but postpartum the emotional swings can be frightening. Nursing my daughter sometimes kept me glued together and made me feel whole, but sometimes the hormonal surges would collide with my grief. I neared emotional insanity during those dark moments. Sadly, these were the exact moments my ex-husband chose to question my sanity and maybe rightly so.

Only when I saw Jacinta wipe huge, liquid tears from her eyes so that then she could actually see her sore and swollen nipple so she could attach and then feed her crying, hungry baby did I recognize a dark, familiar sorrow. Jacinta's sadness fit a similar shape in my soul. The clinical term for this is: "postpartum depression."*

"This will pass, my pretty Jacinta, and when it does, you will have as lovely a daughter as mine." And I produced a photograph of my beautiful, 8-year-old daughter sticking her tongue directly out at me—her Great Earth Mother and life-giver, her Saintly, Mother-Dearest who happened also to be the photographer.



November 22, 1993

Ivy, another resident, is a lot like Jacinta; together they had planned to buck ethnic stereotyping by placing their babies for adoption. Seventeen-year-old Ivy resembles a 1950s, African-American tin 'man' right out of *The Wizard of Oz*. Blunt and direct, bobby-socked and horn-rimmed, Ivy is awkward around all forms of life including babies and plans to place hers ASAP.

For several years, Ivy has lived in a senior citizens building. In exchange for providing home health care for her step-grandmother, a long-term stroke victim, Ivy got free room and board. Daily chores included helping her grammy in an out of bed, bathing her and doing all of the cooking and shopping. An understatement from her psychological evaluation: "Living in the senior citizens building has not provided Ivy with a lot of opportunities to interact with other kids her age."

I can't imagine the night Ivy could have conceived a baby. In my mind, the Blessed Virgin Mary and Ivy were both impregnated by bimolecular osmosis, not by any spermal penetration. Maybe that is how Ebony (who had the still-born baby) became pregnant also, although I think Ebony's sperm donor was from Planet Vulcan.

November 23, 1993

Ivy has planned to place her baby and then move to Detroit to live with an older cousin. She graduated from high school last June and didn't want to move back to the geriatric home. (Who would?) In fact, her days at Madonna were the first she had ever had to contemplate her own future and not put another's needs ahead of her own. Watching her become self-aware was like watching a beautiful flower open. Her obvious and growing fertility gave her angular features softness. She began to trust herself and others more and more. She could laugh easily now. Soon she asked to hold the other residents' babies, and quite by good fortune her slow and steady heartbeat could calm a fidgety baby instantly.

By the time Ivy delivered, no one was surprised when she decided to bring the baby back to Madonna. She cooed and sang to her daughter as she rocked her. Linda accepted her into the parenting program happily. If we were men on the football field, we would be chest-butting, high-fiving, or ball-spiking . . . "Good going, Girl!! Give me five!!!"

December 6, 1993

Ivy kept her little girl at her side for two weeks. How sad to return to Madonna last night to find out Ivy had merely delayed her original plan. Yesterday morning right after church, she

moved to her cousin's house in Michigan; she had placed her daughter in temporary care last Friday afternoon and signed off on her custody. Ivy knew she wanted and needed more than three days to bond with her baby, and the only way to do that was to say she wanted to parent and not place the baby for adoption. Beverly had ended up making the same decision when her daughter's had was deformed.

Frankly, I would have done exactly the same thing if I were in her shoes; it didn't seem unusual to me. Three days just doesn't seem enough time to say hello and then say goodbye. Of course, each state is a little different regarding the time the biological mother has with her baby before adoption papers can be signed. In Michigan, the biological mother has to sign the adoption release IN court in front of a judge, fourteen days after birth.

December 15, 1993

“Happiness Is a Warm Gun”
The Beatles *White Album*, 1968

"She's not a girl who misses much
OOoohh Yeah
DOoo-Yeah . . .

She's well acquainted with the
Touch of the velvet hand
Like a lizard on a window pane

The man in the crowd
With multi-colored
Mirrors on his hob-nailed boots

Lying with his eyes
While his hands
Appear to be working overtime . . . "

After three nights and days of labor, Noel gave birth to her half-sister, her father's daughter and granddaughter all in one. Noel's labor was a difficult one. She kept me up two nights and another overnight staff one night. On the third and last night, Noel was throwing up in the trash can in the staff bedroom while we were timing her contractions. (Yes, Paula would have been pissed off that Noel was in the staff bedroom if I had chosen to add that to the staff notes.) Noel had already gone to the hospital during the p.m. shift and had been sent home. She and I had gone to the hospital on night one with the same results. She was only dilated to two

centimeters when she was last checked, and the doctors wanted her to be in full blown labor before she came back.

Miserable and covered in sweat, Noel had started to rock and moan. The sheets were drenched, and she was exhausted. At 2 a.m., I wrapped her in blankets and told her to get ready to go to the hospital. I didn't think she would be able to hold out much longer whether or not she was in "true labor." I worried whether she could make it down the stairs this time, and I wondered how I was going to keep her warm in the van.

By 4 a.m. her contractions started to peter out again, but at least we were warm and safe in the hospital . . . until the intern came into the room, took a look at the contraction strip and brightly announced that we could go back to Madonna. Was he serious? Noel could barely walk. How could I get her back out to the van? How could I get her in the door at Madonna? She clearly was too exhausted to think about another round trip to the hospital . . . even if we could have made it out of the room.

"Could we have a wheelchair?" was all I could think to ask. Thankfully, the senior doctor came in at that point and said they should do an ultrasound "just to be safe," and it turned out that the wetness on Noel's bed at M/SJ was amniotic fluid and not just urine. But who would have thought to double-check the doctor? Wasn't testing for amniotic fluid like Step No. 1?

December 18, 1993

Sixteen-year-old Noel is an African-American teen with an IQ of 64. Sixty-four degrees is a pretty chilly room. She has been a ward of the State since she was ten years old when it was reported to DCFS that she had been sexually molested by her father. The father was incarcerated for five years, but after he was released he continued to have sexual relations with Noel. He was sent back to prison again, but in the wake of his sexual abuse he left an indelible imprint on his daughter. According to her psychological report she has a "preoccupation with internal stimuli related to her abuse and emotions . . . there is evidence of an auditory processing problem . . . she has little insight and hasn't been able to develop constructive coping mechanisms yet . . . she has a desire to be left alone . . . and is highly defended."

Most important, Noel has been diagnosed with "posttraumatic stress disorder" (PTSD), an emotional disturbance usually associated with war veterans. Many Vietnam War vets came back home with PTSD; they would have visual hallucinations that would force them to relive death, mutilation, and torture over and over again.

A study of urban teenagers found that the lifetime incidence of exposure to violent events was 39%, and the rate of PTSD among these exposed youths was 24%. A study of 3,700

students from different economic and social backgrounds found that 45% of young women in both urban and suburban environments had been slapped or punched at home and 16% had been sexually abused/assaulted at home.⁴⁸ From ChildHelp USA statistics: in 1992, over 2.9 million child abuse reports were filed; every thirteen seconds a child was abused in 1993. (See: Child Abuse and Teen Pregnancy, 2D and 2E.)

Researchers also found that like Noel and so many of the current Madonna residents, "the female gender was the strongest demographic predictor of trauma symptoms."⁴⁹

December 20, 1993

Noel's little daughter, Ruby, already seems a little off. Her eyes don't focus and she is terribly fussy. Does an IQ go up or down exponentially depending on whether your chromosomes mix with a Mensa member (collect 60-plus IQ points) . . . or whether you just mix it up with your dad (subtract 60 IQ points and Go To Jail)?

The American Humane Association estimates that one in twenty people have been a victim of incest. Father-daughter incest is the most common; about 70 to 90% of the reported cases. Of the teens moms who had been sexually abused, 14% was by their father, 21% by their step-father.⁵⁰

Xmas Weekend (1) 1993

For Christmas, I went to another dimension, Chicago-style. I worked eighty-five hours in five days and I had trouble with three out of the four residents who couldn't put together Christmas plans outside of M/SJ. This was my fourth Christmas at Madonna but my first one physically on site; the three previous years I carried the beeper in case someone went into labor, but was never called. *My divorce arrangement lets me keep the kids over Thanksgiving so that I can take them to visit my family back East. I love Thanksgiving—who doesn't love an eating festival? But about Christmas, if it weren't for the music, I'd rather skip the whole thing. Sure, I shop for funky stocking stuffers for Julia and David all year long. The fun part for me is to upend the contents of the stocking-stuffer-collecting bag on my (pretend) Christmas Eve with the kids to see what I've stashed away over the year and from where. Then I wrap the entire*

⁴⁸Mark I. Singer, PhD., Trina Menden Anglian, MD, PhD, et., al., "Adolescents' Exposure to Violence and Associated Symptoms of Psychological Trauma," *JAMA*, 273 (1995, No. 6) p. 479

⁴⁹*Ibid.*, p. 481

⁵⁰Debra Boyer and David Fine, "Sexual Abuse as a Factor in Adolescent Pregnancy and Child Maltreatment," *Family Planning Perspectives* 24 (January/February, 1992) p. 8.

contents—a zillion miniature presents and most of these are recycled and rewrapped from year to year.

I also love my silly Christmas tree ornaments. I have a collection of “Natural Santas” made from shells, lobster claws, chili beans, bark, gourds, etc. I also make my own out of pine cones—I call them “Santa Cones.” (51) One of my favorite ornaments, though, is one my mother made for me: etched on a ceramic disc is a cameo portrait of (a single) me flanked between two (former) black cats. My mother made it two cats ago, before I was married, before I had children, and now here I am single again flanked between two (current) black cats.

My favorite Christmas ornament story was told to me by my former mother-in-law when she still talked to me. When her mother (so this was Julia and David’s great-grandmother) first revealed signs of Alzheimer’s disease, she unstrung her double-strand, opera-length oyster pearls AND her pretend plastic pearls and then sewed them every-which-way onto cheesy Woolworth decorations which all had to be taken to the jeweler to be sorted out.



But, back to Madonna. Other than a couple of hours on Christmas day, I was there for a three-day duration, plus some. I took Christmas cards to write, my Christmas tape cassettes and I bought a brand new 1000-piece Christmas puzzle. M/SJ gave me a grocery store allowance so I could buy the extras to make our donated turkey a special feast. With Handel's *Messiah* blaring out of the kitchen and me in a cooking frenzy . . . it began to feel a lot like Christmas.

By this point, Noel had recovered fairly well from her three-day labor, and she wanted to show off her new daughter to someone. In retrospect I realize she hooked me in a clever way. One of the M/SJ board members treated the new moms to a free photo shoot at Sears. Now, all dressed but nowhere to go, Noel had a huge assortment of photos of all sizes, but no one to send them to. "If only I could give one to my grandmother in Oak Park," she said. Noel was close to her paternal grandmother with whom she lived until the father/son was jailed a second time.

51 Available for Xmas 2013. Details to come.

That time, Noel was sent to Columbus-Maryville because DCFS felt the grandmother hadn't protected Noel from the father.

All of that sounded fairly straight forward, but with Christmas in the wings and Noel's persistent need to make contact with family, I told her to get clearance for the visit and I would drive her. Holidays and bureaucratic scheduling resulted in confusing, mixed messages left second-, and then, third-hand, and I ended up driving Noel to her gram's house a couple of days before Christmas.

My heart swelled inside my chest when I saw how warmly Noel was drawn back into the fold. Even little Ruby stopped her constant fussing when Gram pulled her onto her enormous bosom and then fell soundly asleep. I marveled at the nature of families and of the miracle of that blood connection. Ruby must have smelled a familiar scent on her grandmother the way an animal does. The Christmas tree was up, and Gram had bought Noel many boxes of presents that she could open RIGHT NOW!! if she wanted. Out came bright jogging outfits, sweaters, socks, fresh new underwear. We were fed and hugged and sent back to Madonna glowing.

My assessment of the case was wrong, of course. The visit ended up stirring up unresolved psychological issues for Noel. A new court case was fast approaching and Noel started regressing cognitively and emotionally at an alarming rate. It's hard to say now why I had wanted to help Noel then, and I don't know why DCFS thought the grandmother unfit on the second go-round with the father but not on the first. In truth, the details weren't clearly drawn together in the case history. [Twenty years later I still feel guilty that I might have caused Noel harm. What if I hadn't taken her? Would she have been better off? Would she have been better adjusted today?]

My other thought was that a sexually active 16-year-old would have some boyfriends other than Daddy. Without a DNA test, how were they so sure the baby was his and not one of the neighborhood boys? I wasn't dismissing the incest, I just thought Noel thrived on any attention, and that's what she got in big doses when she talked about her father's sexual attentions toward her.

In a social service context, conflict exists between those who want to unite families at all costs and those who feel we need to bring back the State orphanage, a concept supported by Cook County Public Guardian, Patrick T. Murphy. The conflict has stalled out in legislation on child custody issues, and some cases can dangle unresolved in the juvenile courts for years, a fact that got M/SJ staff motivated to move on Daniella's missing DCFS caseworker. The aforementioned publicity over Baby Joseph's murder had produced a huge, sad list of other equally gruesome fatalities nationwide. The *Chicago Tribune* even started a series, "We Are

Killing Our Children." In rebuttal on the cover of the December 12, 1994, *Newsweek* is a black and white photo of 1930s Depression children wearing identical smocks, arms stretched out toward the photographer. The headline read: "The Welfare Debate: The Orphanage, Is It Time to Bring It Back?"

LaShonda ended up having a C-section on December 22nd. No big surprise there. I remembered Jameka's eighty-three-plus pounds and wondered how much weight LaShonda had gained. All went well post-op except the baby was a little jaundiced, so St. Joseph's kept the baby but discharged the mom on Christmas Day. Collectively, (publicly through DCFS and privately through M/SJ), it was decided that although LaShonda couldn't stay in the M/SJ parenting program, she could stay at M/SJ over the weekend and then be formally discharged on Monday. The DCFS office was closed at noon on Friday, Christmas Eve, so the system was officially shut down anyway.

Somehow LaShonda had been able to get pre-approval to visit her boyfriend's family on Christmas Day, three days postpartum. When she called from the hospital to be picked up, I realized I couldn't leave Madonna unless I took EVERYONE in the van with me, and now everyone included three infants (plus infant seats), four residents, three A/Fs . . . and a partridge and a pear tree. The solution was that LaShonda was escorted back to Madonna—in style—by a special St. Joe's limousine transport.

LaShonda arrived just as we were sitting down to Christmas dinner. Her boyfriend had been waiting for quite a while and was anxious to get going. They sat politely but briefly and then LaShonda got up slowly for the door. I could tell she was stiff and sore, but she tried to cover it up by joking with the A/F.

Only a few months separated the baseball bat incident from now, but the A/F had met with a counselor weekly, and he and LaShonda had been working on better coping skills than going toe-to-toe with each other. In truth, I was more worried about her fragile medical condition than I was about his physical violence. As they headed toward the door, I repeated: "No Stairs. No Lifting. No Baths. Feet Up." (Did I have to say no sex?) They both nodded vigorously and left.

Later that evening, LaShonda's aunt called to wish her a Merry Christmas. I explained that she had been given a special pass to visit the boyfriend's family and she hit the roof. "She's three days post-op!! How could you let her out? Who authorized that? What's your supervisor's name? What's YOUR name? Etc. etc.." I couldn't really blame her, but why had she waited all through Christmas Day to call her niece? Where was she before 8 p.m. on Christmas Day Eve,

and why was LaShonda, after all, a ward of the State and not at home with this well-intentioned, but LOUD aunt?

However, when midnight rolled around and LaShonda was nowhere to be seen, I called the DCFS hotline and the CPD. Distinguishing marks? Yes, metal surgical clamps holding a C-section incision together . . . and my voice froze in my throat. With both of my C-section-like surgeries, I was still testing my feet-to-floor skills on the third day, but I guess everyone wants Christmas to be special no matter what.

LaShonda wandered home sometime Sunday night. She already knew she was leaving the program on Monday, so what's the diff' anyway? Well the difference was my peace of mind—or is that a piece of my mind? I had imagined her doubled up with a ruptured incision or with the A/F waving a baseball bat in triumphant circles over her prone body. Either way, in my imagination, blood was oozing from her, and I was the idiot who blindly went along with those goofy, unrealistic holiday plans even though I had been there and back, not once but twice.

Xmas Weekend (2) 1993

Athena was still the darling of the program, but her halo was tarnishing (and slipping). I'm sure she wouldn't have known the lyrics to the *West Side Story* song, "Gee, Officer Krupke":

"Gee Officer Krupke . . .
You gotta understand . . .
It's just a bringing-upsky
That gets us outta hand.
Our Mothers all are junkies,
Our Fathers all are drunks
Golly Moses, naturally we're punks . . .
My parents treat me rough
With all the marijuana,
They won't give me a puff
[and]
My Daddy beats my Mommy
My Mommy clobbers me.
My Grandpa is a Commie
My Grandma pushes tea
My sister wears a mustache
My brother wears a dress
Goodness gracious, that's why I'm a mess . . . "

Music by, Leonard Bernstein
Lyrics by, Stephen Sondheim

No, Athena wouldn't have known the *West Side Story* lyrics, (for one thing, *West Side Story* came out in 1961, a full sixteen years before she was born), but Athena was just as lovingly incorrigible as the Jet's gang leader, Tony. Like Tony, Athena's family lived on the edge; her mother was on crack and the A/F was the mom's drug supplier. Additionally, without clearly spelling it out, I think the A/F had also been Athena's pimp—a real family values guy!! Strong willed and determined, though, I sensed that Athena was trying to get out from under his control when she got pregnant.

But now, Athena was locked up in a maternity "prison" home on Chicago's North Side. She was on parole; long ago she had broken every rule there was. She had also broken all the private contracts made between herself and Linda. On lined notepaper in her file was her latest "contract."

"I will not go into another resident's room."

"I will not steal money."

"I will not . . . "

At the bottom of the page she signed her name next to Linda's. The fact that she could pretty much sweet talk her way out of trouble (even stealing money) was beginning to disrupt the morale of the house as a whole. In spite of the fact that Athena didn't have any privileges left on Thursday, two days before Christmas, she managed to wheedle permission from Linda to return some shoes on the South Side. New shoes were a luxury and Athena managed to disguise her request as the teeniest, tiniest Christmas wish. Her only Christmas present didn't fit; couldn't she dash down to the store for the next size larger? We wouldn't even miss her because she'd be right back.

Coals to Newcastle and sand to the Arabs. In this case it was a lonely Christmas wish to big-hearted Chicago Catholics. We weren't even in the same league: Athena was major league material while we were Tweedle-Dee and Tweedle-Dum in the sandlot league. What a surprise when she no-showed at midnight.

By now I knew several teams of the midnight shift cops. I even had a date with one of the cops who came to escort LaShonda to the hospital on shampoo night. "What was she wearing this time?" "Who knows? Coffee? Cookies? Teens don't wear just one outfit a day."

When the residents went on the run, they took their babies with them. When I look back on the pre-parenting days, I would have guessed the girls would have dashed off without their little wet bundles, but so far that hadn't happened. The babies were not wards of the State, they were with their mothers. This seems obvious out of context but has to be sorted out during the

police report. Really there is just ONE missing person—the baby is not lost or missing because he/she is with the mom.

Athena and Tommy came back sometime on Friday afternoon Christmas Eve and slept until Christmas morning. Friday morning, before their return, Linda checked the telephone number against the address and found that they didn't match up. Actually, the CPD pointed out the discrepancy and Linda followed up on it. She found that the address was on the South Side just as promised, but the phone number was in the Henry Horner Homes Project on the West Side.

One hundred and sixty-eight high-rise buildings for 20,000 families were built in Chicago in the 1950s and 1960s.⁵² When the twenty-story buildings were on the drawing board, were social workers and family psychologists consulted about the design? A young child is out of parental supervision below three stories. How was a mother on the 12th floor able to cook dinner AND keep an eye on her children down in the playground? Perhaps a mother wouldn't let her children out without her; some children wouldn't see direct sunlight for weeks or months. Who was to blame for this oversight? As a society we seem quick to blame family breakdown and growing gang activity for this abomination. The war on drugs targeted African-American males and the monolithic towers destroyed and desensitized families. We couldn't have choreographed a better script for such atrocious, inhumane results.

All of the DCFS teens had wild stories to tell about the projects where drugs were plentiful and parties happened all night long. Before she went up to bed, Athena asked if she could use the staff phone to call her DCFS worker. And why did she want to call her worker? To ask if she could get a Christmas pass out of Madonna. I was speechless and had to look deep into Athena's big round eyes to see if she were kidding. She had lost all of her privileges, and I had already notified DCFS and the CPD of her return. Now she wanted just this one more, little bitsy indulgence. (Why didn't she just stay on run while she had the chance?)

Christmas Day, 1993

Christmas morning dawned. At Madonna we had Noel and Ruby, LaShonda, Athena and Tommy, Brittany and Patrick. I planned to serve Christmas dinner at 1 p.m. and had already started on the turkey, stuffing, mashed potatoes and extras. My rule, of course, was that when I was in charge of the kitchen, I was in charge of the music. I fluctuated between the Clancy Brother's *Christmas* and Handel's *Messiah* and I played them both LOUD!! I know the residents

⁵²Ed Marciniak, *Reclaiming the Inner City, Chicago's Near North Revitalization Confronts Cabrini Green* (Washington, D.C.: National Center for Urban Ethnic Affairs, 1986) pp. 96-98.

were suspicious of me and would send sideways glances to each other when they thought I wasn't looking.

By noon, everyone started getting restless. The turkey was almost ready to be served and the fragrance permeated the house. The A/Fs were milling around and I put them all to work setting the table and looking for serving bowls. They made a big fruit punch and spiked it with ginger ale.

Noel's boyfriend, Arthur, was big and clumsy, but because he offered his last name to little Ruby, he was Noel's Knight in Shining Armor, her Mr. Right—maybe not her Daddy Warbucks because she already had a Daddy . . . and, it goes without saying that neither of these two dudes were rich. But Arthur's gesture was an act of kindness in this cruel world. Now Ruby would not be considered a freak or a bastard child . . . maybe just a little unusual; hopefully with an IQ above freezing water.

Athena woke up late on Christmas morning with finally a trace of remorse showing through her armor. Tommy could walk now and needed to be watched constantly or be put in a baby jail—what the teens called a play pen. When he was confined, he would howl miserably. I half expected to see him transform into wolf-boy on my next pass through the dining room. I wondered if he would grow up to be one of the lucky one-in-four African-American males to be both employed and out of jail.

Athena followed me from room to room and all around the kitchen. I remembered how Cassie cozied up to staff at exactly the same time she was stealing from the family for whom she baby sat. There's a saying: "Keep your friends close, but your enemies closer." Athena stuck to me like glue. She asked me questions about my recipes and about my children. Athena was a pro at verbal nuances and she sensed the raw note when I talked about my children. She drew me out. At this point, we were on relatively neutral territory: I knew she was leaving the program on Monday when Linda returned; she knew that even though I called the shots this weekend, I was "just" the overnight staff filling in on a holiday.

Athena was built for flight OR for fight: it didn't matter to her—she was panther-ready for anything life could throw at her. Occasionally she would pass by the puzzle set up in the living room knowing that I was the only puzzle-maniac left in the house. I don't think she had ever worked on a puzzle before but, not surprisingly, she had a good spatial sense for color and shape. I wished I could have videotaped her as she centered her energy inward to confront the puzzle. When she got her first piece in, she was infused with success and her eyes began to glitter. She spent more and more time working on different parts of the design.

Athena and I now shared a common goal and soon I was no longer that strange white woman playing that weird music in the kitchen. She would laugh without restraint when I put in a piece that was . . . well, close . . . but not quite. I think she loved seeing someone in authority make simple mistakes; mistakes she wouldn't make.

I didn't know what would happen to Athena. Linda told me that she would have to move into a more structured environment and that those places were just for teens. In other words, Athena and Tommy would be separated after Monday—an unbelievably tragic thought. I couldn't imagine them without each other.

Even though she took every ounce of energy, I would take an Athena over a Noel or a LaShonda any day. As our heads bent over the puzzle, I tried to give Athena my point of view: If she could just play the game by their rules until she was 18 in a year and a half, she could have her life back. At age 18 she could be emancipated from the State system (and please, in the meanwhile, get a high school degree!!). With luck, Athena would be able to make choices about her future and not let society turn her into a hideous old hag when she truly was a New-Age princess.

In truth, I couldn't imagine the Athena I grew to love playing by any rules she herself hadn't made . . . even if only for a year and a half.

As Athena put in one puzzle piece after another, she started to crow for Handel:

"Hallelujah!! . . . Hallelujah!!" And SHE shall reign forever and ever.



January, 1996

A couple of conclusions can be made about the rise in unwed pregnancy in the United States and about teenage pregnancy in particular. However these words have probably have all been said by politicians, social workers, school teachers, law enforcers (police and lawyers), the clergy and the families themselves. Whatever I could say in conclusion has already been said. The issues are complex and one answer doesn't quite sum it up. Murphy Brown's reasons for wanting to parent her child alone would be completely different from an urban teenager's reasons for wanting to become a single mother.

However, I would say that linking family planning clinics directly to schools would be a starting place; making ALL men own up to and be responsible for their progeny would be another; insisting that love and money and health were commodities to be given out in equal shares would be another.

March, 1996

Most of what I've written has been in the first person narrative so I'll close in a personal voice also. When I started this journal about the Madonna/St. Joseph Home back in 1990, I wanted to work through my own feelings about being a woman and being a mother; about mothering and being maternal; about merging and separating. Like Demeter and Persephone, Mother and Daughter, the differences were clear one moment, mercurial the next. For me, the variations were endless . . .

When my mother died in 1984, my 75-year-old father decided it was time for him to develop his female/maternal side—to BECOME the Mother. It was an odd fit at first, but we both needed it to keep my mother/his wife's energy alive and flowing through us. We both missed her terribly. Oh, we didn't truly exchange recipes, or mending and household tips when I say that he wanted to *Become the Mother*, but I think he wanted and needed to have a bond with me and my young children, and that could only have happened without testosterone crashing around;

and I, at 35, still wanted my Mommy. The relationship we came up with was full of love and uniquely our own.

I am grateful I had the nerve to share a much rougher version of this journal with him in 1994, six months before he died. My conclusions about the repressed and devalued feminine in our culture come straight from my father's breast (okay, heart!).

From one of my father's many letters to me about my experience at Madonna he wrote:

Dear Betsy,

Do you call the world that these women live in "the other side?" What a profoundly touching, utterly true-to-life, rock-bottom layer of experience. How these short bios illuminate in a flash a young woman's character and personality—the terrible choice between parenting and adopting, the touchy relations to parents and siblings, the often miserable sometimes thrilling picture of the young father and his sense of responsibility.

The lightening-flash spot on the dark side of sex. Of our biology. How to help young men? How to help young women? More free condoms? More sex education? More Madonna/St. Josephs?"

September 22, 1991

RESIDENTS BY NAME

(Residents' names have been changed)

(** Deliveries I assisted) (**LBD**=Left Before Delivery)

Chapter One:

Amber, a **15**-year-old African-American girl, was one of those young women who didn't look even vaguely pregnant when you saw her from the back. Ant-like, her petite frame and spindly arms and legs seemed to contradict her incredibly huge stomach. She took her teddy bear to the hospital. **Parented.** (Left baby with auntie after 6 months. August 1992, she was pregnant again.)

Carmen is a **17**-year-old Hispanic girl. Her pregnancy was confidential to most of her family and friends. Her parents were separated and her father and older brothers were unaware of her pregnancy. **Parented.**

Colleen, a **23**-year-old Irish Catholic girl from a terribly dysfunctional family, still can't decide whether to place her baby or not. **Parented.**

Cassie, a **19**-year-old "adult" resident, was feisty and would often verbally spar with staff. When she's pushed to make plans for when the baby arrives, she says she is going to "stay with friends" and then hook into the welfare system. Stole from family she babysat for. **LBD**

Emily is a **17**-year-old teen from a small town in Indiana. She found a family through Lutheran Social Services that not only wanted to adopt a biracial baby but would also allow liberal visitation rights for Emily. "The Relinquishing Ceremony" celebration and reception was held at the little Catholic chapel within St. Joseph's Hospital. **Adoption.**

Jennifer, **14** years old, gave birth to a little girl. Jennifer herself was adopted, and she's going to place her child with a biracial couple as the A/F is black and Jennifer is white. **Adoption**

Heather, **20**, has been diabetic since she was a little girl. Under normal conditions, she knows how to keep her blood sugars on an even keel, but as soon as she became pregnant, her body developed a mind of its own. **Adoption.**

Gina is at St. Joe's with premature contractions. Gina is **17**, frail and hardly looks the seven and a half months pregnant that she is. She is fragile, beautiful and bashful, and terribly vulnerable to her Italian machismo heritage. Her boyfriend is Butch. **Parented.**

Kyle was a wonderful black-eyed, **20**-year-old Irish girl enrolled at a Catholic college in Wisconsin until she found out she was pregnant. At that point, she transferred to DePaul University and hardly missed a beat—or a semester. She placed her baby for adoption. What made Kyle's story unique was that the A/F was an integral part of her stay at Madonna. **Adoption.**

Jessica, a 16-year-old Caucasian girl is in her ninth month of pregnancy. Jessica's pregnancy was under wraps to all in the extended family. Christmas Day was a logistical problem because the aunts and uncles would confront her enormous belly unaware. In short, Jessica was not welcome home. **Parented.**

Chapter Two:

Hailey. With two inches of dark roots, eight inches of long, blonde hair and many inches of highly teased bangs, 16-year old Hillary gave birth to a baby boy. **Parented**

Jameka, the 17-year-old kitchen rule-breaker, is all upset because she wants a white family to adopt her baby which isn't likely to happen. So either Jameka parents her child or she has an auntie offer to take in the baby (which doesn't seem likely at this point as Jameka, just as she has done at Madonna, has alienated all in her extended family), or the baby goes into a foster home, or into temporary custody waiting for adoptive parents to materialize, which might not happen. **Parented.**

Lydia. Snippy, nasty, 20-year-old Lydia had a baby boy. I didn't like her very much and was glad when she delivered at the beginning of December and moved out. Jameka and Lydia's kitchen violations on my shift were minor infractions compared to their subtle bullying tactics on the weekends, which included television tyranny and kitchen domination. **Parented.**

When **Latasha, 14**, was 6 years old, she was sexually abused by her step-father. Somehow DCFS was alerted about Latasha and she was then placed with various foster families. Several years later social workers discovered that she had been sexually abused by most of the foster fathers in her different placements. **Parented.** (Returned for #3 pregnancy in August, 1993; three different A/Fs, the first two children are in different foster homes.)

Mary Ann, a 26-year-old college grad, had two previous abortions and was in the middle of tremendous life changes when she found out she was pregnant for a third time. Mary Ann moved into MS/J to get away from a physically abusive A/F, but her immediate catalyst for life change was her father's death a month after she found out she was pregnant. **Adoption.**

Michelle, 19, was at Madonna for less than two days before she was discharged. Michelle came from a well-to-do Evanston family and she was seven months pregnant. The A/F was her African-American drug dealer. Michelle's parents did not want her at home because they said they couldn't handle her. M/SJ seemed like the best alternative after family counseling got things stirred up. **LBD**

Nichole. Developmentally challenged (delayed?), 20-year-old Nichole moved in. As Nichole's pregnancy progressed, she became tenacious about parenting her baby. She had been talked into placing her first baby over a year ago, but this one she wanted keep. With a sub-par IQ, staff got concerned about Nichole's parenting abilities. **Parented.**

Rachel's baby was biracial. Rachel, **16**, the daughter of a South Shore alderman, was sent to Chicago to have an anonymous pregnancy followed by a quick placement. (Chapter 4. A year and a half later, Rachel was gang raped by four men, had her head shaved, was tortured with razor blades and branded with gang symbols before she was finally heaved (alive?) into the Calumet-Sag Canal.) **Adoption.** [**]

Profiles of older Caucasian women who left M/SJ before delivery (LBD):

Laura L. 26

Patty M. 21

Sharon B. 35

Sarah, 19, was pregnant with an African-American man she didn't know very well and so she planned to place the baby. When Samantha selected her family, all that was needed was to sit back and wait for the blessed event . . . or so she thought. When the family went to the hospital ready to fall in love with their little bundle of joy, they decided that the baby had been in the oven too long. Could they, instead, have one that wasn't so dark? **Adoption.**

Tracy, a **17**-year old suburban referral from Lutheran Charities, has flip-flopped her decision to parent or not almost daily. She often waits until I start work at night to share her updated pros and cons list about parenting or placing. The A/F occupies only a small portion of her deliberations. **Parented**

Wendy, 17, blonde with curly hair and cute freckles across her cheeks, is another troubled teen. To me, she probably represents the voiceless female more than anyone else. Unlike Tracy though, Wendy is totally unable even to make the lists. **Adoption.**

Victoria is one of the most interesting of the women at the center and is probably the prototype envisioned when the program was started. After she graduated from college, she joined the Peace Corps and was sent to Africa. Catholic Charities tried to dissuade her when they realized that the adopting Nigerian mother would be over 40 years old when the baby was born. Undaunted, **24**-year-old Victoria heard her own inner voice loud and clear. This "older" woman and her "younger" husband were selected to make a difference in Victoria's baby's life. **Adoption.**

Chapter Three:

When **Allison Z. 19**, came to Madonna, she weighed 110 pounds, but she was six months pregnant. Highly intuitive, introverted in the extreme and punishingly self-critical, Allison was anorexic. What complicated her pregnancy was that her father was militantly opposed to abortion. He was one of those extreme anti-abortionists who staged sit-ins in front of abortion clinics. **Adoption.**

Beverly, 35, was one of the oldest residents to complete the program during my time at M/SJ. She had a history of drug and alcohol abuse but had recently completed an in-house rehab

program, so she attended AA meetings while at M/SJ. Also Beverly had had several abortions and couldn't justify another. Beverly's baby girl was born with a hand deformity so she nursed and held her baby for three months before she let *The Reader* couple adopt her. **Adoption.**

Cynthia, 21, a recent college grad, delivered a baby at St. Joe's and placed him for adoption shortly after. Cynthia was an energetic Caucasian woman who worked at several jobs during her pregnancy. She was able to plan ahead, stay within her budget and even pay off some of her college bills. She never wavered in her post-delivery plans to place her baby. However, Cynthia's postpartum depression aggravated a pre-existing condition: a lithium imbalance and she was in the psych ward at St. Joe's for two weeks. **Adoption.**

Debby was a seventh grader when she started babysitting for a young couple who went to her church. The couple had a 2-year old son and the mom was pregnant. Now two years later, Debby was practically considered a family member, but Debby seemed also to have developed a special bond with the children's father who drove her home each night after babysitting. I guess, in the end, "special" doesn't quite describe their relationship—after one of their nights of sex in the family station-wagon, **16-year-old Debby** became pregnant. **Parented.**

Elizabeth, 21, is pretty and blonde and was just finishing college when she found out she was pregnant. Her parents were proud of her decision to give her baby to a couple who couldn't have a baby of their own. She moved into Madonna, finished up some course work, and worked part time in an office nearby while she waited to deliver. The absolutely mind-boggling part of Elizabeth's story for me was that her brother was her labor coach. **Adoption.**

Chapter Four:

Ebony. When it became obvious that **26-year-old Ebony** was miscarrying her baby whether from self-inflicted attempts to abort or from her body's own spontaneous contractions, the St. Joseph's staff would not help terminate the pregnancy in any way. The doctors knew by way of an ultrasound that there was not enough amniotic fluid to sustain life, and Ebony told them herself that she got drunk on New Year's Eve, shot up some cocaine, and then tried to puncture her uterus with a knitting needle. **Baby Died**

Ginger was a **17-year-old** Caucasian girl who had been in and out of the state system for at least the last eight years. She and her older brother caught the attention of DCFS when they were found tied together, naked in a water-shed. She was 7 years old and he was 9. **Parented.**

Chapter Five:

Typical Bios of Caucasian girls who placed babies for Adoption:

Carol S., 18

Mary G., 19

Germaine was a quiet, young **16-year-old** African-American girl who was referred by DCFS. **Parented. [**]**

Jade was a beautiful **15**-year old Jamaican girl. However, Jade had premature labor. At week twenty-eight, Jade's cervix started to dilate, and she was quickly put on medicines to slow down a premature delivery. **Parented.** (Left baby with auntie 9 months later.)

Karla is **16** years old. She is a light-toned, African-American woman who moved into Madonna because her parents wanted her to have peer support during her pregnancy. Her mother is a school teacher and her step-father is an electrician for the City of Chicago. Karla was dismissed from the program for putting Clorox in her roommate's contact lens case. **LBD**

Olivia, 20, is mentally delayed, and sometimes she is physically awkward. Maybe she has a touch of Cerebral Palsy, but I don't remember. **Parented.**

Lakeisha, 18, Karla and Lakeisha had formed a nefarious alliance just as Jameka and Lydia had. When Karla was discharged, Lakeisha lost some of her dominance. **Parented.**

Mimi, 16, has vacillated a little about parenting or placing but she has decided to place her baby with an adopting couple who live in Evanston. Impulsively, Mimi called the adopting mom who arrived at bedside in speed-breaking moments. In the end Mimi decided to keep her baby, so it was probably just as well that that unknown suburban woman, that semi-stranger, wasn't in the delivery room when the baby was born. **Parented. [**]**

Octavia is a large, plain African-American teen. I think she is **17** years old. The most unnerving thing about Octavia is that she sucks her thumb . . . ALL THE TIME. Her first daughter lives with her fraternal aunt. I don't know how frequently Octavia visits her. Octavia had the name of the first A/F tattooed on her forearm. The second A/F didn't like that so he doused the guy's name with perfume and set the fumes on fire. Of course, the fumes were still attached to Octavia's skin and she ended up with third degree burns. **Parented. [**]**

Opal. My fifth delivery and my fourth in four months, was Opal, a **15**-year-old African-American girl who delivered a month early. Her auntie helped in the delivery room. **Parented. [**]**

Precious, 17, is depressed because her boyfriend was arrested for gang activity. Precious's boyfriend was held without bond on charges that he killed three people and injured another during a ten-minute crime spree. **Parented.**

Sapphire, a bright, pretty **14**-year-old African-American girl had a C-section. Poor little thing was sent home after four days so she could be home for Christmas . . . to take care of her mother's four other children. **Parented.**

Chapter Six:

Tiffany is an **18**-year-old Caucasian girl from a small town in downstate Illinois. She has been HIV+ for five years. She was raped by an infected man when she was 13 years old. The unbelievable fact about Tiffany and the A/F is that they already had a 2-year-old baby boy. **Parented.**

Shannon, 21 years old, is a black-eyed Irish woman with a huge mane of hair that sometimes is unruly and wild, sometimes shimmering with blue/black highlights. I would have thought the peaceful, ample grounds and relative ease of the old convent would have jump-started Shannon into constructive planning about her future, but I guessed wrong. She ended up parenting her daughter, but the baby had to stay in the hospital for a few days. **Parented.**

Zoey. The photos of a trim **15**-year-old Zoey with long, blonde hair laughing with her school chums seem miles removed from the 16-year-old pregnant Zoey lying on a bed at the Madonna/St. Joseph Center. Zoey's body has betrayed her. The reason she is lying on her bed with her feet elevated on a stack of pillows is because she has toxemia which started in her 26th or 27th week at the beginning of her third trimester. **Parented.**

Maya is a **17**-year-old Filipina girl with long, shiny black hair and four older brothers. As seems typical of Asian implants to the United States, Maya tested well in both math and science and was accepted into Lane Tech, considered one of the best public magnet high schools in the city. When Maya moved into Madonna, she transferred out of Lane Tech and into the local Catholic school to finish her senior year. The A/F's family did not approve of Maya and sent the boy back to the Philippines. **Parented.**

Mercedes, 18 years old, is loud and opinionated. Second-generation born in the United States, she speaks without a hint of a Spanish accent. And speak she does, almost incessantly. Mercedes boasts about how much beer she can drink, how many boyfriends she has, and about what her family is able to give her. **Parented.**

Merita, 15, on the other hand is a beautiful, soft-spoken Mexican teen who still struggles with her English. She was born in the northern mountains of Mexico fifteen years ago. **Parented.**

Rita was part of the group of Latinos from the West Side. She was a mature, **15**-year-old teen whose father threatened to disown her if she parented. Rita intuitively knew she was too young to be a mother, but as a teen she wanted to have the decision to be hers—not her father's. Rita rarely mentioned her mother. Rita's baby is in temporary quarters. **Parented.**

Shanika. (14) Fourteen-year old, African-American Shanika, for whom the anti-contraction medicines hadn't worked, gave birth to a 2.5 pound baby who had to stay at St. Joes until he weighed 4.5 pounds. In real time this was a little over a month, during which time Shanika fell apart. **Parented.**

Chapter Seven

Athena, African-American, is **16** years old; her son Tommy, with huge, nut-brown eyes and a head full of ringlet curls, is 6 months. **Parenting on Admission**

Brittany has been living at Madonna since the beginning of June. **(15)** Fifteen-year-old Brittany, African-American, has been a ward of the state on and off for several years. She is the oldest of three half-brothers ranging in age from 10 to 14 years old; all four siblings have a different father. Brittany, just under 5-feet tall, has a full scale IQ of 82 with fifth grade achievement. She frequently projects her anger and hostility on others or withdraws completely. Further, she has ominous and foreboding percepts of crabs, spiders, robots, frogs and she tends to view the world around her with suspicion . . . " **Parented.**

Charlotte, 16, had just moved in, so she hadn't had her first O.B. check at St. Joseph's yet. Her Polish-Catholic family was mortified about her pregnancy; they shipped her off to Madonna just as soon as she started to show. She delivered at Madonna because she was off on the dates of her last period. Charity and baby were welcomed home by the brand-new grandmother . . . who just happened to have a brand-new layette from Montgomery Ward waiting at home for just the right brand-new baby boy **Parented.**

Daniella, 18 years old, gave birth to a daughter a month ago. Daniella is strongly motivated to finish high school and has registered at Truman College [where I started teaching fourteen years later] to finish her GED. She has done well and studies a little every night after supper. She hopes to be admitted into an independent living program after her GED program wraps up and after she and the baby have bonded a little more. **Parented.**

Eliza, one of the younger teens ran away from Madonna on her due date. Perhaps that rash act clearly defines the difference between me, a middle-aged mom, and Eliza, a **14**-year-old mom-to-be. **LBD**

LaShonda, 16, is seven months pregnant and has had a miserable pregnancy—mostly because, like Hope, she has gained too much weight and was out of shape to start with. LaShonda's A/F threatened her with a baseball bat last weekend. M/SJ staff was able to convince her to get a restraining order on the A/F, but she is now having second thoughts as she contemplates her benign and sterile world behind the walls of a maternity home where there are rules and curfews. **(16)** Sixteen-year-old LaShonda ended up having a C-section on December 22nd. **Parented.**

Jacinta. Sweet young, **15**-year old Jacinta has been having a rough time of it all. Her psychological report simply says, "When Jacinta was only one or two years old, both of her parents discontinued caring for her." Abandonment and its twin sibling—sexual abuse—set Josephine up for "an impoverished emotional life with a dampened sensitivity to pleasure." Originally she planned to place her baby for adoption. **Parented.**

Ivy. For several years, **Ivy** has lived in a senior citizens building. In exchange for providing home health care for her step-grandmother, a long-term stroke victim, **16**-year-old Ivy got free room and board. Daily chores included helping her grammy in an out of bed, bathing her and doing all of the cooking and shopping. An understatement from her psychological evaluation: "Living in the senior citizens building has not provided Ivy with a lot of opportunities to interact with other kids her age." **Adoption**

Noel. (16) Sixteen-year-old Noel is an African-American teen with an IQ of 64. Sixty-four degrees is a pretty chilly room. She has been a ward of the State since she was ten years old when it was reported to DCFS that she had been sexually molested by her father. After three nights and days of labor, Noel gave birth to her half-sister, her father's daughter and granddaughter all in one. Noel's labor was a difficult one. **Parented.**

GLOSSARY*

BAG OF WATERS

The membrane containing the amniotic fluid and fetus.

BRAXTON HICKS CONTRACTIONS

Intermittent contractions of the uterus that are painless and that may occur every 10-20 minutes. They occur more frequently toward the end of pregnancy and are sometimes not taken for true pains.

CENTIMETER

Unit of measurement used to describe cervical dilation. Used interchangeably with "fingers" (one "finger" equals 2 cm.)

CESAREAN (C-SECTION)

Delivery of the fetus by means of an incision into abdominal wall and the uterus; also called abdominal delivery.

CIRCADIAN CLOCK

Our internal circadian biological clocks regulate the timing of periods of sleepiness and wakefulness throughout the day. The circadian rhythm dips and rises at different times of the day, so adults' strongest sleep drive generally occurs between 2:00-4:00 am and in the afternoon between 1:00-3:00 pm, although there is some variation depending on whether you are a "morning person" or "evening person."

ECTOPIC PREGNANCY

Implantation of the fertilized ovum outside the uterine cavity; common sites are the abdomen, fallopian tubes, and ovaries.

ELECTRONIC FETAL MONITORING

Monitoring with external devices applied to the maternal abdomen or with internal devices with an electrode attached to the fetal scalp and a catheter through the cervix into the uterus, to detect and record fetal heart tones and uterine contractions.

LAMAZE METHOD

The terms psychoprophylactic and Lamaze are used interchangeably.

Psychoprophylactic means "mind prevention," and Dr. Fernand Lamaze, French obstetrician, was the first person to introduce this method of child birth preparation to the Western world. Psychoprophylaxis actually originated in Russia and is based on Pavlov's research with conditioned reflexes. Both Marjorie Kamel's *Thank you, Dr. Lamaze*

(1965) and Grantley Dick-Reed's *Childbirth without Fear* (1994) helped make painless childbirth popular.

MASK OF PREGNANCY

Facial chloasma, or darkening of the skin over the forehead and around the eyes, occurs in varying degrees in pregnant women after the 16th week. This condition is aggravated with exposure to the sun and is more prominent in dark-haired women. It is hormonally induced and fades after pregnancy.

PITOCIN - OXYTOCIN

Hormone normally produced the posterior pituitary, responsible for stimulation of uterine contractions and the release of milk into the lactiferous ducts.

POSTPARTUM DEPRESSION

- * A transient period of depression occurring after delivery usually lasting for about 6 weeks. (until involution of the uterus is complete).
 - * Anorexia, tearfulness, difficulty in sleeping and a "let down" feeling.
- Ego adjustment and hormonal changes are both thought to be causal factors, although fatigue, discomfort, stimulation overload, or stimulation deprivation may also play a part.

PREGNANCY RELATED

A weekly group meeting at M/SJ designed to provide residents with information regarding subjects such as conception (of course, without discussing sex), the stages of pregnancy including fetal development and labor and delivery. Seminars covered a wide range of topics including parenting skills and designing a household budget. Sometimes guest speakers were scheduled. Attendance at Pregnancy Related was mandatory.

PRENATAL CARE

American College of Obstetricians and Gynecologists (ACOG) 1989 Report

Normal Prenatal care:

- * 1st 6 wks of gestation (1st day of last menstrual period)
- * monthly - 6th month
- * 2x a month - 7/8 month
- * weekly after that

TEMPORARY CUSTODY

Licensed by DCFS with assistance from Catholic Charities, these fosters parents care for newborns until a decision is made regarding custody. This amount of time can vary from days to months.

TOXEMIA (PREECLAMPSIA & ECLAMPSIA)

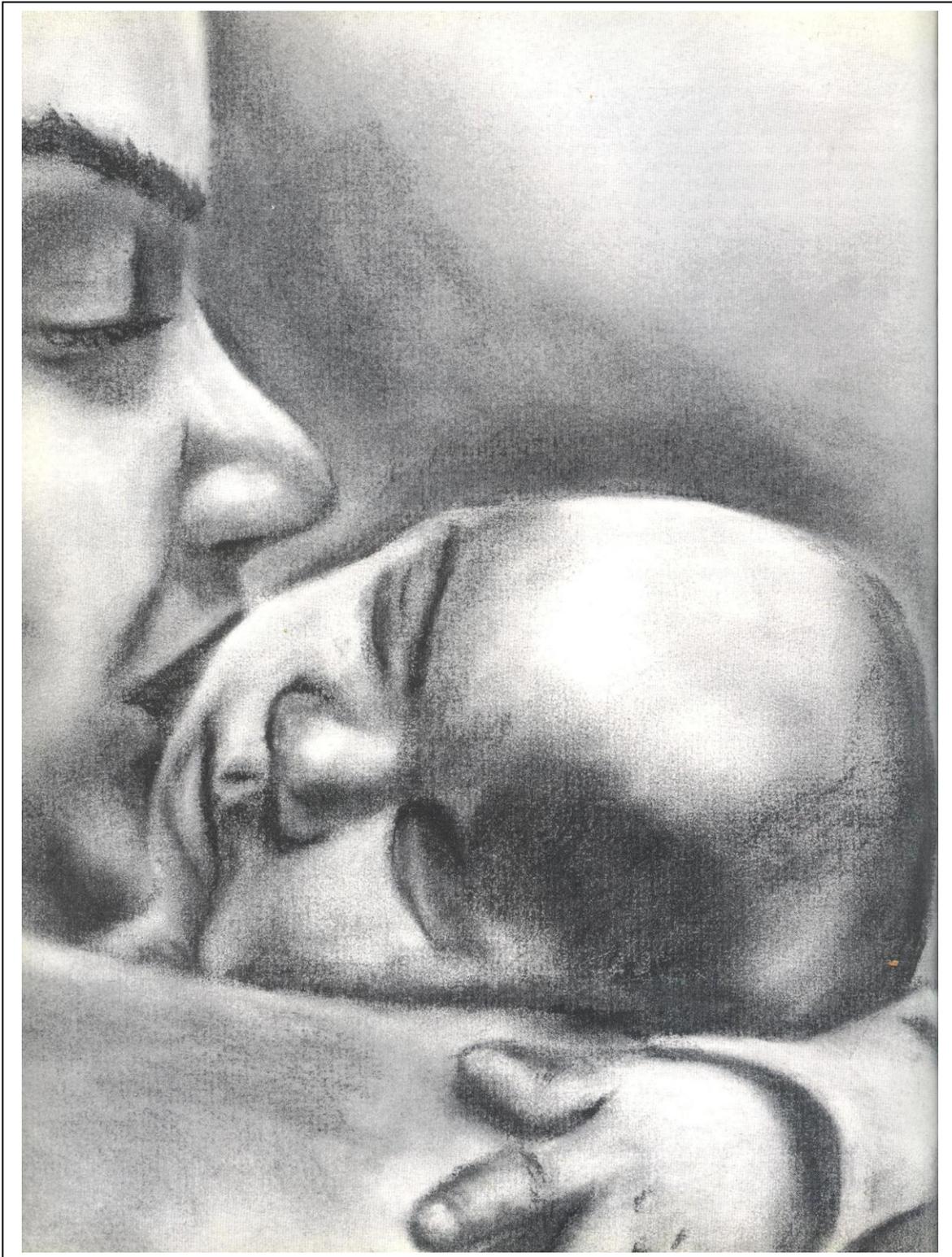
Preeclampsia & Eclampsia are two major disruptions occurring in the 3rd trimester...They are characterized by the development of hypertension, excessive weight gain caused by fluid retention, resulting in edema

Preeclampsia is seen most often in the last ten weeks of gestation, during labor or in the first 12-48 hours after delivery. Teenagers and first-time mothers (preeclampsia)

ULTRASOUND

Visualization of the fetus and the placenta by means of sound waves.

**“DISCOVERING MADONNA.” *ECHO MAGAZINE* (1997) CHICAGO’S
COMMUNICATION MAGAZINE: COLUMBIA COLLEGE CHICAGO PP. 50-56**



Discovering Madonna

Elizabeth Kittle's one-year experience can be condensed into one day. But what she learned will forever affect how she views her role as a female and as a mother in this society.

Story by Elizabeth F. Kittle / Illustrations by Brenda Rienke

Names have been changed, the chronology truncated. But the truth shouts from the pages of Kittle's diary of a day as a counselor of young, unwed mothers. She struggles with her own feelings about being a woman and being a mother; about mothering and being maternal; about merging and separating. Like Demeter and Persephone, mother and daughter, the distinctions were clear one moment, hazy the next. That old maternal tug was powerful, indeed, stronger sometimes

than common sense or self-interest. The day begins.

3:30 a.m.

"Don't go! Please don't leave me again!" Fourteen-year-old Natasha's eyes were black with fear. I had been gone no more than 30 minutes, but when I got back to Natasha, she was alone in the hospital room crying, the guard rails up on her bed.

An hour ago, enormous labor contractions had brought her up on all fours every six minutes. The contraction waves on the monitor had leveled out at the top of the strip only because

it had run out of room. Forget the Lamaze breathing; I had to grab her IV and both monitor cables when she inhaled her way up to her knees. Did she have a catheter at this point too? The nurses, wanting to slow things down, had given her a sedative and almost immediately everything responded just that way. Natasha began to sleep through her contractions. I was physically and emotionally exhausted. Whimsically I thought about the Three Little Bears and their porridge, chairs and beds ... wishing for my own bed. As if reading my mind, the nurse told me this would be

a good time to go get a cup of coffee and a snack in the cafeteria.

But now, Natasha's fickle contractions had suddenly returned to their full, nasty force. She clung to me with tears in her eyes, "Please stay with me!!!" I had let her down — when she needed me, I'm off having doughnuts. I was consumed with guilt, a feeling that quickly triggered into my personal life. Translated, this guilt read: "Why were my own children sleeping at their father's house and why wasn't I with them?" I hated being separated from my children and was angry that my hard-fought battle for independence from a suffocating marriage had meant choosing either a false identity for myself or canceling my children's rights to a normal Mommy.

My ex-husband and I had been separated for two years at this point. I had moved out (and he had not) because I felt I could retain a sense of ME whether I lived in a two-flat or a two-room apartment. My move out of the family home was unusual (nationally, only 5 percent of divorced mothers are non-custodial parents), but intuitively I knew becoming economically dependent on him would be a psychological disaster for me. I moved five blocks away and went back to work. Lawyers set the amount of child support I was to pay according to Illinois guidelines (25 percent of net income for two kids). The fact that I wanted to have some daylight hours alone with

SEXUAL ABUSE AND TEEN PREGNANCY

Researchers found that nearly two-thirds (62 percent) of 535 pregnant teens in a Seattle study (1988-1990) had been sexually abused. Almost one-quarter (24 percent) of these teens, like Natasha, had been molested before they were 6 years old.

This study concluded that sexually abused teens were more likely to have had more than one partner and to have exchanged sex for money, drugs or shelter. Abused young women are also more likely to have repeat pregnancies, to be impregnated by various partners, and to be single parents. Other studies show that 95 percent of teen prostitutes and 31 percent of women prisoners were sexually abused as children.

the kids and didn't want to parallel the dad's work schedule made my job search difficult. Weird time restrictions and iffy insurance, not to mention bottom-line financial requirements, had put me in the labor and delivery ward of St. Joseph's Hospital on Chicago's North Side at four in the morning.

Did I mention Natasha was 14 years old? Well, she had just turned 14. When Natasha's pregnancy started to show, the Department of Children and Family Services (DCFS) had moved her into the Madonna/St. Joseph Center, a maternity home in Wrigleyville run by Catholic Charities. She was 13 back then — but that was months ago. A few hours ago when her bag of waters had ruptured, I quickly locked up the center and we jumped into the van. Natasha was quiet and tense on our 10-minute ride to the hospital. Resting against her enormously pregnant stomach, she clutched her raggedy old teddy bear. During our midnight drive, a chiaroscuro effect was created when the street lights crossed her face: Madonna-to-be with Teddy.

I struggled to think of upbeat things to talk about. "What about them Bears?" would have been the safe guy thing to say, but the Chicago Bears were pretty much at the bottom of the NFC this year.

As the blocks swept by and the distance to the hospital shortened, Natasha held her teddy bear closer and then finally pulled him inside her jacket. I turned on the radio.

Were we a part of the natural biological side of life or were we symptoms of our times? Being a single mother at 14 couldn't be considered a historical anomaly, but with today's extended life span, 14 just seemed awfully young to me. Would she still sleep with her teddy bear after delivery or would she put teddy in the crib with her baby?

When Natasha was 6, she was sexually abused by her stepfather. A horrific thought for me, made even more sickening when I observe my own 8-year-old daughter sleeping with her teddy bear. Mercifully, DCFS was alerted to Natasha's case and over the years she was placed with various foster families. In our imperfect system, however, social workers later discovered that she had been sexually abused by most of the foster fathers in her different placements. Blasé and without personal limits, Natasha will describe in minute

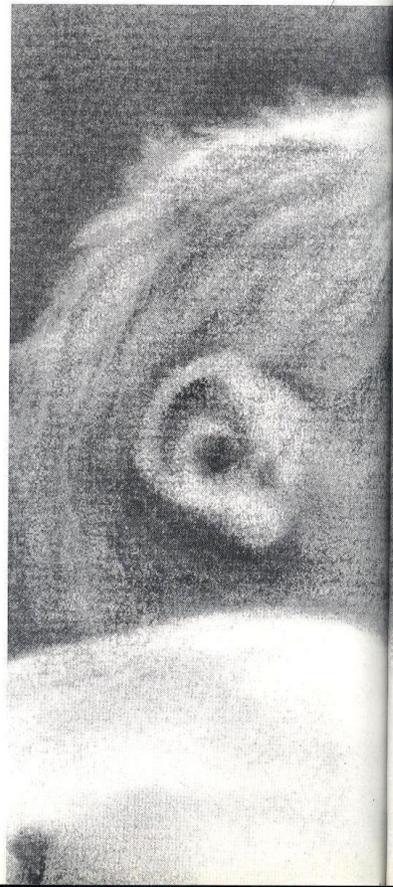
detail, to almost anyone, the particulars and variations of her sexual abuse.

Studies have shown that children who have had involuntary sex (a.k.a. sexually abused kids) have difficulty practicing protective behaviors and are at high risk of becoming a teen pregnancy statistic. These girls reported to have "left their bodies." They had stopped feeling. They felt tainted and spoiled — just like Natasha.

7 a.m.

Unfortunately for me, Natasha was still in labor when the a.m. staff arrived at the hospital; Natasha delivered late that afternoon after 15 hours of labor.

When I got back to Madonna I told my boss, Linda, how awful I felt that I had gone to the cafeteria when Natasha needed me. Linda shook her head and said that one of the younger teens she had helped through labor called out for her mother several times when the



going got rough. It broke Linda's heart to hear the girl call out, "I want my mommy! Where's my mother?" between her contractions. Of course, it's unsettling and more than a little unnerving to be in labor under the best of circumstances, but sadly, this girl apologized to Linda afterward. Voila! The transformation from child to adult in a blink of an eye (or in the rupture of embryonic membranes).

8 a.m.

The morning rush at Madonna resembles most households across America: teens rushing off to school, adults off to work; except this family was all female and, other than staff, they were all pregnant. The kitchen was in an uproar and the smell of burning bacon grease took over the whole first floor. Colleen was in the staff office complaining about various aches and pains, trying to get out of going to school. I

couldn't really blame her; she was due in two weeks. Besides, she had stopped doing any homework a month ago.

Colleen was a 15-year-old Caucasian girl from Lake Geneva who became pregnant one night after babysitting. On the ride home, the 28-year-old father pulled over in a remote area. In the back seat of the family station wagon, Colleen conceived the start of this man's second family. Not mentioning that this man was 13 years older than his babysitter makes Colleen just another teen mom in an epidemic that seems to stall out over declining social morals.

In his defense, however, the guy never knew; Colleen didn't tell him. Her own parents were in marital crisis and, without discussion, they shipped her off to Madonna as soon as they found out she was pregnant. Initially, they wanted her to place the baby for adoption, but that was months ago. Now that the due date was fast approaching, Colleen

wasn't sure she wanted to place her baby. Perhaps she was lonely; perhaps she wanted to create her version of the ideal family, but the bottom line was that although she had interviewed two couples, she hadn't selected an adopting family yet.

The fact that Colleen hadn't told her baby's father no longer seemed unusual to me; very few of the residents involved their boyfriends in their pregnancies. Maybe non-disclosure reflected the anonymous nature of the Madonna program, but even I thought of the fathers of these babies-to-be as just sperm donors after my first few weeks at M/SJ. During our staff meetings and in our group care worker log, we carefully avoided naming the father even if we knew his name. This errant male was referred to as the "Alleged Father" or just the "A/F." At first I was offended by this rhetoric, but soon even I could talk about the "A/F" with-



out having an ironic tone in my voice. As social workers, we sadly continued the legalese that let men off the hook.

9 a.m.

I would be back on the schedule at noon. Sleep deprivation was a definite down side to this job. I went upstairs to take a quick nap in the staff bedroom.

Noon

I had lunch with Colleen to get an update on her parenting/placement decision. Regarding residents and choices, though, I found it difficult to remain neutral about any parenting decision; I felt they were looking at life from the wrong end of the telescope. Just getting the layette together doesn't make you a mom. I felt I had to redefine all of those basic words so I could include my fragile relationship with my own children. In particular, I had a conflict with the very word parent. Maybe I had bought into the media message more than I was willing to admit, but to me the word parent connoted two, a pair, a team as in two parents or: pair-ents. Didn't these women know how hard it would be to parent alone? Would "single parent" be an oxymoron in my new dictionary?

At Madonna, if the resident couldn't decide whether to parent or place her

baby before giving birth, she wouldn't be prepared for her physiological/psychological conflict after the baby was born. It wouldn't matter that a resident had planned to place her baby for adoption all during her pregnancy, after birth, biology and the natural preservation instinct of the species will strongly tug at the now-lactating woman. It takes a determined, goal-oriented woman to carry through with adoption plans while she still has milk in her breasts.

Over lunch, I tried to tell Colleen there would be losses for her no matter which decision she made. I think we are all conditioned to think that there will be one complete, satisfying answer and one morning we'll wake up and know what's what, and all of that "other" data will become miscellaneous, superfluous and unnecessary and will therefore recede into the background.

In a larger context, however, Colleen's placement-versus-parenting dilemma isn't an isolated phenomenon. Her passive indecision is reflected in the growing social acceptance of out-of-wedlock births (and waning abortion statistics). In many illegitimacy cases, particularly with teens like Colleen, no parenting decision is made and the maternal grandmother will take the baby: A nationwide trend is achieved by default.

When we talked at lunch, I wanted Colleen to know that she was in a no-win situation and she would lose some piece of herself no matter what. The key was to find that one piece she could sacrifice without disconnecting herself from her body (which probably would lead to more unplanned pregnancies) or forfeiting her personal voice to a misogynistic society. Unfortunately, female voicelessness seems to be deeply rooted in many societies — even Walt Disney touched on the subject in *The Little Mermaid* when Ariel had to give up her voice (and soul) to become human.

3 p.m.

Natasha called to say she delivered a 7-lb, 8-oz baby girl.

4 p.m.

Jade asked staff to come to her room. She had thrown up her lunch and now she was having painful contractions. Jade is a beautiful 17-year-old Jamaican girl who is 34 weeks pregnant. She

wasn't exactly on bed-rest, but her premature contractions had practically quarantined her to Madonna. More than a month ago, when Jade started to have premature contractions, we thought she was simply dehydrated. She and I had already spent quite a few nights at St. Joe's waiting for a liter or two of saline with dextrose to drip into her arm intravenously. With the extra volume added to Jade, the contractions on the monitor would taper off and we would be sent home. This is quite the reverse of a kidney patient who needs to shed liquid volume during dialysis treatments.

The number of episodes started to increase and her contractions became more and more intense. At week 30, when her cervix began to dilate, she was quickly put on medicines to slow down a premature delivery. As her body adjusted to the medications, higher doses were given, then given more frequently. For weeks Jade has been on an every-two-hour medication schedule. The doctors ordered a home monitoring machine that was hooked up to the telephone. Nurses in Michigan would read the transmitted information and then call St. Joe's if she had more than five (later upped to eight) contractions in an hour. Jade monitored herself twice a day, later three times a day. Sometimes she could feel the abdominal activity, sometimes not, but the trick is to delay as long as possible a premature baby with a low birth weight.

Today, Jade's baby is 7 months old (in utero) and the doctors said they would no longer try to stall the birth. Strangely, when they said that two weeks ago, her daily contractions slowed down, even after they reduced the dosage and (thankfully) its frequency. The medicine has been such an integral part of Jade's pregnancy, I just wonder whether this drug, like thalidomide taken in the 1950s, has undergone a long enough testing period to determine the long-term side effects to the babies.

6 p.m.

Jade's contractions started to quicken just before supper. When Jade and I arrived at St. Joseph's, all of the overnight staff welcomed us by name, a bad sign for sleep lovers. Her face was dark with fear. Her beautiful almond eyes looked out sharply over her high, wide cheekbones. Her boyfriend, Charles, was to meet us at the hospital

THE OLDER MAN AND TEEN PREGNANCY: FROM 1990 CALIFORNIA STUDY OF 60,000 BIRTHS

Men over 20 are fathers to: 77 percent of the babies born to 16- to 18-year-old mothers; 51 percent of the babies born to mothers 15 years and under.

Using this same research data, The Alan Guttmacher Institute reported that in 1988, 489,000 teens became moms while only 195,000 teens became dads. Another researcher summed it up like this: The younger the mom, the older the father. When the mother is 12 years old, the father is 22; when she is in high school, he is only four years older. Men over 25 father twice the "teen" births as boys under 18. A 1991 study by the National Center for Health Statistics of more than 300,000 teenage mothers found that men over 25 cause more than 400 teen pregnancies every day.

LOW BIRTH WEIGHT (5 LBS-8 OZS)

Nationally, the overall rate of low birth weight rose to 7.2 percent in 1993, the highest level reported since 1976. In Chicago in 1990, 11 percent of all teen mothers gave birth to low weight babies. The average cost of a delivery subsidized by Medicaid for a low weight baby is nearly \$19,000; for an average baby the cost is just under \$4,000. Seven percent of all deliveries in the U.S. are low birth weight babies — about the same as Albania, Chile and Turkey.

A 1994 study, *Sex and America's Teenagers*, puts it like this: "Poverty status is one of the strongest predictors of low birth weight, especially among teenage mothers." Unmarried women, women who smoke or use drugs and women who don't get prenatal care are all at risk of having a baby that weighs less than 2500 grams or 5 lbs-8 ozs.

RACISM OR RACE

Pregnant women in stressful war zones (such as Chile or Bosnia) have low birth weight, as do African-American women from every economic and educational background in the United States.

A black woman's risk of having a seriously underweight baby is three times that of a white woman's. Some researchers think that it's a matter of racism rather than race that causes stress. Stress affects health through changes in neuroendocrine functioning that produce catecholamines that then start a premature delivery.

to be her labor coach. He had graduated from the DCFS Columbus-Maryville program and had moved into independent living. I had not met Charles, but because Jade and I had become so close in the last month, I felt I knew him personally. Jade was the cream of the crop: beautiful, smart, centered. But I wasn't prepared for the lanky, 18-year-old Charles. He was so young and handsome, shy and scared, I wanted to burst into tears.

The two of them looked young and fresh — like a perfect prom date, not like new parents ready to settle down and start nesting. Didn't they know how difficult it was going to be? Did they really stand a chance at normalcy? From my point of view, a white, have-all from

the suburbs divorced from an identically matched A/F, the odds were stacked against Jade and Charles. It broke my heart to see how genuinely they spoke to each other, how much they cared for each other ... right now.

9 p.m.

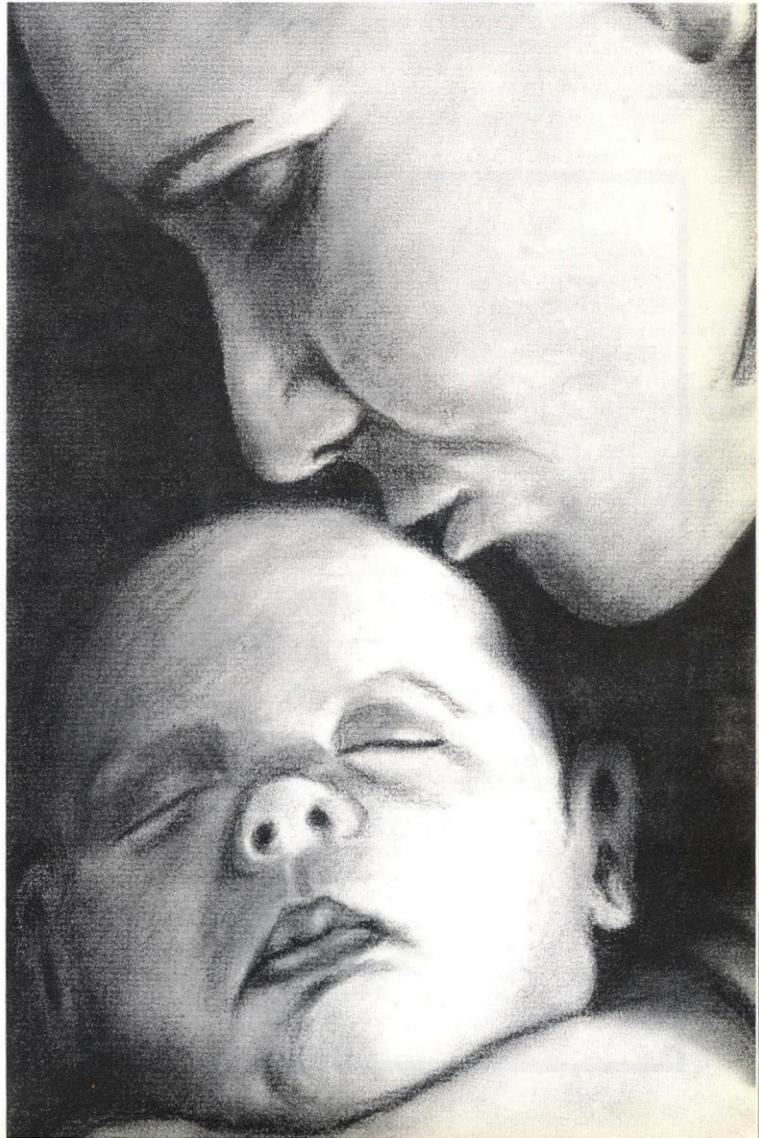
I left the hospital when I was sure Charles was comfortable and in control. Jade was dilated to 8 centimeters. The baby could be another couple of hours or transition could rush to full dilation (10 centimeters) within minutes. Child-

birth is that type of thing — a lot like life itself with many variables. I went home to crash.

Jade and Charles delivered a 5-lb baby girl at 1:30 that morning. Mother and daughter are resting comfortably. How sad to know Jade will be moving out of Madonna. I will miss her.

Some Thoughts in Conclusion

Several conclusions can be made about the rise in unwed pregnancy in the United States and about teenage pregnancy in particular, but these words have



probably all been said by politicians, social workers, school teachers, law enforcers (police and lawyers), the clergy and the families themselves. Whatever I could say in conclusion has already been said. The issues are complex and one answer doesn't quite sum it up. Murphy Brown's reasons for wanting to parent her child alone would be completely different from an urban teenager's reasons for wanting to become a single mother.

However, I would say that linking family planning clinics directly to schools would be a starting place. Making all men own up to and be responsible for their progeny would be another. Insisting that love and money and health are commodities to be given out in equal shares would be another.

What part does the mind play in this biological imperative question? Is it

mind over matter or the other way around? Is this reproductive instinct qualitative or is the biological time clock ticking away? Are women brainwashed into believing that the American Dream

can be had through their biology? In addition to wanting unconditional love, I think the teens at Madonna wanted some of that dream when they had unprotected sex. Maybe I did too. ☺

UPDATE

Natasha returned to Madonna in August of 1993 with pregnancy number three. She went on the run after two weeks. Today, only one child lives with her and she still has not finished high school. Stats: Almost one-quarter of teen moms have a repeat pregnancy within two years of their first born.

Jade and Charles broke up two months after delivery. Today Jade is working at Wendy's and her daughter lives with her

aunt. As Jade is a practicing Catholic, she does not use birth control.

Colleen's newly divorced mom (of course, now the baby's grandmother) rounded up all of the baby supplies. She prepared a nursery and all Colleen had to do was take the baby home. As soon as her visible signs of (illegitimate) pregnancy had passed, so did her parent's scornful alienation of her. The A/F and family had moved out of town a couple of months before Colleen moved back to Lake Geneva.

National statistics

After 1973, Americans over age 40 became the richest generation in history and the percentage of American children living below federal poverty level rose by 51 percent. High levels of youth poverty precede high rates of teen childbearing, which we now can confirm. In most inner cities, families have broken apart and reassembled in odd shapes over the scar tissue. The chain of poverty and abuse is strengthened by this family disintegration: The poverty-abuse-illegitimacy-poverty mantra begins to sound like another one of those rhetorical chicken-and-egg conundrums until it's understood that, like it or not, society gives birth to its own future. Does anyone wonder which adult role models Natasha and Jade's children will choose in 14 years? As reflective of the national trend, poverty begets poverty...early and often.

Maybe permeating social decline can help explain the rise in teen pregnancy in the ghetto, but all socio-economic groups and women of all ages have contributed to the incredible 54 percent increase in nonmarital births from 1980 to 1991. In fact, 1991 was a banner year for unwed mothers in every age group: 1.2 million total. More

babies were born out of wedlock in 1991 than at any other time in the whole 51-year history of keeping track of such numbers. "U.S. Birthrate Decreased in 1991, But Nonmarital Fertility Continued to Rise," Digest, Family Planning Perspectives 26 (January/February 1994) p. 43. Even though this trend leveled off in 1995, the proportion of all births to unmarried mothers hit record levels in the early 1990s: 29.5 percent in 1991, followed by 30.1 percent in 1992 and 31 percent in 1993.

During the late 1980s and early '90s, aging 1950s babyboomers, married or not, tried to stop (or jump-start) their biological clocks; in 1986 the number of first births among all women aged 30-34 increased 140 percent over the period 1970-1986. (I am one of these statistics.) Not surprisingly, there has also been an increase in nonmarital births in this age group — 16 percent of the nonmarital births in 1993 were to women over 30. "Because women have a monthly hormonal cycle, they can't escape the fact that their bodies are telling them to do something," a San Francisco endocrinologist told Time in 1990. He added, "The biological drive to reproduce may be stronger

than the cultural yen to get married." And even Murphy Brown got into the act on prime time TV during the 1992 spring season, much to then-Vice President Dan Quayle's consternation. Quayle felt that Murphy Brown's show glamorized unwed motherhood and "mocked the importance of fathers." No, Mr. Quayle, an unwed mother is not glamorous. I'm the one with the semantical problem with the word parent or "pair-ent." But did Quayle not watch TV when he was a kid? Were single fathers somehow different from single mothers? What about Bachelor Father, Nanny and the Professor, The Farmer's Daughter, My Three Sons, The Andy Griffith Show, The Courtship of Eddie's Father, Gidget, My Little Margie, Daktari, Bonanza? More currently, what about Full House, Blossom, Empty Nest?

The June 13, 1992, issue of TV Guide listed 15 TV shows headed up by a single dad when the only one I knew personally used to be my husband. The 1991-92 TV season alone had eight prime-time series featuring some version of the bachelor father. Does Daisy Duck share custody of Huey, Dewey and Louie with Uncle Donald? Does she pay child support?



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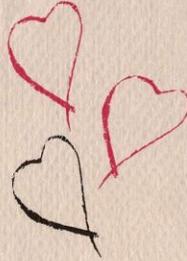
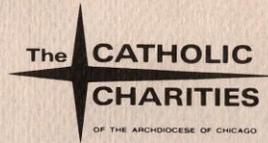
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**Catholic Charities serves people
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**The
Heart**

*An unplanned pregnancy . . .
A powerful and traumatic situation . . .
You may feel confused and vulnerable
during this challenging time. The
Madonna/Saint Joseph Center offers
hope, respect and understanding. We
care . . . from the heart.*

*At Madonna/Saint Joseph you will find
a safe, supportive environment and a
staff of caring people whose main
priority is trust and concern for
you. Your confidentiality is protected.*

*By living with other young women who
are in a similar situation, you will have
the opportunity for growth as a woman,
help to develop social skills and to
discover your own potential.*

*By sharing and listening we foster
independence, realistic goal-setting and
decision-making skills. You will be
able to consider options and make plans
for your future and for the future of
your baby.*

INITIAL APPLICATION INTERVIEW

*A prospective resident is interviewed by
a social worker. She must be drug-free
and without severe emotional or
psychological problems. She may be
admitted to the program at any time
prior to the final six weeks of her
pregnancy.*

MEDICAL CARE

*The resident receives assistance in
arranging for her medical
needs. Medical care is generally
provided by Saint Joseph Hospital &
Health Care Center where each
Madonna/Saint Joseph resident is
assigned to her own personal physician.*

COUNSELING

*All residents receive counseling from a
licensed agency social worker.
Counseling for the birth-father, as well
as the resident's parents, is also
available. Opportunities are also
available for spiritual enrichment.*

EDUCATION

*Teenage residents are required to be
enrolled in school. Adults are
encouraged to continue their education.
Educational programs offered at the
Center include preparation for
childbirth, pregnancy-related issues and
basic nutrition.*

EMPLOYMENT

*All adult residents are required to be
employed. Each resident is given the
opportunity to interview for employment
within the community or to enroll in a
job training program. Opportunities for
babysitting for nearby community
residents are available.*

RECREATION

*Residents may take advantage of
numerous cultural and recreational
events throughout Chicago. The Center
is close to a zoo, museums and the
lakefront. Arts and crafts are offered,
and a sewing room is available.*

LOCATION

*Staffed by caring, experienced
professionals, Madonna/Saint Joseph
Center is a residential program for 22
pregnant teenagers and adults. This
modern facility is located in a
residential community on the north side
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*We invite you to open your heart to
discover new possibilities.*

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