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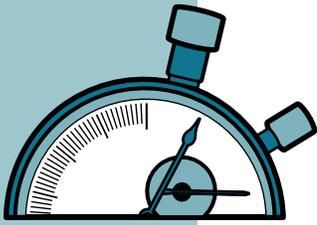
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A Womb With a View: Identifying the Culturally Iconic Fetal Image in Prenatal Ultrasound Provisions

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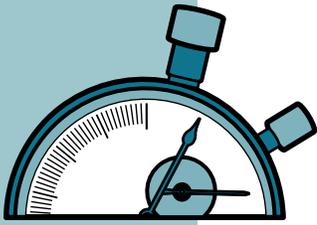
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In the past fifty years, medical advances have allowed doctors to view human embryos (less than ten weeks' gestation) and fetuses (after ten weeks' gestation) via prenatal ultrasound technology ("[Fetal Development](#)"). These procedures allow doctors to identify potential birth defects and maternal dangers without imposing risks upon the mother or the viability of the embryo or fetus. Fetal images, though, are neither self-explanatory nor universally recognized and have become "sites of struggle for meaning" (Perlmutter 22), meaning that this article will attempt to explore by arguing that ultrasound visualization is a complex and transformative act.

For abortion opponents, prenatal ultrasound images offer a "definitive declaration that these pictures tell one story and unveil one truth—that life begins at the moment of conception" (Boucher 9). These images have been used, for example, to deter women from terminating their pregnancies in anti-abortion media such as the film [The Silent Scream](#), at interactive mall kiosks like Truth Booth's [A Window to the Womb](#), and on websites such as

[National Right to Life](#), [Pro-Life Action League](#), [Abortionfacts.com](#), and the [Heritage House 76](#). And, since the mid-1990s, lawmakers in Texas and twenty other states have enacted legislation that "regulate[s] the provision of ultrasound" by requiring providers to perform or offer to perform an ultrasound on each patient seeking an abortion ("[Requirements for Ultrasound](#)").

Most recently in 2011, Texas Governor Rick Perry signed [House Bill 15](#), more commonly known as the Texas Abortion-Sonogram Law; House Bill 15 is considered the most restrictive legislation of its kind in the United States since it requires doctors to display the images to the patient from live, real-time prenatal ultrasounds and to "make the heartbeat audible and describe the fetus' [or embryo's] dimensions, cardiac activity and internal and external organs" (Ackerman). Additionally, this legislation requires that "the provider must give [a patient] a detailed verbal description of the image unless she was raped, has a court order waiving parental consent or is ending



the pregnancy because of a fetal abnormality" ("Abortion").

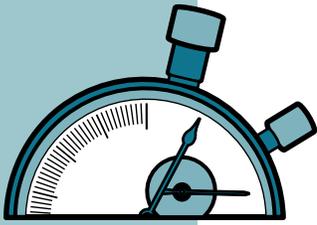
Proponents of ultrasound provisions have stated that such legislation's purpose is to dissuade women from terminating their pregnancies. During the House and Senate debates on the legislation, proponents including Governor Perry argued that the law would ensure that "Texans have access to all the information when making such an important decision" and that the legislation is a "critical step in our efforts to protect life" (qtd. in Tinsely), and Senator Jane Nelson of Flower Mound, Texas stated, "I believe that women will understand [with this bill] that if they choose to have an abortion, that is indeed a life" (qtd. in Tinsely). Critics of the bill, however, have argued that the law is an attempt to shame and humiliate a patient seeking an abortion in order to discourage her from terminating her pregnancy. Senator Wendy Davis of Fort Worth, Texas noted that the law is "cloaked under the guise of informing women ... but the intent is to torture women psychologically" (qtd. in Tinsely). As one online commentator noted, "Conservative legislators have fantasies of women seeing fully formed babies on monitors, bursting into tears, and running out of the clinics" (Marcotte).

Still, it is clear that for representatives like Nelson and Perry, prenatal ultrasounds offer self-evident images that require little explanation,

interpretation, or mediation of the embryo or fetus as it exists within a woman's womb. Images of embryos and fetuses affect not only the "larger cultural climate of reproductive politics but also the experience and consciousness of pregnant women" (Petchesky 265) and often provoke strong reactions, including outrage. Ultrasound provisions, specifically, exploit the cultural significance of the iconic fetal image in order to dissuade a patient from terminating her pregnancy. In essence, these legislative measures encourage a patient to identify (inappropriately and incorrectly) her embryo or fetus as the culturally iconic fetus, one that is viable, fully developed, and autonomous.

Transformation of the Culturally Iconic Fetal Image

At the onset, prenatal ultrasounds appear to offer photographic representations of embryonic and fetal development in utero. These images are perceived to be *indexical* signs that stand "unequivocally for this or that existing thing" (Peirce 4: 531) due to the perceived "genuine relationship" or "direct physical connection" between the embryo or fetus and the image (Peirce 2: 285). Other examples of indexical signs might include driver's license or passport photographs or an exit sign with an arrow pointing toward the door. The image of the embryo or fetus is a sign in which the "signifier is not arbitrary but is directly connected



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in some way (physically or causally) to the signified" (Chandler 37); in this case, an indexical sign of a fetus at six weeks' gestation might appear on screen as indistinguishable on a monitor (Figure 1). As an indexical sign, the prenatal ultrasound image conveys "a certain mystique in our culture that [might] be described by terms such as 'absolutely analogical' and 'message without a code'" (Mitchell 61).



Figure 1 ("Sonogram Human Foetal Ultrasound Scan at 6 Weeks")

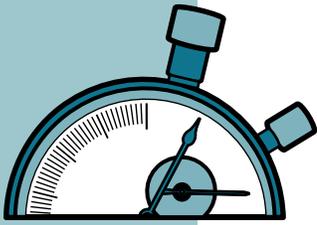
However, a closer examination of prenatal ultrasound images illustrates how they are considered to be persuasive tools that will dissuade women from terminating their pregnancies because prenatal ultrasound images of the embryo or fetus are attributed with the cultural status of being *iconic signs*. Iconic signs, by definition, resemble or possess a likeness of what they signify and "have the modality of direct perception" (Hodge and Kress 27). Additionally, while iconic signs are supposedly transparent, they reflect cultural

conventions that often make these signs highly evocative (Chandler 40). In this case, the culturally iconic image is the autonomous, fully developed (regardless of gestational age), eight-pound, twenty-inch fetus (Figure 2).



Figure 2 ("Sonogram Human Foetal Ultrasound Scan at 22 Weeks")

An examination of these fetal ultrasound images illustrates how they transform from indexical to iconic signs in the cultural contexts of reproductive legislation. Ultrasound legislation intends to dissuade patients from terminating their pregnancies because they are expected to visualize the culturally iconic image of a fully formed, healthy, miniature human floating in the space of its amniotic sac. In short, in the context of legislation like House Bill 15, the image of the embryo or fetus is perceived to be a persuasive tool for pro-life advocates and legislators because there is no recognition or awareness that a transformation of an indexical sign to the culturally iconic one has occurred during the visualization.



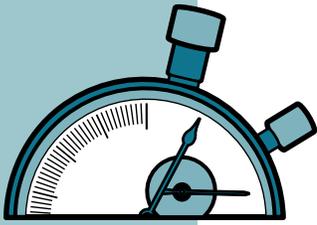
This shift—from the indexical sign to the culturally iconic image—is possible because, as iconic signs, prenatal ultrasound images vaguely represent the embryos' or fetus' physical features, are absent of color and definite form, and lack specificity. The culturally iconic image of embryo and fetus displaces the “mother” by representing “the fetus as primary and autonomous, the woman as absent or peripheral” (Petchesky 268). The prenatal ultrasound image reduces the “incidental elements” of the mother, the doctor, and the technology itself. As such, the fetus is completely independent from the womb and appears to be completely viable—irrespective of gestational development.

While research suggests that ultrasound provisions have no effect on abortion rates (Gold), legislators perceive these images to be effective rhetorical tools that would dissuade a patient from attaining an abortion because these images blur “the boundary between fetus and baby; they reinforce the idea that the fetus’s identity as separate and autonomous from the mother (the ‘living, separate child’) exists from the start” (Petchesky 272). The significance of the culturally iconic image is evident considering that if a woman were viewing a prenatal ultrasound image prior to an abortion, the embryo or fetus on the monitor is (in most cases) less than twelve weeks’ gestation.

Despite this significant distinction, ultrasound provisions seek to exploit the shift from an indexical sign to the culturally iconic image of the fetus in order to dissuade women from terminating their pregnancies. As Governor Perry issued in a statement, ultrasound provisions ensure that women, upon viewing the ultrasound image, understand “the devastating impact of such a life-ending decision” (“[Statement](#)”). Texas Right to Life Director Elizabeth Graham and Legislative Director John Seago concur that the legislation is intended to dissuade women from terminating their pregnancies by encouraging women to see themselves in the ultrasound images as mothers (to unborn, yet fully formed infants) rather than as naïve young girls: “A sonogram transforms a confused customer into a mother willing to rise off the table, walk out of the abortion mill, and choose Life. The last option [abortion providers such as] Planned Parenthood wants is for a frightened girl to take time, to even think, to have a chance to change her mind” (qtd. in Ertelt).

Irrefutability and Timelessness of Fetal Images as Iconic Signs

The persuasive appeal of the iconic fetal image is its supposed irrefutability and timelessness. As a culturally iconic sign, the fetal image reductively “epitomizes the distortion inherent in all photographic images: their tendency to slice up reality into tiny bits



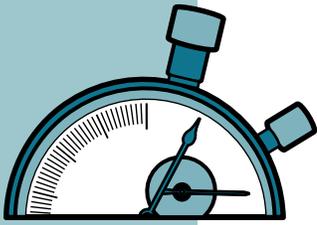
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wrenched out of real space and time” (Petchesky 268). The fetal image as a sign relies on the outlines of objects and entails a “reduction’ of objects’ outlines into a more elementary representational form, in which only the basic underlying structure is retained and many incidental elements are discarded” (Messaris 13). Iconic signs appear to be factual, positive, educational, and informative, but what we see when looking at a prenatal ultrasound image is a reflection of our experiences and desires. As David Blakesley writes, “What we see, even at the moment of perception, is a consequence of what we’re looking for” (130). As such, legislation like House Bill 15 seeks to exploit this transformation of the fetal image from an indexical sign of a six-week fetus to the culturally iconic image of the thirty-two-week fetus. What viewers perceive to be the image of the fetus on the computer screen is really a collection of shaded pixels according to certain criteria programmed into the computer; the resulting image appears to be “human” although it must be interpreted and described by qualified technicians and physicians.

Additionally, the visualization and transformation of the fetal image relies on the technology to capture fetal images—technology that is neither invisible nor neutral. Technology is “impure” and can easily manipulate “humans and what it means to be human” (Burnett 141). Medical and

scientific images that seem to “peer” into the body particularly challenge notions of “what it means to be flesh and blood” (141); visualization involves “the embodiment and the transformation of information into knowledge and understanding through human activity and the conversion of [that] information and knowledge by humans into material and aesthetic forms” (202). Despite the perceived transparency of the fetal image presumed by legislators, the prenatal ultrasound requires doctors and skilled technicians to interpret what appear to the patient as black and white dots. Nothing is inherently “life-like” in the image; rather, in this case, through the visualization of the image, it has transformed into a means of immersion, where parents become a part of the image and the experience, and a perceived connection and closeness with the image exists. As such, viewing has become a “haze of mediation, experience, and screen” (Burnett 7).

Burnett’s point—that visualization and transformation are social acts—illustrates the complexities of prenatal ultrasound images. These images are, on the one hand, supposedly easily understood and representational images of gestational development that should be removed from biological contexts. In the scenario, then, of a woman seeking an abortion, the prenatal ultrasound image directly represents the embryo or fetus, which according to legislators should be a



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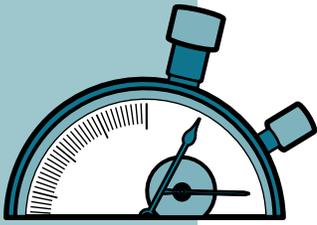
very powerful visual rhetoric against terminating a pregnancy. However, this scene illustrates the contradiction of such rhetoric considering that medical experts must interpret and describe the image in order to reinforce to the patient what she sees and hears during the procedure. In this scenario, then, only trained technicians who are able to “read” prenatal ultrasounds can administer them—a point that undercuts all claims to the indexical or self-evidentiary nature of these images. In other words, the abortion-sonogram legislation requires doctors to describe the images because, without such a description, patients would not make the appropriate transformation from an indexical sign to a culturally iconic one. Only an expert can interpret prenatal ultrasound images—a point that identifies any “doubts about the clarity of what is being seen” (Boucher 16). Prenatal ultrasound images are only considered “factual” by those who accept an ethos of medical technology as definitively and objectively “truthful.”

Just as visual images’ constructed meanings are not “transparent and universally understood, but culturally specific” (Kress and van Leeuwen 3), these images are hardly irrefutable and timeless because their rhetorical effectiveness relies on the cultural contexts in which the images appear. Prenatal ultrasound images are perceived to be factual, positive, educational, and informative in a

cultural context that accepts them as such, and maternal bonding through the awareness of the human body is culturally specific and defined. While this awareness has been defined as unequivocally biologically linked, all “positive” awareness is culturally defined. As Petchesky notes, arguments that suggest the “timing of maternal-fetus or maternal-infant attachment is a biological given [...] contradict women’s changing historical experience” (283).

An example of this transformation and mediation is clear in the popularity and appropriation by anti-abortion advocates of Lennart Nilsson’s famous images of the fetus suspended in the womb in *Life* magazine on April 30, 1965 (later republished in “Drama of Life Before Birth: Landmark Work Five Decades Later”) and in his book and on his website [A Child is Born](#). While Nilsson’s images have been widely used and distributed in anti-abortion literature, Nilsson’s photographs were actually aborted fetuses, a point that illustrates how technology mediates and transforms an iconic sign:

Although claiming to show the living fetus, Nilsson actually photographed abortus material obtained from women who terminated their pregnancies under the liberal Swedish



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law. Working with dead embryos allowed Nilsson to experiment with lighting, background and positions, such as placing the thumb into the fetus' mouth. ("[The Lonesome Space Traveller](#)")

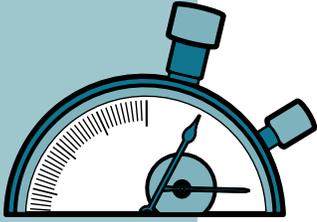
These famous photographs have been manipulated in anti-abortion discourses as symbolic props that continue to shape reproductive rights campaigns some fifty years after they were first published.

The fetal image, like Nilsson's, presents what Roland Barthes referred to as a coded iconic message that requires little interpretation because "there is always the stupefying evidence of *this is how it was*, giving us, by a precious miracle, a reality from which we are sheltered" (44). In this case, the prenatal ultrasound offers a woman the opportunity to transform what is presented on the monitor into a baby floating within intrauterine shelter of the womb beyond culture and context. This iconic image of the fetus offers an "abstract individualism, effacing the pregnant woman and the fetus's dependence on her" (Petchesky 270). This iconic fetal image possesses a "symbolic transparency" that encourages us to "read in it ourselves, our lost babies, our mythic secure past" (270).

Conclusions

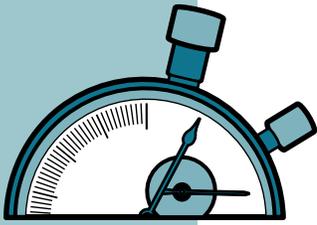
As this article has shown, the iconicity of the fetal image is all the more relevant considering reproductive

legislation has emotional, fiscal, and legislative repercussions on women's reproductive health and freedom. The significance of the cultural iconic fetal image is illustrated even as legislators currently debate, amongst other concerns, whether to require invasive trans-vaginal ultrasounds (internal ultrasounds that are often required in cases where the gestation age is less than six weeks gestation) and how 3D technology will change ultrasound provisions. Additionally, some advocates of abortion provisions have demanded legislative inclusions that require only doctors and sonographers who do not have a financial interest in the abortion decision to administer prenatal ultrasounds (provisions that would require a patient to seek out a doctor to perform the ultrasound procedure who had no financial interest the patient's decision to proceed with an abortion). These advocates of provisions have also demanded requirements that doctors must determine and explain to patients that they are terminating "viable pregnancies" (Glessner). These iconic images have continued to shape political agendas that have far-reaching implications on women's health, and considering that fetal images are afforded an iconic status that plays a significant role in women's reproductive rights, they require a contextuality that is often, but cannot be, ignored.



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