

## ***Making Women Pay: The Hidden Cost of Fetal Rights***

Rachel Roth  
Ithaca: Cornell University Press, 2000

### **Reviewed by Jennifer Musial**

*Making Women Pay: The Hidden Cost of Fetal Rights* is a thoroughly documented book that illustrates how women disproportionately pay the price of reproduction. Roth uses a critical legal studies approach to examine the law, government, and public policy between 1973 and 1992 in post-*Roe v. Wade* United States. Roth looks specifically at three aspects associated with fetal rights: “work, medical care settings,” and “government regulation of women’s consumption of drugs and alcohol” (2). Roth’s goal in *Making Women Pay* is to “analyze fetal rights policies and practices on their own terms and to analyze their impact on women, the fetuses they may bear, and prospects for gender equality in the United States” (13). Throughout her text, she asserts that work on reproductive rights tends to ignore the gender discrimination and sexism that lie at the heart of reproductive issues.

*Making Women Pay* is comprehensive and thoughtfully organized. Following a literature review in chapter two, Roth examines how workplaces and courts use the discourse of fetal rights to discriminate against women. Whether they are pregnant or not, women are arbitrarily barred from certain types of employment deemed harmful. When women cannot be prohibited from working, they are subject to guilt and blame for not sufficiently protecting their fetuses. Ultimately, courts and companies would rather condemn women than put forth efforts to make workplaces safe. Roth then looks at medical interventions into pregnancy: forced caesarians, blood transfusions, and detainment, for example. She explains that actual contestation is not a maternal-fetal conflict but a conflict between women and the medical establishment and/or the state. Next, Roth explores how the law has penalized women when they consume drugs and/or alcohol during pregnancy. In each chapter, Roth points out the inconsistency in maternal-fetal health rhetoric.

In advocating equality, *Making Women Pay* presents a largely liberal feminist argument. While Roth includes analysis of race and class, these are largely underdeveloped issues in her text. Also missing from Roth’s study is a discussion of women’s agency. Only in her conclusion does she comment that some women have used fetal rights legislation to their advantage, as in cases involving domestic violence. In other books this emphasis might locate women as victims, but Roth’s focus on the structural constraints imposed on women’s reproductive freedom avoids this pitfall.

As Roth points out, the reproductive costs, both physical and emotional, that women pay are enormous. Moreover, women are led to mistrust the medical and legal establishments. In fact, there is no direct cost-benefit relationship in terms of the cost to a woman and the benefit to her fetus. Roth returns to the idea that what women lose in the reproductive equation is gained by (male) doctors and lawmakers rather than fetuses.

Perhaps most intriguing in *Making Women Pay* is the concept of woman's citizenship that, Roth argues, is constrained by fetal rights. According to Roth, a woman's rights to bodily integrity, employment, due process, and religious practice are fundamental issues of citizenship. This book would work well in political science and law courses, as well as women's studies courses.

### ***Crooked Smile: One Family's Journey Toward Healing***

Lainie Cohen  
Toronto: ECW Press, 2003

#### **Reviewed by Christine Peets**

Daniel Cohen was seventeen in August 1993 when he was involved in a car accident that left him with a brain injury. This book chronicles the struggle of Daniel and his family to deal with his trauma. Daniel's mother, Lainie Cohen, started writing *Crooked Smile* five years after her son's accident. It took another five years to complete and publish her work.

Following his accident, Daniel was comatose for weeks and faced seemingly insurmountable odds. His injury affected his ability to talk, read, and move; his basic self-care functions had to be relearned. Health, educational, and social work professionals did not give the family much hope. The Cohens were told that their son would have to be institutionalized, but they refused to believe that Daniel would not improve. They never gave up and were willing to do, as Cohen writes, "whatever it takes to help our son." They carried out or supervised every aspect of Daniel's physical and mental care, well supported by family, friends, and health-care professionals.

This exhaustive care took its toll on the family, however. The Cohens' younger son, Jonathan, started using marijuana. Their daughter, Alyssa, suffered joint pain that left her in a wheelchair for a time. While the point is made that Daniel's trauma involved the whole family, Cohen does not make the connection strongly enough between what was going on with Daniel and how