

United States Department of the Interior
National Park Service

NATIONAL REGISTER OF HISTORIC PLACES
REGISTRATION FORM

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1. Name of Property

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historic name: Margaret Sanger Clinic

other name/site number: _____

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2. Location

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street & number: 17 West 16th Street

not for publication: ____

city/town: New York

vicinity: _

state: NY county: New York

code: 016

zip code: 10011

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3. Classification

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Ownership of Property: private

Category of Property: building

Number of Resources within Property:

Contributing	Noncontributing	
1	0	buildings
0	0	sites
0	0	structures
0	0	objects
1	0	Total

Number of contributing resources previously listed in the National Register: 0

Name of related multiple property listing: N/A

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4. State/Federal Agency Certification
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As the designated authority under the National Historic Preservation Act of 1986, as amended, I hereby certify that this _____ nomination _____ request for determination of eligibility meets the documentation _____ standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60. In my opinion, the property _____ meets _____ does not meet the National Register Criteria. _____ See continuation sheet.

Signature of certifying official Date

State or Federal agency and bureau

In my opinion, the property _____ meets _____ does not meet the National Register criteria. _____ See continuation sheet.

Signature of commenting or other official Date

State or Federal agency and bureau

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5. National Park Service Certification
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I, hereby certify that this property is:

- _____ entered in the National Register _____
_____ See continuation sheet.
- _____ determined eligible for the _____
_____ National Register _____
_____ See continuation sheet.
- _____ determined not eligible for the _____
_____ National Register _____
- _____ removed from the National Register _____
- _____ other (explain): _____

Signature of Keeper Date
of Action

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6. Function or Use

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Historic: health care Sub: clinic

Current : single dwelling Sub: _____

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7. Description

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Architectural Classification:

Mid-19th Century
Greek Revival

Other Description: _____

Materials: foundation - unknown roof - asphalt
walls - brick other _____

Describe present and historic physical appearance. X See continuation sheet.

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8. Statement of Significance

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Certifying official has considered the significance of this property in relation to other properties:

Applicable National Register Criteria: B,A

Criteria Considerations (Exceptions) : _____

Areas of Significance: Health/Medicine
Social History
Politics/Government
Education

Period(s) of Significance: 1930 to 1942

Significant Dates : 1930 _____

Significant Person(s): Margaret Sanger

Cultural Affiliation: _____

Architect/Builder: Edward S. Mesier

State significance of property, and justify criteria, criteria considerations, and areas and periods of significance noted above.
 See continuation sheet.

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9. Major Bibliographical References

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See continuation sheet.

Previous documentation on file (NPS):

- preliminary determination of individual listing (36 CFR 67) has been requested.
- previously listed in the National Register
- previously determined eligible by the National Register
- designated a National Historic Landmark
- recorded by Historic American Buildings Survey # _____
- recorded by Historic American Engineering Record # _____

Primary Location of Additional Data:

- State historic preservation office
- Other state agency
- Federal agency
- Local government
- University
- Other -- Specify Repository:

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10. Geographical Data

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Acreage of Property: less than one acre - lot is 33'2"x92'

UTM References: Zone Easting Northing Zone Easting Northing

A	18	584920	4509940	B	_____	_____	_____
C	_____	_____	_____	D	_____	_____	_____

____ See continuation sheet.

Verbal Boundary Description: ___ See continuation sheet.

The boundaries of this nomination are coterminous with New York City Block 818 Lot 25, as shown on the attached Manhattan Land Book map. The rectangular lot, located on the north side of West 16th Street, is 391.8 feet west of Fifth Avenue and measures 33.4 feet on the north and south and 92 feet on the east and west.

Boundary Justification: ___ See continuation sheet.

The historic association is coterminous with the limit of the urban lot (Block 818 Lot 25) upon which the building stands.

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11. Form Prepared By
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Name/Title: Dr. Page Putnam Miller, Director NCC

Organization - National Coordinating Committee For the Promotion of History Date -September 27, 1989

Street & Number - 400 A Street, SE Telephone - (202) 544-2422

City or Town - Washington State - DC ZIP - 20003

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DESCRIPTION OF SITE:

The building that housed the Margaret Sanger Clinic is a Greek Revival style row house located at 17 West 16th Street between Fifth and Sixth Avenues in the borough of Manhattan, New York County, New York. The building is located on a street that remains primarily residential, despite the general commercial nature of the surrounding area. The building is one of several unusual swell-fronted Greek Revival style row houses on this block. Immediately to the east of the former Sanger Clinic is the three-story early twentieth-century Colonial Revival style American Institute for the Blind Building. To the east of this building are several swell-fronted row houses that are part of the row that includes 17 West 16th Street. To the west of No. 17 is a group of more traditional flat-fronted Greek Revival style row houses. Farther to the west are row houses, an electric power building, and several taller loft structures. To the south of No. 17, across West 16th street, are a modern apartment house, several row houses, and the St. Francis Xavier Roman Catholic Church Complex. To the north of No. 17, on West 17th Street, are a large number of loft buildings. Fifth Avenue, to the east of No. 17, is lined with large turn-of-the-century loft buildings. At the southwest corner of Fifth Avenue and West 17th Street is a modern apartment house. The house at 17 West 16th Street takes up most of its 33'2"x92' lot. There is a yard at the rear of the lot. This nomination includes one contributing building. The Margaret Sanger Clinic retains its integrity to a very high degree.

The building that housed the Margaret Sanger Clinic from 1930 to 1973 is a three story and basement Greek Revival style row house erected around 1846. The building is faced with brick and is one of the few row houses of its period built in New York City with a swell-front. This curving bay runs up the entire height of the building. It is articulated by two rectangular windows on each floor. The windows have simple cap-molded lintels. On the parlor floor the windows extend to the level of the floor and open out onto an original cast-iron balcony that incorporates Italianate motifs above a Greek fret. The windows of the second and third floors retain original 6x6 wood sash, while the windows in the flush section of the facade are unusually wide with sidelights flanking 6x6 wood sash. The building's cornice has a plain fascia and modillions.

To the right of the curved bay is the main entrance to the house which is reached by a high stoop lined with original iron railings. A similar railing runs in front of the areaway. The entry doors are set within a wide battered and earned stone enframement with a projecting modillioned cornice. Set deeply within this enframement are double wooden entrance doors that are framed by a crisp egg-and-dart molding and are flanked by simple sidelights and surmounted by a simple three-light transom. The transom, in turn, is surmounted by a decorative frieze supporting a rich cornice.

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The House also retains many original Greek Revival interior features, including a curving staircase, stairway skylight, black and white marble hallway floor, fireplaces, and plaster moldings.

In 1976 when the Landmarks Preservation Commission of New York City designated 17 West 16th Street as a New York Landmark, they noted that it is a rare surviving example in New York City of a mid-nineteenth century swell-front Greek Revival townhouse. Furthermore, they stressed that it retains its original residential character. The house continues to have an unusually high degree of integrity and remains a single family dwelling.

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This house served as the clinic of Margaret Higgins Sanger, birth control pioneer, from 1930 until 1973. Within the context of the National Historic Landmark Program thematic framework, the Margaret Sanger Clinic has national significance under the theme: XIII. Science (F) Medicine, 1. Clinical Specialties. Her first clinic, established in 1916 at 46 Amboy Street in Brooklyn is no longer standing. And she rented only two rooms at 45 West 15th Street, the location of her second clinic. Thus 17 West 16th Street, the first permanent home of the Margaret Sanger Clinic and its location for over forty years, is the most appropriate site for designation. In addition to providing contraception information for more than forty years, this is the only clinic that was owned by Sanger's Clinical Research Bureau. Sanger dedicated her life to win reproductive autonomy for women by administering "safe, harmless information" in order to give women a choice about parenthood. Sanger established herself as a speaker and writer on sexual reforms, educating women on sex, venereal disease, and birth control. In coining the term "birth control," she was not inventing a new practice, but she did introduce a new degree of frankness to sexuality.¹

Sanger was born in 1879 in upstate New York, the sixth of eleven children. Her mother died at the age of forty-nine, in Sanger's opinion a result of too many children and too little money. She was married in 1902, upon completing a nursing degree, and by 1910, she had three children. She became increasingly dissatisfied with being a housewife, so began working as a home nurse on Manhattan's Lower East Side. She also became an activist in the radical labor movement, organizing textile workers for the IWW (International Workers of the World).² According to Sanger, the death of one particular woman in the tenements changed her life. Sadie Sachs died in 1912 while trying to end an unwanted pregnancy; her doctor had warned that another child could kill her, yet offered no contraceptive information save abstinence. Sanger, in reflecting upon Sadie's death, described the situation in the slums: "women writhing in travail to bring forth little babies; the babies themselves naked and hungry, wrapped in newspapers to keep them from the cold . . . [she] resolved to seek out the root of the evil, to do something to change the destiny of the mothers whose miseries were as vast as the sky."³ Sanger thus resolved to quit nursing and dedicate herself to the emancipation of women. By the time she decided to make birth control a public issue, it was already very much a private issue as upper-class families had practiced family limitation for generations.⁴ Women with money were often able to obtain contraception information from their doctors, with whom they usually had a close relationship.⁵

According to historian Linda Gordon, Sanger's relative social and sexual conservatism contributed to the eventual acceptance of her reforms. While feminism and socialism had previously united to tackle the contraception debate, it was Sanger who realized the necessity of mainstreaming the birth control issue.⁶ Sanger assumed the role of victim, and thus did not repel intellectuals who found the attitudes of radicals abrasive. When Sanger began her crusade in 1914, she acted independently of

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leftist organizations. Her total separation from the Left by 1920 was as much a rejection of her as she of them; the Left rejected birth control as an issue because Sanger had rejected the Left.⁷

Beginning in the fall of 1912, Margaret Sanger began to publish a series of articles about female sexuality; the Post Office declared an article on syphilis unmailable under the Comstock Act of 1873 which prevented sending obscene articles through the mail, including information on venereal disease and contraception. Despite the suppression of her publications, Sanger set out to remove the stigma of obscenity from contraception and to establish a national system whereby women could receive accurate birth control information. Since the nineteenth century, marriage manuals had discussed contraceptive devices such as "womb veils," condoms, and spermicidal douches; however, physicians did not conduct contraceptive research and there were no clinical tests on the reliability of these methods. Sanger's major strategy for securing legalized birth control focused on dissemination of information through publication, but in 1914 the Post Office declared her journal, The Woman Rebel, unmailable, even though it gave no specific contraceptive advice. She left for Europe in October 1914 after being indicted for violating the postal code, leaving her husband William with her pamphlet Family Limitation for distribution. In Europe, Sanger became a close friend of Havelock Ellis, author of Studies in the Psychology of Sex, and visited contraceptive advice centers staffed by midwives in the Netherlands. While she was away, William was arrested by the New York Society for the Suppression of Vice for distributing Family Limitation.⁸

Upon her return to the United States, Sanger opened on October 16, 1916 the nation's first birth control clinic at 46 Amboy Street in Brooklyn. This clinic, which is no longer standing, was located in the midst of a neighborhood where Jews and Italians lived in crowded tenements. From the two room clinic, Sanger and her sister Ethel Byrne and coworker Fania Mindell provided to over 500 women information, in simple language, about birth control. Sanger and Byrne, did not dispense contraceptive devices, but rather gave out a pamphlet, printed in English, Yiddish, and Italian, describing "the principles of contraception." One of the patients turned out to be a policewoman.

Ten days after its opening, the police raided the clinic and arrested Sanger and her sister. They were tried separately, and each sentenced to thirty days in prison.⁹ Sanger's trial and imprisonment made her a national figure. Despite the fact that the judge ruled against Sanger, he widened the existing law to allow doctors the right to prescribe contraception for women for the "cure and prevention of disease."

Sanger interpreted this as a court mandate for doctor staffed clinics. She began plans to open a clinic run by a woman doctor and began to explore a strategy

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for a major lobbying effort for "doctors only" legislation, which would remove the legal prohibition on medical advice. On the legislative front, she succeeded in getting legislation introduced in Congress and set up a Washington headquarters to coordinate the grass roots lobbying campaign. In 1931 Sanger testified in a hearing before a sub-committee of the Senate Judiciary Committee that women who sought birth control wanted "a chance to space our children . . . not that we do not love children that another child born into this family only deprives the children that are already here of a decent living with the ideals we have for them."¹⁰ The legislation that she sought never passed, however Sanger did not give up her desire for "children to be conceived in love, born of parents' conscious desire, and born into the world with healthy and sound bodies and sound minds."¹¹

By the mid-20s Sanger had relinquished all of her radical ties and found financial supporters among socialites and philanthropists; her new economic security allowed her to organize the American Birth Control League (later Planned Parenthood) in 1921. In this period the ABCL served as Sanger's primary organization in which she projected her ideas.¹²

By 1923, Sanger had enough support to open the Birth Control Clinical Research Bureau in New York. This small clinic was the first physician staffed clinic in the United States, and consisted of a few rooms in a rented building. The 1916 clinic in Brooklyn had been established in part as a legal test case. Sanger designed the new clinic to be a "firstclass center for medically supervised study of contraceptive techniques."¹³ Under the direction of Dr. Dorothy Brocker, a public health officer from Georgia, the clinic was readily accessible to women who came for advice on birth control. In her autobiography, Sanger notes: "We started immediately keeping records."¹⁴ There was a card with the case history of each person who visited the clinic. The Clinical Research's first annual report, which received considerable attention, included a summary of 900 patients with statistics on ages, physical and mental conditions, and economic status.

Opposition from the medical profession to Sanger's efforts had been grounded in part by doctors aversion to lay involvement and to the lack of adequate scientific research. With the Clinical Research Bureau Sanger sought not only to further the cause of birth control but also to allay the fears of the medical profession.¹⁵

In 1930 the Clinical Research Bureau moved to a building on West 16th Street. The Bureau, in addition to needing more space, wanted to own a building, rather than rent from an unsympathetic landlord. With the move to the West 16th Street building, Sanger expanded the staff to include a social worker to assist in follow-up studies and appointed a new medical director, Dr. Hannah Stone. Additionally recruited for the clinic was a new "advisory board," which included some prominent scientists and a university president, but no doctors. In 1930 since only a few medical schools had

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regular courses in contraception, many doctors came to the Clinical Research Bureau to receive instruction on contraceptive technique.¹⁶ The Bureau's most significant role was to serve as a model for additional clinics throughout the country. By 1938, Sanger and her supporters had opened over 300 clinics, all staffed by women doctors.¹⁷ The West 16th Street building, complete with improved research facilities, housed Sanger's Clinical Research Bureau until 1973.¹⁸

In the 1930s Sanger withdrew from the leadership of the American Birth Control League and from the Birth Control Review, and focused her attention on her clinic.¹⁹ In these years Sanger's main activity was as fundraiser, working tirelessly to keep her clinics open, but she also fought numerous legal battles to establish the legality of birth control clinics. In 1936 a federal court reversed the Comstock Act of 1873, ruling that new clinical data forced a reinterpretation of contraceptive material as obscenity. Following the decision, the American Medical Association, previously against birth control, recognized contraception as a legitimate medical service that should be taught in medical schools.²⁰ Robert Dickinson, President of the American Gynecology Association wired Sanger following the AMA decision in 1937: "Among foremost health measures originating or developing outside medicine like ether under Morton, microbe hunting under Pasteur, nursing under Nightingale, Margaret Sanger's world wide service holds high rank and is destined eventually to fullest medical recognition."²¹

In 1942, with many of her goals achieved, Sanger retired to Tucson, Arizona with her second husband, a millionaire who supported her projects. The new leaders of the movement replaced the term "birth control" with "family planning" and urged contraception only for those women whose lives would be in danger if pregnant, in order to have more widespread appeal.²²

After World War II, Sanger again gained respect and popularity. She played a critical role in the founding of the International Planned Parenthood in 1952, and served as its first president. Also in that year, she supported the work of biologist Gregory Pincus who along with Katherine Dexter McCormick, developed the birth control pill in 1960. Sanger died six years later, and although all women had not received reproductive freedom, she remains the most important individual in the crusade to give women knowledge of birth control.²³

¹David M. Kennedy, Birth Control in America: The Career of Margaret Sanger (New Haven, 1970), 36.

²Barbara Sicherman, ed., Notable American Women: The Modern Period (Cambridge, 1980), 624.

³Kennedy, 16-17.

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- 4 Kennedy, 70.
5 Linda Gordon, Woman's Body, Woman's Right: A Social History of Birth Control in America (New York, 1977), 67.
6 Gordon, 225.
7 Gordon, 220-1.
8 Sicherman, 625.
9 Gordon, 231.
10 Margaret Sanger, My Fight For Birth Control (Elmsford, NY, 1969), 354.
11 Sanger, My Fight, 355.
12 Gordon, 291.
13 Kennedy, 181.
14 Margaret Sanger, Margaret Sanger: An Autobiography (New York, 1938), 360.
15 Kennedy, 181.
16 Kennedy, 211.
17 Sicherman, 626.
18 Sanger, Autobiography, 408.
19 Kennedy, 205.
20 Sicherman, 626.
21 Kennedy, 217.
22 Sicherman, 626.
23 Sicherman, 627.

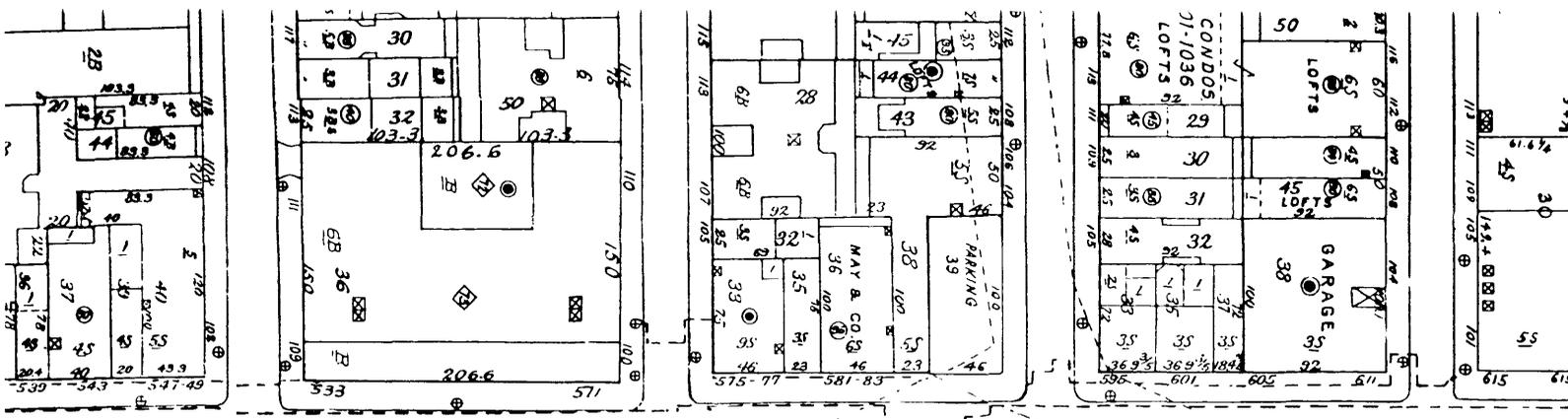
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SUBWAY AVE. OF STATION HUDSON TUBES THE A

