

The Trials of Hanna Porn: The Campaign to Abolish Midwifery in Massachusetts

ABSTRACT

The case of Hanna Porn affords an opportunity to examine how the laws that led to the abolition of midwifery in Massachusetts evolved and were applied to the midwife whose case set the state legal precedent. Mrs Porn served primarily a Finnish-Swedish clientele of wives of laborers. The outcomes of the births she attended appear to have been positive, and she maintained a neonatal mortality rate of less than half that of local physicians. She also repeatedly defied court orders to stop practicing. Her case exemplifies the efforts that occurred nationally to abolish midwifery in the United States. (*Am J Public Health*. 1994;84:1022-1028)

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The reason I continued the business, after being told by the court to stop the work, is that I thought the law is unjust. . . . I never worked only among my own people.¹

Judge Frederick Lawton was unmoved by this plea and, citing the defendant's "persistent determination to carry on the work" (it was her 10th trial in a 4-year period), he sentenced the 48-year-old woman to 3 months in the House of Corrections.² Her crime? Hanna Porn was a practicing midwife, and 2 years earlier, in a precedent-setting case that bore her name, the Massachusetts Supreme Judicial Court ruled that midwifery was illegal in Massachusetts.³

Why study an obscure midwife from Gardner, Mass, who left no writings, diaries, or correspondence that could be discovered? First, we need to understand better the role of what Leavitt terms "irregular practitioners" such as midwives because "until we can trace their impact through time and place, we will have an incomplete and distorted picture of medical practice."⁴ However, most accounts of the demise of midwifery in the United States⁵ and elsewhere⁶ have understandably emphasized the importance of political, regulatory, and social factors. The case of Hanna Porn reveals how the weight of legal sanctions forced some midwives to stop practicing and served as a threat to others. Second, Massachusetts was the center of the turn-of-the-century campaign to eliminate midwifery as a profession in the United States, and examining the tactics used in this case can provide insights into that campaign. Finally, court challenges to midwifery, usually lay midwifery, continue, and many such challenges bear a striking resemblance to the Porn case of more than 80 years ago.

The United States is one of only two developed countries (Canada is the other) where midwifery as an independent profession has been largely abolished. Midwives in the United States have since had to overcome major barriers and have yet to achieve a status comparable to that of midwives in other countries.⁷ A sustained effort, beginning in 1925, led to the development of nurse-midwifery in the United States.⁸ However, Sullivan and Weitz challenge the independence of nurse-midwifery: "By accepting subordination, nurse-midwives have yielded midwives' traditional occupational territory to physicians."⁹ Understanding how midwifery was constrained can illuminate the barriers faced by those who wish to expand it today in the United States.¹⁰

Scholars have advanced a number of explanations for the demise of midwifery in the United States in the 19th and early 20th centuries. Starr emphasizes the growing legitimacy of the medical profession and cites a shift in the early 1800s among upper-class women in Philadelphia to suggest that "no licensing laws compelled the shift. . . . Not the least probable explanation is that well-to-do women had come to accept the physicians' claims of superior skill."¹¹ Litoff, with the most comprehensive treatment of the topic, stresses the campaign led by obstetric specialists to redefine birth as dangerous, birth attendance as increasingly scientific (e.g., with the introduction of Twilight Sleep, a combination of drugs administered to women during delivery), and midwives as dangerously unskilled. This

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campaign was necessary; "the obstetrician would never receive due recognition . . . as long as women, untrained in the medical sciences, continued to serve as birth attendants."¹² Declercq and Lacroix studied the failure of legal constraints to stem the reliance on midwives in an urban immigrant community, and they argue that assimilation, the arrival of foreign-born physicians, and restrictive immigration laws combined to ultimately constrain midwives' practice.¹³ Borst, in a study of immigrant midwives in Wisconsin, suggests that midwifery's demise was hastened by the failures of midwives to organize successfully to combat their opponents and secure protective licensing. She notes:

In an era when the health professions swiftly and consciously moved towards well-defined ideas about education, licensing and practice, the diversity of midwives and midwife practice effectively prevented the coalescence of a midwifery leadership who might have helped this traditional women's occupation to become a recognized profession.¹⁴

As noted above, the significance of the Porn case is threefold. First, the case serves as a vivid reminder that these battles were not limited to legislatures, licensing boards, and public relations campaigns. They also involved the vigorous prosecution of those who were not willing to comply. For instance, in Lawrence, Mass, between October 1914 and May 1915, more than a dozen midwives were prosecuted for "practicing medicine without a license." They all pleaded guilty and paid a fine of \$100, the equivalent of more than 3 months' income for the average Lawrence midwife at that time.¹⁵ As noteworthy as Hanna Porn's willingness to defy the Massachusetts Board of Registration in Medicine was that board's persistence in prosecuting her. Therefore, in those cases in which midwives were willing and able to combat their professional foes legally, they still faced the likelihood of being overwhelmed by superior resources.

Second, although Massachusetts was unique among states in its explicit banning of midwifery, it had long served as a model for other states. As early as 1820, Boston physician John Ware, while concluding that "both the character and education of women disqualify them [as birth attendants],"¹⁶ noted that "there is, perhaps, no place of equal size, in which [midwifery] has been so entirely confined to male practitioners, as [Boston]."¹⁷ As one midwife opponent, Dr J.M. Baldy of

Philadelphia, remarked in 1915, "I know of no other section of the country which has been more successful in prohibition [of midwifery] than Massachusetts."¹⁸

Finally, the challenge to Hanna Porn has been mirrored in current court tests of midwifery practice in the United States.¹⁹ Sullivan and Weitz²⁰ and DeVries²¹ examined a number of court actions tried against contemporary lay midwives and found several parallels. The cases were typically initiated by physicians and not clients; the case drew media attention; the courts were reluctant to penalize the midwives too harshly, with most successful convictions addressing only the issue of practicing medicine without a license and not of malpractice; and the midwives who were charged received considerable support from sister midwives and their sympathizers, often in conjunction with advocates for home birth. Mrs Porn's ordeal mirrors these cases in all respects but the last. She never apparently sought or received aid from other midwives in Massachusetts, and there were no midwifery organizations to provide legal or moral support. Researchers have described a similar lack of organization among contemporary immigrant midwives in other US communities.²²

This study is based on an examination of more than 3000 individual birth and death records from Gardner, Mass, for the years 1895 to 1910, and of state and local court records and newspaper accounts of her trials. There was no record of Mrs Porn having any children in the United States, but any other descendants that could be found were contacted and, where possible, interviewed. Although no diaries, pictures, or personal records were discovered, two relatives recalled seeing pictures of her many years ago and described her simply as "heavysset." When possible, the descendants of the lawyers representing Mrs Porn were also contacted, but again no relevant information was discovered. Public records concerning Edwin Harvey, the physician who led the prosecution of Hanna Porn, were also studied but no living relatives could be found.

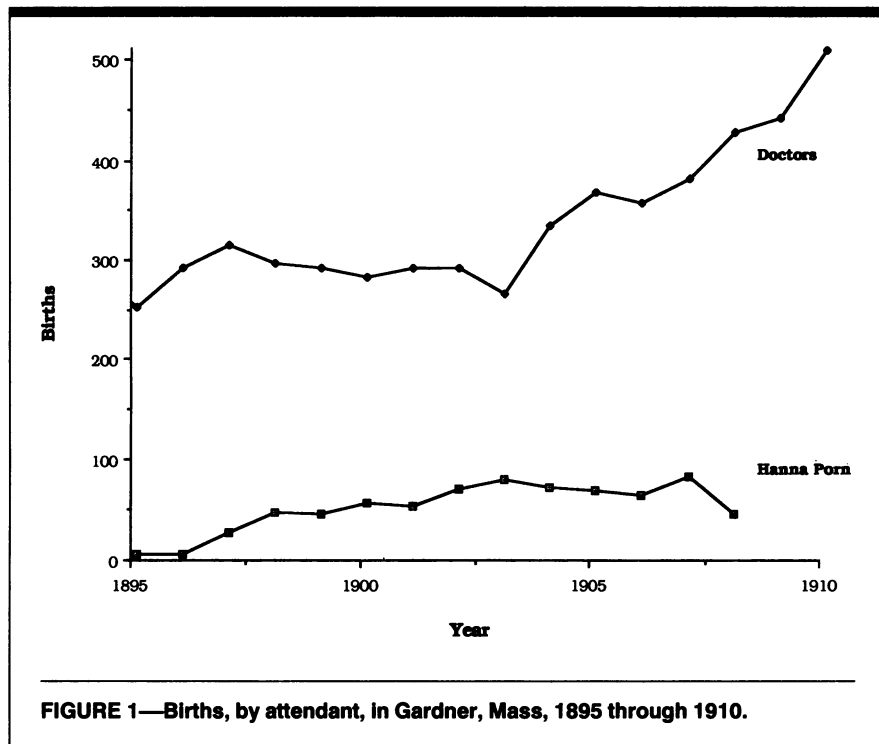
Hanna Porn, Midwife

Hanna Porn was born November 11, 1860, in Mustari, Finland, to Adam and Eva Kuniholm. Her brother John had emigrated to Gardner in the late 1880s and established a farm, and his sons began a successful baby carriage factory. While still in Finland, Hanna married brewer

Edward Porn, who died a year after his formerly prosperous business went bankrupt. She came to Gardner in 1895 to join her brothers. After working a year as a domestic, she went to Illinois to attend the Chicago Midwife Institute.²³ She completed her 6-month program on April 26, 1896, and returned to Gardner. After checking with authorities, she began practicing and recorded her first delivery on February 11, 1897. Over the next 11 years, she registered 642 births (Figure 1), more than the number registered by all but one of the more than 20 physicians in Gardner during this period.²⁴

Her style of practice appeared similar to that of midwives in other communities at that time, with one exception. Most midwives simply worked on call, out of their homes,²⁵ but Mrs Porn kept an office in her flat in the Gardner business sector. She had a brass plate on her door stating "Hanna Porn, Midwife."²⁶ A detailed analysis of Gardner birth returns from 1897, 1900, and 1904 to 1908 revealed that Mrs Porn worked primarily in the Finnish community, with 69% of her mothers having been born in Finland, 12% in Russia, and 11% in Sweden. More than 99% of the mothers she served were immigrants. She also served a working-class clientele, most of her clients' husbands being employed as chairmakers (69%) or laborers (13%) in the local furniture factories.²⁷ Mothers would normally contact her 1 to 6 weeks prior to delivery. If the case were normal, Mrs Porn would work alone, attending the mother in labor and delivery. She also returned daily for a week to cook, do light cleaning, and check mother and baby. The cost for these services was usually \$2 to \$5—about a third of what local doctors charged for a delivery alone.²⁸

Hanna Porn carefully avoided any reference to herself as a doctor. For example, when she filed birth registrations, which had a line for the physician's signature, she usually crossed out the word *physician* and clearly wrote *midwife* beneath her signature (Figure 2). When requesting prescriptions from druggists (she had six standard formulas given her by the doctors at the Midwife Institute), she never signed the forms *MD*. The prescriptions dealt with treatment to avoid neonatal eye infections (years before these treatments were required by law) to vaginal douches to a uterine stimulant. Yet during her years as a midwife, the instance of neonatal mortality (deaths within 28 days of birth) in her practice, which served a population of



almost exclusively immigrant laborers, was less than one half that for doctors in Gardner (Table 1). This presumably was at least partly because she followed her training guidelines, which stressed sending abnormal cases to physicians. The data in Table 1 therefore cannot be conclusive, but they suggest that Mrs Porn, if not safer than local physicians, was hardly a threat to public safety. The best information available indicates that she was a clean, reliable, and skilled birth attendant, and until her final two trials, those prosecuting her never contended otherwise. In fact, the Massachusetts Supreme Court noted while ruling against her that she was "a woman of good character and reputation as shown by the agreed facts."²⁹ Thus, when she was arrested in 1905, it was not a question of how she practiced but solely one of whether she *could* practice. At issue was the enforcement of those regulations that distinguished licensed physicians from other practitioners.

Commonwealth v Hanna Porn

The first half of 1905 suggested that the year was a promising one for Hanna Porn. In the previous year, she had become the busiest birth attendant in Gardner. Even given her small fee, she likely generated enough income from midwifery and nursing to live comfortably. In July, however, her fortunes changed.

First, she attended two mothers who lost their babies; one infant was stillborn and the other was born prematurely and died at 22 days. Such events were not rare for birth attendants at the turn of the century—one Gardner physician had already delivered four stillborn babies that year—but they were unusual for a midwife who averaged fewer than two neonatal deaths a year while she practiced³⁰ (Table 1).

On July 27, Hanna Porn was served with a criminal complaint charging her with the illegal practice of medicine. She was not the first midwife in the state to be charged with practicing in the Boston area; Maddalina Della-Russo had been found guilty in 1904 of practicing medicine without a license and, unlike Mrs Porn, apparently never appealed the decision.³¹ The complaint against Hanna Porn was brought not by a dissatisfied client but rather by Edwin B. Harvey, MD, executive secretary of the Massachusetts Board of Registration in Medicine. Out of hundreds of midwives in the state, why did he focus on her? The answer remains unclear, but one explanation is that she made the mistake of asking for permission.

Dr Harvey's first contact with Hanna Porn probably occurred in 1896, shortly after she received her midwifery degree. Court records reveal that before she began her practice in Gardner, Mrs Porn was told by a local lawyer that midwifery was legal. At the same time, she claimed

to have "consulted with Dr Harvey of the Board of Registration in Medicine, and he advised her that there was no law of this Commonwealth to prohibit her from practicing her said art or profession here."³² Was Mrs Porn lying? No perjury charges were ever brought against her, and Dr Harvey apparently did not dispute her claim. Did he deliberately mislead her? As a state legislator, Dr Harvey had been a prime author and sponsor of the 1894 Medical Practice Act, so he obviously was aware of the substance and intent of the law. Perhaps, however, the concern with midwives at that time was outweighed by the need to drive out the better-organized male irregulars. Apparently, by formally contacting Dr Harvey, Hanna Porn had made herself an obvious target for later prosecution. It may also have been easier for authorities to prosecute a case against a midwife who worked alone in a community rather than one who worked in a larger city, where 20 or more midwives might be practicing.

An examination of the minutes of the meetings of the Board of Registration during Dr Harvey's tenure revealed no direct mention of Hanna Porn. However, on May 3, 1905, Dr Harvey wrote: "After considerable discussion as to the status of midwives, the meeting dissolved at 2:00 PM."³³ Shortly thereafter, Mrs Porn was charged with practicing medicine without a license. At her arraignment and at virtually every one of her trials over the next 4 years, Edwin Harvey either brought charges or testified against her. The tall, thin, cosmopolitan doctor shared only one characteristic with the stout immigrant midwife: stubbornness. As long as Mrs Porn continued to ignore the law and practice, Dr Harvey would lead her prosecution.

On September 1, 1905, her first trial concluded with the judge finding her guilty on two counts: illegally practicing medicine and holding herself out as a practitioner of medicine without a license. She was fined \$200, and her lawyer, Francis Bergstrom, immediately appealed.³⁴ Her case was next heard in Worcester Superior Court on October 27, 1905, where an all-male jury upheld the guilty verdict. Again Bergstrom appealed on the grounds that he was denied the opportunity to present expert testimony from sympathetic doctors. The appeal was finally heard in the Massachusetts Supreme Court in May 1907, and the court sustained the appeal. A new trial was held in June 1907, and the doctors who were brought in testified that midwifery was

distinct from obstetrics. The prosecution countered with doctors who stated that the two were synonymous. Mrs Porn lost again, and this time she appealed to the Massachusetts Supreme Court on the key question of whether midwifery was the practice of medicine as defined by the 1894 law. As noted earlier, the court ruled that it was, and on October 15, 1907, it rejected her appeal on all counts.³⁵ The judges were not unsympathetic to Mrs Porn or to midwives in general; the court suggested that it would be possible for "the Legislature to separate by a line of statutory demarcation the work of the midwife from that of the practitioner of medicine." However, their prevailing interest was with "the maintenance of a high standard of professional qualifications for physicians."³⁶

The court system was not through with Hanna Porn, but it would be helpful to examine here how the laws under which she was prosecuted developed. The story begins more than 3 centuries ago.

The Evolution of Midwifery Regulation in Massachusetts

Massachusetts' experience with regulating midwives dates back to May 3, 1649, when "An Act Respecting Chirurgions, Midwives and Physicians" was passed by the General Court. As with most early medical regulation, it primarily stressed religious values and so began with a biblical reference (Exodus 20:13); it then warned practitioners not to "putt forth any act contrary to the knowne rules of arte, nor exercise any force, violence or cruelty upon or towards the bodyes of any (without) the consent of the patient."³⁷ There were no significant legal steps taken against midwives in Massachusetts for the next century and a half, but occasionally midwives would be publicly rebuked by physicians or ministers for trying to alleviate women's pain in labor, an effort that these men viewed as sinful because of the biblical admonition "In sorrow thou shalt bring forth children" (Genesis 3:16). Several distinct factors combined to lead to the more widespread use of anesthesia internationally in the late 1800s and increased the status of the medical profession in the United States.³⁸

Through the 19th century, the question of the legal status of midwifery in Massachusetts was a minor part of a larger battle between the Massachusetts Medical Society and its challengers, particularly the Thomsonians and homeopaths, over the licensing of physicians.

Commonwealth of Massachusetts.

7-0.

Date of Birth, December 31 1908.

Sex, Boy

Color (if other than white), White

Name (if named), _____

Place of Birth, No. _____ Street

Name of Father, _____

Name of Mother, _____

Maiden Name of Mother, _____

Residence of Parents, No. _____ Street

Occupation of Father, Chairmaker

Birthplace of Father, Russia

Birthplace of Mother, Russia

(Signature),
Hanna Porn
 Midwife Practitioner

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FIGURE 2—Final birth return signed by Hanna Porn.

TABLE 1—Stillbirth and Neonatal Mortality Rates, by Attendant at Birth, Gardner, Mass, 1897 through 1908

Attendant	Stillbirths		Neonatal Deaths		Total Births Attended 1897-1908
	No.	%	No.	%	
Hanna Porn	14	2.2	14	2.2	642
Gardner doctors	148	4.3	171	5.0	3421

The homeopaths had substantial success in both eliminating licensing laws in Massachusetts³⁹ and becoming accepted as members of the Massachusetts Medical Society. The American Medical Association, in fact, voted in 1870 "that the Massachusetts Medical Society voluntarily and improperly furnishes shelter and gives countenance to irregular practitioners to such an extent as to render it unworthy of representation in the General Assembly of American Physicians."⁴⁰ It was still 24 years before licensing laws

could be passed in Massachusetts, but the dedication with which those laws were subsequently enforced may be partly a result of the concern of the state's physicians about their national image. Political ideology was entwined with medical philosophy in these disputes, as in an 1894 petition to the Massachusetts' Senate, which stated that "entire freedom in the pursuit of health is consistent with constitutional liberty and scientific progress."⁴¹ Midwives did not participate in these battles, but their outcome, the

1894 Medical Practice Act, had a profound impact on their practice.⁴² This act established the Board of Registration in Medicine, which administered examinations to prospective physicians and issued licenses. Midwifery was not mentioned in the law, but the medical examinations included obstetrics, and only those with a license could practice medicine.

A second law caused further problems for midwives. The Birth Registration Act of 1897 required doctors or midwives, under penalty of a \$25 fine, to report all births they attended to their local city clerk. The combination of the registration and licensing laws put midwives in a double bind. If they failed to register a birth, they were breaking the 1897 law; but if they did report it, they would be admitting to a violation of the Medical Practice Act.⁴³

Was midwifery the same as obstetrics? That was the remaining question and the issue at the heart of *Commonwealth v Hanna Porn* in 1907. The Massachusetts Supreme Court's ruling that midwifery and obstetrics were synonymous made criminals out of scores of midwives, many of whom, like Mrs Porn, continued to practice. For example, as late as 1913, 40% of all the births in Lawrence were attended by midwives, who continued to practice openly until their arrests beginning in September 1914.⁴⁴

Midwives in many communities were able to sustain their practice because of the surreptitious aid of local physicians. Midwives would attend births and later have physicians complete the registration form. Therefore, laws were established that made it easier to identify supportive physicians (1912) and then establish penalties against them as well (1917). In the former case, the line "I ___ did (did not) personally attend this birth" was added to the birth registration form. In 1917, a law was passed requiring the removal of the license of any physician who helped an unregistered practitioner, and in 1925, a doctor in fact lost his license under this law.⁴⁵ With all the loopholes closed, midwives had a choice of retiring, becoming obstetrical nurses, or going underground. (E.g., Hanna Porn and other midwives had parents complete and return birth records, with the attendant line left blank).⁴⁶ It took almost a half century for midwives to regain the right to practice in Massachusetts legally and then only as nurse-midwives under the supervision of a physician in a licensed health facility. Legal controversies over midwifery practice in the state continue today.

A recent series of court cases in Massachusetts illustrates the contemporary links to the Porn case. Janet Leigh was a registered nurse, but not a certified nurse-midwife, who practiced as a lay midwife attending home births. A birth she was attending in Boston on September 23, 1982, had a tragic outcome. At the beginning of the second stage of labor, the umbilical cord prolapsed. Leigh immediately undertook emergency procedures and had a call placed for an ambulance. When it arrived, a dispute developed over the management of the emergency. While subsequent expert testimony indicated that Leigh's suggested course of treatment was the preferred approach, on July 25, 1984, the Board of Registration in Nursing chose to suspend her nursing license indefinitely until she agreed to close her home birth practice. The board based its decision on three charges, including "gross misconduct in the practice of nursing."⁴⁷ Leigh's appeal of this ruling led to a decision by the Massachusetts Supreme Court that overturned *Commonwealth v Porn*. It concluded that the board had the right to suspend Leigh's license but ordered the board to drop two of the charges and clarify its reasoning on the misconduct charge. The court stated:

There is no statutory prohibition against the practice of midwifery by lay persons. The Legislature has not regulated midwifery by persons other than nurses. Nor do we interpret [*Commonwealth v Porn*] to prohibit the practice of midwifery as the unauthorized practice of medicine.⁴⁸

They argued that the 1907 decision was based on the narrow grounds that Mrs Porn had used instruments and prescriptions, and they dismissed the contention that the practice of midwifery is the practice of medicine.

Responding to the court's order for reconsideration, the Board of Registration in Nursing ruled that any nurse serving as a midwife at home births engaged in misconduct. Leigh appealed on several grounds, noting that the 1985 decision resulted in *anyone but* nurses or nurse-midwives being allowed to attend home births. In 1987, the appeal was again denied by the Massachusetts Supreme Court, which argued that

The fact that the Legislature has not enacted legislation regulating lay midwives does not render the statute regulating nurse midwives unconstitutional. The equal protection clause does not require the government to choose between attacking every aspect of a problem or not attacking it at all.⁴⁹

The court also suggested that the issue of home birth might be better addressed by the legislature, which subsequently passed a law permitting nurse-midwives to attend home births.⁵⁰ The legal changes had little immediate impact since there were only 121 home births attended by lay midwives and 30 attended by certified nurse-midwives in 1989. These births comprised fewer than 0.2% of all births in the state that year.⁵¹

The outcome of Leigh's battles with state officials was legal sanction for lay midwives and nurse-midwives to attend home births. Ironically, the only people who are not permitted this right are nurses who are not certified nurse-midwives, like Leigh. Leigh did close her home birth practice, had her license reinstated, and is now an official with the Massachusetts Department of Public Health.⁵² Her persistence in fighting for the right to continue as a midwife mirrors the efforts of Hanna Porn, whose story does not end with a Massachusetts Supreme Court ruling.

The Jailing of Hanna Porn

Those studying the history of midwifery have naturally assumed that Hanna Porn's legal battle and practice ended in 1907. In fact, her practice grew through this period, with more deliveries in 1907 (76) than in any prior year. In 1908, she continued to practice and file birth returns in clear violation of the law. She was arrested again on December 8, 1907; found guilty on April 22, 1908; and fined \$125.

It was at her trial on April 22 that the depth of the enmity between some Gardner physicians and Hanna Porn became clear. Four local physicians testified against her. In some cases, they confirmed facts, such as her possession of a bag of instruments; in other cases, they stated opinion. Dr C.S. Bartlett argued that she was a poor nurse; Dr G.B. Underwood, according to the *Gardner News*, "could not conceive how, in even the most simple cases, midwifery could be practiced without practicing medicine."⁵³ Most enlightening, however, was the testimony of all the doctors that they refused to attend mothers who used Mrs Porn, with Dr Herbert Ellam describing the Safstrom case as an example.

On March 8, 1908, Dr Ellam and Dr J.P. Donnelly were called to the home of Adolph and Augusta Safstrom. Mrs Safstrom had been in labor for several hours, attended by Mrs Porn. Her husband was

concerned about her failure to progress in labor and, after consulting Mrs Porn, called on the two doctors. Upon arriving the doctors learned of Mrs Porn's presence, refused to enter the home, and prepared to depart. When she learned this, Mrs Porn left while the doctors remained and delivered Esther Viola Safstrom, who died the following day of a cerebral hemorrhage.⁵⁴

For the first time, charges of incompetence had been raised against Hanna Porn. Ironically, in the year prior to the case, the four doctors who testified against her had a neonatal mortality rate almost double hers.⁵⁵ As the case moved away from the technical and legal issues that dominated earlier trials, the parties became more bitter, with Mrs Porn charging that the doctors wanted to remove her simply to eliminate competition. Perhaps their motives were more complex, but her later jailing was a substantial boon to business. The four doctors increased their number of deliveries by 86% in the 2 years following the case.⁵⁶ As always, Mrs Porn was found guilty and this time fined \$250. The fine was dropped, however, when she reached an agreement with District Attorney George Taft to leave Gardner.

She never moved, and she filed her last birth return on December 31, 1908. She apparently continued practicing in 1909, as suddenly the rate of unsigned birth returns in Gardner almost tripled from 1.9 to 5.5 per month, mostly in the ethnic groups she served. Also, the blank returns ended abruptly on the day of her jailing.⁵⁷ In both February and March, 1909, Mrs Porn was in court again, in the latter case joined by a second Gardner midwife, Hilda Tomtti. Miss Tomtti was technically as guilty as Mrs Porn since she had filed eight birth returns in Gardner; but while Miss Tomtti was fined \$225, Hanna Porn's "wilful defiance" got her a \$100 fine and a sentence of 3 months in jail. There was the inevitable appeal, and the final act of this saga was played out in Worcester Superior Court on August 31, 1909.

Mrs Porn was now represented by Thomas Walsh of Fitchburg, the fifth lawyer who had dealt with her cases. She was tried before an all-male jury, who heard from Dr Harvey, local Gardner officials, and some of her clients. The testimony primarily focused on Mrs Porn's refusal to obey previous court orders, although questions of her competence were again raised. After an hour of deliberations, the jury found Mrs Tomtti not guilty and Mrs Porn guilty. Judge

Frederick Lawton sentenced the 48-year-old widow to 3 months at the County House of Corrections. Attorney Walsh then suggested that she be allowed to move from the state, but the judge refused, noting Mrs Porn's "persistent determination to carry on the work." Upon hearing the verdict, Hanna Porn began to weep openly and continued sobbing through her sentencing.⁵⁸

After she was released from prison, Mrs Porn apparently continued to practice surreptitiously. No further charges were brought against her for carrying on what was now probably a small practice. Within 4 years she was dead. Her obituary lists her as a "private nurse" and makes no mention of the controversy that engulfed her. It does describe her as strong willed and hard working, and it notes that she died while being employed as a private nurse at 494 Pleasant Street on July 8, 1913.⁵⁹ Gardner city records list the birth of a boy to a Finnish couple at the same address on the same day. Despite more than a decade of harassment, 10 separate trials (9 of which she lost), and 3 months in jail, Hanna Porn died doing what she fought so resolutely to have the right to do—to serve her own people as a midwife. □

Acknowledgment

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