Without Apology
For a very long time, the voices that spoke publicly about abortion were mostly those of men—politicians, clergy, lawyers, physicians, all of whom had an interest in regulating women’s bodies. Even today, when women speak openly about abortion, the voices are of those who are professionally or politically invested in the topic. We hear most frequently from journalists and leaders of women’s and abortion rights organizations, sometimes from women who hold political office, and, on occasion, from female physicians. We also hear quite frequently from spokeswomen for anti-abortion groups. Rarely, however, do we hear the voices of women who have made the decision to terminate a pregnancy. Yet without hearing from these women—without giving them a place to speak about their experiences and to share their ideas on abortion—we run the risk of thinking and talking about the issue only in the abstract.

This collection was inspired in part by some of my earlier research, which focused on the politics of abortion in English Canada during
the 1960s, a decade marked by public pressure to decriminalize abortion.1 Perhaps unsurprisingly, women’s voices were often muted in historical accounts of the period—a familiar form of discursive erasure. As I discovered, however, women were speaking up and in fact took an active part in the debates surrounding the need for abortion law reform. What was lacking, and to some extent still is, was not merely public space for their voices but the will to hear them. As Arundhati Roy argues, “There’s really no such thing as the ‘voiceless.’ ‘There are only the deliberately silenced, or the preferably unheard.”2 Despite a subsequent lack of recognition, the sharing of women’s experiences with and ideas on abortion was integral to the political change that occurred during the 1960s. Such sharing is, in my view, essential to the struggle to ensure that abortion is not only legal but also safe and accessible in Canada and elsewhere in the world. Only by speaking openly and honestly to one another and attending closely to the situations and thoughts of those who have had an abortion will women, and men, be able to move beyond the polarizing rhetoric that has characterized the issue for so long.

Invisible Stigmata

In 1992, two scholars, Carolyn Ellis and Arthur Bochner, wrote as a couple about their unplanned pregnancy and decision to opt for abortion. They chose to share their experience in part because they firmly believed that the “act of telling a personal story is a way of giving voice to experiences that are shrouded in secrecy.”3 Commenting on the limited scope of narratives about abortion, they wrote: “We know little about the details of the emotional and cognitive processes that are associated with living through this experience. The stories that are told are primarily about illegal abortions performed in back rooms or dark alleys, couched in generalities, and disclosed many years after they occur.”4 These often harrowing tales seek to portray women in as sympathetic a light as possible—typically as victims of circumstances beyond their control.5 While such narratives were crucial to the fight to decriminalize abortion, and while they serve as an important reminder of why that fight was so important, they are easily perceived as having little contemporary relevance. They sensationalize abortion, at a time when we need, instead, to make efforts to normalize this very common procedure. In addition, these stories rarely reveal the thought processes behind women’s decisions or otherwise describe situations to which women today can easily relate. Women do not see themselves reflected in these stories, and the lack
of contemporary narratives that speak to their own experiences could contribute to the perpetuation of silence surrounding abortion.

Although there have been some published accounts of Canadian women's abortion experiences, few women speak publicly about their abortions. In 1998, the Childbirth by Choice Trust published *No Choice: Canadian Women Tell Their Stories of Illegal Abortion*. The appearance of this collection was a notable step forward, but because it focuses on the experience of abortion before the procedure was decriminalized, the narratives in it tend to share much with disturbing tales of “back alley” abortions. Despite the welcome publication, in 2014, of Martha Solomon and Kathryn Palmateer’s collection *One Kind Word: Women Share Their Abortion Stories*, modern accounts of abortion in Canada remain sparse, revealing the strength of the stigma that continues to surround the subject. As Solomon points out in her contribution to this collection, “Secrets are invariably tinged with a fear of discovery. Secrets can leave people feeling muzzled, fearful, and ashamed.” The desire for privacy should not be born of a fear of exposure. While no woman should feel compelled to share her abortion story, in a just world she should not be afraid to do so.

Yet the stigma persists. As the authors of one study note, “in public discourse and from the perspective of women having abortions . . . the idea that there are ‘good abortions’ and ‘bad abortions,’ stemming from ‘good’ and ‘bad’ reasons for having them, is prevalent.” Indeed, the motives for abortion are often divided into “hard” and “soft” categories. Abortions performed for so-called hard reasons are those done in cases where the pregnancy resulted from rape or incest or where concerns exist about maternal health or fetal abnormality. The soft reasons are related to socioeconomic or lifestyle considerations such as career aspirations or the timing of the pregnancy. As Janine Brodie observes, “The public is more likely to favour free access to abortion when a woman is cast in terms of the victim than when abortion is associated with decisions relating to women’s self-determination.”

Anti-abortion activism has also contributed to the stigma attaching to abortion. Women have internalized anti-abortion messages that refer to them as “selfish,” as “baby killers,” and by a host of other epithets. Ironically, they have at times been encouraged in this endeavour by the abortion rights movement itself. In “Rethinking the Mantra That Abortion Should be ‘Safe, Legal, and Rare,’” sociologist Tracy Weitz traces the history of the oft-quoted comment, showing how it was adopted as a conciliatory approach to a
contentious issue, first by American politicians and then by abortion rights organizers themselves. However, every time we add a qualifier, a “but,” to the statement “I’m pro-choice,” we draw a line of separation between ourselves and women who have abortions. How often, for example, do we hear individuals who identify as pro-choice say things like, “I’m pro-choice, but I’m glad I never had to make the decision,” or “I’m pro-choice, but I think it’s best to prevent the pregnancy in the first place,” or “I’m pro-choice, but I would never have an abortion myself”? These statements distance the speaker from those women who were not “lucky” enough to escape their fertile years without needing to have recourse to abortion. The comments (especially the second) also imply that women who become pregnant unintentionally are cavalier about their fertility and have failed to assume adequate responsibility for birth control. The last of the three statements, and possibly the most familiar, is arguably the most damaging because it perpetuates the shame felt by some women who have chosen to have an abortion. There is smugness in this statement, which, consciously or not, makes a value judgment—“Abortion may be okay for you, but not for me.” Moreover, such statements are a public proclamation that the speaker has not had an abortion, as though having had one is somehow bad, which can inadvertently silence women who have had one. By participating in the act of creating distance between women who have had an abortion and those who have not, we reinforce the stigmatization that surrounds the procedure. In other words, the act of supporting abortion on a conditional basis silences women.

We have recently witnessed a marked increase of women in North America talking publicly about their abortions. Much of this sharing seems to have been prompted by efforts across the continent to attack the legal basis of women’s reproductive rights. In the United States, Republican victories in the 2010 midterm election set the stage for renewed anti-abortion efforts, with states all across the country introducing literally hundreds of abortion bills that sought, in various ways, to limit access to the procedure. In 2012, we in Canada saw an attempt to reopen the abortion debate at the federal level via Motion 312, which sought a formal discussion of when fetal life begins. The motion was defeated by a large majority, but the fact that it was brought forward at all was alarming. Although women responded to these threats by speaking up, their stories primarily appeared online and were often posted anonymously. In other words, as long as many people feel that this remarkably common medical procedure is not an appropriate topic of
conversation, we are still a long way from a world in which women will not feel obliged to conceal the fact that they had an abortion.

**The Politics of Language: Problematizing "Choice"**

In addition to the desire to create space for women to share abortion experiences, this book stems in part from my own dissatisfaction with how we talk about abortion and from the lack of public discussion within the Canadian women’s movement about how to move forward discursively and strategically as advocates for reproductive rights and freedoms. Although, historically, “pro-choice” has been the term most often associated with support for a woman’s right to control her own reproduction, it has been criticized for the assumptions implicit in it, which potentially limit the reach of the movement for reproductive rights. In 1982, writer and feminist Kathleen McDonnell called abortion “the forgotten issue of the women’s movement.” She followed this pronouncement with her book *Not an Easy Choice* (1984), in which she argues that the notion of personal choice is legitimate only “if a woman seeks to end a pregnancy for reasons other than financial ones.” As she went on to point out, “Many of the constraints on choice, such as economic factors, are embedded in our social structure and can only be eradicated by wider social and economic change that creates conditions more amenable to having children.”

McDonnell’s focus on social and economic change makes sense given the history of socialist feminist organizing in Canada. While certainly not all, or even most, of the early Canadian proponents of women’s rights were inspired by a socialist perspective, many of the women involved in the 1970 Abortion Caravan, for example, identified themselves as socialist feminists. Similarly, the Ontario Coalition for Abortion Clinics (OCAC), founded in 1982, is a socialist feminist organization. Carolyn Egan, a founding member of OCAC, explains in this collection how, by situating its organizing within a socialist feminist framework, the coalition recognized that “choice” is always circumscribed by women’s social and economic conditions. This conceptualization has meant that OCAC has purposefully collaborated with activist groups, labour unions, and NGOs such as the Immigrant Women’s Health Centre that address a myriad of issues affecting women’s lives.

It has not only been socialist feminists, however, who have been critical of framing of abortion in terms of individual choice. Rather, a range of feminists, many from the United States, have voiced similar concerns. Writing...
in 1984, roughly a decade after the US Supreme Court’s decision in *Roe v. Wade*, the American political scientist Rosalind Petchesky drew a connection between arguments based on individual choice, according to which decisions about abortion are a “matter of conscience,” and arguments based on an individual’s right to privacy, which likewise have the effect of removing the issue of abortion from the public sphere. In *Roe*, the Supreme Court placed limits on state intervention in abortion, on the grounds that such intervention violates a woman’s right to privacy, stipulating that, during the first trimester of pregnancy, only a woman’s physician should be involved in her choice regarding abortion. In Petchesky’s view, an individual’s legal right to privacy therefore provides only “a ‘shaky’ constitutional basis for women’s abortion rights insofar as it lends itself to interpretations favouring the professional and proprietary claims of doctors.” Petchesky was also critical of building the case for abortion on the concept of a woman’s right to privacy because doing so “asserts the personal and individual character of pregnancy and childbearing” and thus offers no ground on which to argue that “women, as a ‘class,’ are entitled to abortion services.” Such a denial, she argued, perpetuates the class divisions between women, as it leaves those individuals with fewer means to fend for themselves.

American historian Rickie Solinger has been similarly critical of the notion of “choice.” As she points out, in the 1960s and early 1970s, the discussion around abortion was usually framed in terms of “rights.” In the wake of *Roe v. Wade* (1973), however, feminists eager to consolidate gains embraced the language of “choice”—a term that allowed them to talk about abortion without actually using the word. “Many people,” she writes, “believed that ‘choice’—a term that evoked women shoppers selecting among options in the marketplace—would be an easier sell; it offered ‘rights lite,’ a package less threatening or disturbing than unadulterated rights.” As Solinger further argues, the notion of choice “became a symbol of middle-class women’s arrival as independent consumers,” consumers who “had earned the right to choose motherhood, if they liked.” Women of colour, however, had earned no similar right and did not enjoy a similar choice. Adding to the critique, Andrea Smith has questioned the narrow focus of both the pro-life and pro-choice movements on the legal status of abortion. She argues that the decriminalization of abortion does nothing to address, much less to resolve, what are really social justice issues and that only broad economic, social, and political change will ameliorate inequities in reproductive rights.
These were not the only criticisms of the language of “choice,” and some women abandoned the notion entirely in favour of “reproductive justice.” The term can be traced to 1994, when a group of black women met in Chicago to address the health issues facing women of colour. In an effort to forge a link between reproductive rights and social justice, the group chose to call itself Women of African Descent for Reproductive Justice. The concept gained organizational strength in 1997, with the founding of the SisterSong Women of Color Reproductive Health Collective in the United States. Using a human rights framework, SisterSong sought to build a coalition of groups that were interested in moving beyond what they perceived as the polarizing language used by both the pro-choice and pro-life sides. Those who founded SisterSong chose to speak of “reproductive justice,” rather than “choice,” because they felt many women do not have the luxury of choice—that a fundamental transformation of society will be required before all women are in a position to control their reproductive lives. Loretta Ross, one of the founders and a long-time national coordinator of SisterSong, defines “reproductive justice” as

the complete physical, mental, spiritual, political, social and economic well-being of women and girls, based on the full achievement and protection of women’s human rights. It offers a new perspective on reproductive issue advocacy, pointing out that for Indigenous women and women of color it is important to fight equally for (1) the right to have a child; (2) the right not to have a child; and (3) the right to parent the children we have, as well as to control our birthing options, such as midwifery. We also fight for the necessary enabling conditions to realize these rights. This is in contrast to the singular focus on abortion by the pro-choice movement.

Miriam Pérez, a Cuban American reproductive justice activist, distills the tenets of the movement to the simplest definition: “working to build a world where everyone has what they need to create the family they want to create.” The reproductive justice framework became increasingly visible in the United States following SisterSong’s coplanning of the April 2004 March for Women’s Lives held in Washington, DC. And, increasingly, it informs the organizing of the traditionally pro-choice organizations. For example, at the start of 2013, Planned Parenthood announced its decision to abandon the dichotomous pro-life/pro-choice framework, and in 2014 Choice USA renamed itself URGE: Unite for Reproductive and Gender Equity.
Reproductive justice advocates acknowledge the limits of the discourse of “choice,” including what Marlene Fried and Susan Yanow describe as “the failure to disassociate abortion politics from population control, and reducing reproductive rights to the issue of abortion.” They argue that a reproductive justice framework is capable of “rejuvenating the meaning and practice of reproductive rights with an expansive multi-issue perspective and agenda for action. This provides an opportunity to create new alliances internationally and joins the abortion rights struggle to other health and social justice movements.”28 The Asian Communities for Reproductive Justice have outlined three main frameworks within which to fight reproductive oppression: reproductive health, which focuses on the delivery of health services; reproductive rights, which focuses on protecting women’s legal right to reproductive health care; and reproductive justice, which focuses on addressing structural inequalities through organizing and movement building.29

In Canada, the conversation about the adoption of “reproductive justice” developed more recently. In 2010, activist Jessica Yee (now Jessica Danforth), the founder and executive director of the Native Youth Sexual Health Network, observed a resistance to the concept of reproductive justice (RJ) on the part of the pro-choice movement in Canada. She noted both a “deeply entrenched reluctance to adopt RJ at all” and the tendency toward a purely nominal adoption of the term: “RJ appears to be this ‘add-on’ of ‘it looks good to have it’ so even if it’s included in an organization’s mandate, their policies, procedures, and practices don’t change.”30 A year later, in June 2011, the Aboriginal Health Initiatives Committee of the Society of Obstetricians and Gynaecologists of Canada issued a joint policy statement in tandem with a wide array of Indigenous organizations and mainstream Canadian medical associations outlining the need to adopt a reproductive justice framework in order “to reduce the inequity in the availability and accessibility of sexual and reproductive services” for Canada’s Indigenous peoples.31

I would argue that, in the years since Danforth wrote her critique, women’s rights organizations in Canada have shown increasing enthusiasm for reproductive justice as a conceptual framework. Even if, at this stage, the embrace is sometimes more nominal than real, many organizations have either formed around or adopted a RJ framework. The period has, for example, seen the founding of Reproductive Justice New Brunswick and the Vancouver-based Reproductive Justice League of Canada, as well as the Centre for Gender
Advocacy at Concordia University in Montréal. In addition, the Abortion Rights Coalition of Canada has declared its support for RJ, recognizing that “the sexual and reproductive health and rights of people from many diverse communities are disproportionately affected by marginalization and oppression.” All the same, as I discuss in the conclusion to this volume, the actualization of reproductive justice as an organizing principle is very much a work in progress in Canada. As we move forward, we must heed critiques by long-term reproductive justice activists, such as Danforth and Loretta Ross, and not lose sight of the origins of the concept.

Engaging in dialogue about terminology is critical to the growth and effectiveness of any movement. Those who advocate for women’s reproductive freedom and autonomy must be cognizant that some abortion rights supporters (especially those who are not activists) are not entirely comfortable with the terms in which abortion is publicly discussed in Canada. Andrea Smith cautions us against “simplistic analyses of who our political friends and enemies are in the area of reproductive rights,” while Pérez astutely observes: “Language matters. It can invite people in, or discourage people from joining. It can allow people to feel seen.” For this reason, an absence of open dialogue about the framing of abortion rights and how that framing affects movement strategy can have the effect of alienating potential allies. In her discussion of the history of the language used to talk about abortion in the United States, American feminist Jennifer Baumgardner argues that “the U.S. can’t remain in the same rhetorical place it was in the ’70s, or even the ’80s.” Her observation holds true for Canada, too. Canadians are, it seems, beginning to engage in conversation about the framing of abortion rights, and, while this is a very welcome development, it is an ongoing and imperfect process that involves growing, learning, sharing, and listening.

**Bridging Divides: The Origins of This Collection**

This anthology, a combination of personal reflections and analytical essays, aims to create space for voices that often go unheard—a space for women who have had an abortion to speak openly about their experiences and for those who deliver abortion services or who advocate for abortion rights to share their thoughts. At the same time, it seeks to explore some of the many issues that surround abortion and to discuss new strategies for debating reproductive rights. Together, these voices challenge us to think about the complexities surrounding abortion without losing sight of concrete realities.
While researching and writing my dissertation, I was involved with the Ontario Coalition for Abortion Clinics (OCAC). Two important observations emerged from my involvement with this organization. First, I became aware of the depth of the historical memory of front-line work carried out by abortion rights activists, whose knowledge and experience has not been adequately recorded. This potential loss is linked to my second observation, namely, of the need for closer collaboration between academic feminists and front-line activists. At various activist events that I attended in Toronto over the years, I often overheard academic feminism dismissed as irrelevant or out of touch. Although no doubt some of it warrants this criticism, important discussions of language and strategy do take place in the academy, and stronger alliances among all involved in advocating for access to abortion can benefit the movement as a whole. Of course, this must be a reciprocal relationship, with academics learning much from the ideas and experiences of activists.

Conversely, the academic world continues to be suspicious of scholars whose work is overtly linked to political objectives. While scholars accept that we all bring our experiences, identities, and biases to our work, there remains an expectation that we will make every effort to banish them from our work—that scholarship must be clearly separated from personal values and agendas. Similarly, scholars are not supposed to rely on their own experience as evidence. Work that contains an autoethnographic or narrative element—politically engaged writing in which the scholar maintains an explicit presence, essentially becoming a character in the story—makes many academics uncomfortable. This volume was prompted in part by my struggle to reconcile these two identities, academic and activist, and by my belief that it is not only possible but important to be both; my education is a privilege that necessitates social and political engagement. Some of the pieces in this collection demonstrate the potential of bridging the gap between front-line and academic feminisms. I think, especially, of Colleen MacQuarrie’s explanation of her activist research methods, which have breathed new life into the reproductive rights movement on Prince Edward Island.

This collection does not seek to debate the pros and cons of abortion. Rather, it aims to integrate thought and action and to explore the topic of abortion from a variety of experiential perspectives. Therefore, when I circulated a call for contributors to this collection, I solicited narrative pieces grounded in personal experience as well as analytical reflections on
issues currently confronting the reproductive rights movement in Canada. The call was sent to an array of women’s rights groups, some broadly based and others that focus on abortion. I also extended invitations to individual activists, academics, journalists, politicians, and authors of online pieces, all of whom had previously addressed the topic of abortion.

Despite my earnest desire to include the voices of women who are neither activists nor academics, this did not prove easy. After all, these women had to be willing to share a deeply personal experience and to trust me not to reveal their identity if they wished to remain anonymous. Indeed, some of those who contacted me, wanting to share their stories, were unwilling to share their names at all, which attests to the power of the stigma that continues to surround abortion. So, of course, there are voices missing here—those of women who are still safeguarding their secret, perhaps after a whole lifetime of having done so. Responses also tended to come from women who have activist connections, an online presence, and relatively high literacy and education levels. So there are other missing voices. Their absence signals the degree to which solidarity remains to be achieved. It suggests that abandoning the rhetoric of choice is not enough—that the quest for social and reproductive justice has only just begun.

**Without Apology: An Overview**

While the essays in this anthology work together in a myriad of ways, I have chosen to group them into five parts. Part 1, “Speaking from Experience,” consists of contributions from seven women who write about their encounters with abortion. The first of these, by Judith Mintz, begins with a quotation from Kristi Siegel: “Women’s autobiography is distinguished by its uneasy relationship to the body and maternity.” The authors in this section explore their relationships with their reproductive bodies, sharing their thoughts on abortion through narrative and autoethnography. These pieces begin to illuminate the divergent ways in which women experience “choice,” raising questions for future discussion about issues of isolation and inadequate support and about the social attitudes that provoke judgment, stigmatization, and, by extension, feelings of shame.

With the exception of Wagner’s piece about her search for an abortion provider before abortion was decriminalized in Canada, these narratives are not about the issue of access. Most of these women were able to take for granted their ability to access abortion services, and we need to acknowledge
the element of privilege associated with their experiences. Even though, in theory, all women in Canada are entitled to make the decision to have an abortion, women are not equally empowered to act on it. Purely in practical terms, women who live in remote and rural areas, especially in the North, do not have ready access to abortion services. In addition, women who are poor or who lack the education on which our capacity to operationalize our rights so often depends face barriers to abortion access that the women in this collection generally did not confront. Indigenous women and women who belong to racialized minorities, who must already contend with racism and glaring social and economic inequities, also face additional barriers not represented by the narratives in this collection. These are among the missing voices. Also missing are the voices of transgendered and non-binary people. At the time I issued the call for papers, I had not yet considered their reproductive experiences. This is an erasure that I regret and would not reproduce if I were to reissue the call today.

The narratives in part 1 illustrate the importance of recognizing the diversity of women’s abortion experiences. Some women struggle to decide whether to continue a pregnancy. Other women don’t agonize over their decision but know with certainty what is right for them in that moment of their reproductive lives. At other times, the difficulty lies not in the decision itself but in the circumstances surrounding the abortion. One striking feature in these narratives, for example, is the differing levels of support that the women received. The pieces by Mackenzie and E.K. Hornbeck are noteworthy because of the abundant support that these two women enjoyed: all women should be so well supported through their abortion journeys. But, as the other narratives reveal, women often are not well supported, for a variety of reasons. One key issue remains the feelings of isolation and shame that women experience, which gives rise to the need to keep their abortions secret. As long as abortion is something that women feel they must hide, this lack of support will continue.

The complexity of women’s feelings about abortion is an issue worthy of serious attention, and yet it has received relatively little discussion in Canada, whether in academic or public forums. Increasingly, especially in the United States, pro-choice supporters have acknowledged the need to move away from “the oversimplified dualism of good/bad, black/white, easy/hard, trauma/relief” and to recognize the multiplicity of women’s experiences with, and feelings about, their abortions. In 2008, Nancy Keenan,
then president of the National Abortion Rights Action League (now called NARAL Pro-Choice America), acknowledged, “Our community tends to run away every time somebody talks about the many emotions that come with this choice. . . . We have not done enough to make people who are ‘pro-choice but struggling’ feel like they are part of this community.” The decision to have an abortion can be a complicated one, and women who are contemplating that decision often negotiate a range of emotions. Similarly, in addition to a sense of relief, women who have had an abortion may experience feelings of guilt or regret, even when the advantages of terminating the pregnancy were clear. The experience of an unwanted pregnancy may also crystallize other difficulties in a woman’s life, such as a bad relationship (or the lack of a serious relationship) or an impending financial crisis. Abortion ends the unwanted pregnancy, but it does not end ongoing sources of stress, which a woman may now be obliged to confront.

For all these reasons, women may require, or at least benefit from, some form of supportive counselling, especially after the fact. Clearly, this support needs to come from people who are sympathetic to a woman’s situation, rather than those who may sit in judgment, thereby exacerbating emotional distress.

One of the concerns that discourage dialogue about the need for access to post-abortion counselling is a fear of playing into the hands of abortion opponents, who have recently adopted a new “pro-woman” stance. They argue that if women who have had an abortion need counselling, then abortion must be harmful; therefore, it should either be outlawed completely or, at the very least, be prefaced by mandatory counselling. We know that such arguments are false. The American Psychological Association’s Task Force on Mental Health and Abortion surveyed the existing literature on abortion and women’s mental health and found that “the relative risk of mental health problems among adult women who have a single, legal, first-trimester abortion of an unwanted pregnancy for nontherapeutic reasons is no greater than the risk among women who deliver an unwanted pregnancy.” As the authors acknowledged, while “some women feel confident they made the right choice and feel no regret; others experience sadness, grief, guilt, and feelings of loss following the elective termination of a pregnancy,” including, in some cases, “clinically significant outcomes, such as depression and anxiety.” If even one woman feels that she needs to be better supported post-abortion, then it is incumbent on those of us who are pro-choice to support her. If we fail to fill that void, we cede this ground to the anti-abortion movement. Witness,
for example, the proliferation of explicitly anti-abortion sites such as Canada Silent No More and Project Rachel, which purport to offer support to women who are struggling with the “physical, emotional or spiritual pain” and other “harmful after-effects” of abortion. Such blatantly ideological sites must be countered by spaces that validate all responses to abortion, positive and negative, in a supportive and nonjudgmental environment. As long as abortion remains something secretive and shameful, women will not be free. If we remove the atmosphere of judgment, talking openly about abortion will not require the same sort of courage that it currently does.

In part 2, “Abortion Rights Activism,” we hear from women who, in a variety of ways, are working to transform the social attitudes and institutional structures that give rise to secrecy and shame. In June 1970, Prime Minister Pierre Trudeau met with women from the Vancouver Women’s Caucus—the women who had planned and participated in the Abortion Caravan of May 1970. In response to their request that abortion be further decriminalized, Trudeau told them: “It is your job to change public morality. The public is not ready for this.” In the decades that followed, women’s groups responded to challenge, although not with a view to changing public morality as much as changing public awareness and understanding. The five essays in part 2, written by both front-line and academic activists, document different approaches to activism—street protests, photographic exhibits, empowerment through education—across several generations.

Together, these pieces illustrate a critical point, namely, that abortion rights activism does not occur in a vacuum. As Aalya Ahmad, writing for the Radical Handmaids, points out, “Too often, abortion rights are isolated from their intrinsic connection with the other rights that feminists have fought for,” rights that include “access to education, affordable child care, freedom from stifling poverty, and the ability to leave abusive partners.” In other words, women’s reproductive life does not occur in a vacuum either. As these pieces explain, the right not to be pregnant, as well as the right to expect the quality of support that makes it possible to continue a pregnancy, depend on a broader set of rights and freedoms. Accordingly, even though they may come together around a specific concern, activists must understand the systemic relationships and inequities that undergird that concern, and it is in this larger context that they must situate their work.

The third part, “Challenging Opposing Positions,” contains seven essays that address the Canadian anti-abortion movement, providing observations
from both long-term and more recent reproductive rights activists. These authors describe their perceptions of the opposition, including its affiliation with Christian fundamentalism—an understudied aspect of the abortion debate in Canada. They suggest strategies for responding to anti-abortionists, as well as ways to reframe the abortion debate.

In Canada, as elsewhere, most anti-abortion activism has taken the form of demonstrations, picketing, petitions, and media and public “education” campaigns. Canada has, however, witnessed several instances of anti-abortion terrorism. Other incidences of illegal protest, generally involving the arrest of protesters for breaking clinic injunctions, continue to occur. The anti-abortion movement also continues to try to recriminalize abortion: since the 1988 Morgentaler court decision that saw the abortion law overturned, more than forty private members’ bills that contain at least some anti-abortion measures have been introduced in the House of Commons. Fortunately, all attempts to date have failed. Most recently, the Canadian anti-abortion movement, much more media and message savvy than in the past, has attempted to rebrand itself as moderate. To this end, anti-abortion organizations have developed an extensive arsenal of new strategies, many of which rely not on moralizing and appeals to emotion but on persuasion through reasoned argument. One is to attack abortion from the “taxpayer” perspective by arguing that abortion is not a medically necessary service and therefore should not be funded by public monies. Another is to adopt what appears to be a “pro-women” stance by arguing, for example, that abortion harms women. More broadly, the movement seeks what anti-choice blogger Andrea Mrozek calls “cultural change,” the goal of which is to transform the way that Canadians view abortion to the point that choosing abortion would become unthinkable. These new anti-abortion strategies demand new responses.

Part 4, “Practitioners and Clinic Support,” comprises six reflections about the abortion experience from the perspective of abortion providers and clinic support staff. These pieces offer insight into the relationship between women who are seeking an abortion and the counsellors and physicians whose job it is to guide them through the experience. We hear from three abortion counsellors, who speak of the harassment to which pregnant women are subjected at the hands of anti-abortion protestors standing guard outside abortion clinics. They also emphasize the need to normalize abortion, in part by the sharing of stories, so that women are spared the sense of isolation and shame.
that too often surround the experience. This theme is echoed by one of the three physicians from whom we also hear, who suggests that those of us who support reproductive rights—whether as medical practitioners, counsellors, and activists or simply on principle—need to think further about how we approach both the topic and the experience of abortion.

These authors also underscore the need to keep abortion legal. Today, doctors no longer routinely confront the sometimes horrific consequences of “hotel-room” abortions—an experience that one of three physicians recalls from the early days of his practice. However, in the era of legalized abortion, violence of another sort still hovers in the air. While it has been some time since abortion clinics were bombed and doctors shot, the threat to personal safety remains very real. In Canada, a handful of physicians are well known for their efforts to make abortions available; unfortunately, they became known because they became victims of anti-abortion violence. We need to remember the experience and words of Garson Romalis, who was shot and stabbed in two separate attacks on his life. Romalis, reflecting many years later on his experience as an abortion provider, wrote, “After an abortion operation, patients frequently say ‘Thank You Doctor.’ But abortion is the only operation I know of where they also sometimes say ‘Thank you for what you do.’”

The final part, “Sites of Struggle,” consists of four critical reflections that seek to complicate the dialogue on abortion. Drawing on intersectional approaches, the authors suggest possible avenues forward that are less about access per se and more about justice and equity. Indigenous women, who have repeatedly been the target of what Karen Stote aptly describes as “reproductive violence,” are among the racialized groups for whom the narrative of choice holds little meaning. Freedom is always constrained by circumstance, and the right to access abortion becomes a mockery when women are coerced into having one or are encouraged to ingest long-acting, and potentially harmful, contraceptives on the grounds that they are too poor to have any further children. Stote’s chapter makes clear that until those of us who claim to support social justice commit to changing current conditions—conditions that do not merely produce poverty, racism, and political oppression but in fact depend for their very existence upon such systemic inequalities—reproductive “rights” will remain out of reach for all but the socially and economically privileged.

Women’s reproductive rights and oppressions are also connected to advances in medical technology. Both Bindy Kang and Jen Rinaldi explore
how such developments, often presented in a positive light, can actually constrain and coerce women’s options. The visibility of the fetus has altered social perceptions surrounding pregnancy and, by extension, the place of abortion in the story. As Kang’s essay illustrates, dominant values ironically provide a “moral” justification for racism: pregnant women whose ethnic roots lie in cultures that historically have favoured male children are assumed to be more likely to abort a female child. Kang examines such assumptions, demonstrating powerful connections between them and the long history of racism in Canada. Rinaldi in turn points out that fetal imaging means that the mother now shares the stage with the fetus, images of which play into the hands of those who oppose abortion. She argues that the narrative surrounding prenatal testing is premised on a happy outcome; when “abnormalities” are discovered in the fetus, however, the story goes awry, and women may accordingly be encouraged to terminate the pregnancy. Prenatal diagnostic technology can thus have the effect of limiting a woman’s capacity to choose. Rinaldi’s piece encourages us to consider the implications of abortion for those of us who also advocate for disability rights. Disability scholar Tom Shakespeare describes the issue this way: “At the heart of the debate around pre-natal genetic testing are contested choices and rights: a woman’s right to choose, the civil rights of disabled people, the postulated rights of the unborn child, the rights of the individual versus the rights of the collective.”

Kang and Rinaldi’s pieces complicate the dialogue but leave us no closer to a resolution (if, indeed, we seek one). The final chapter, by Shannon Dea, suggests that, rather than continuing to focus on points of conflict, the two sides could search for common ground and, by adopting a harm-reduction model, work together to minimize the need for abortion. In this way, it may be possible to reconceptualize the binary framework—“pro-life” versus “pro-choice”—to move beyond the impasse. Her argument reminds us of Andrea Smith’s suggestion that we reject simplistic definitions of political allies and political enemies lest we sacrifice possibilities to work toward common goals—a position echoed by Nick Van der Graaf, in his contribution to this volume.

Just as there is no one abortion experience, there is no right or wrong way to feel about one’s abortion. Relief, happiness, grief, sadness, ambivalence: all these emotions are normal reactions to terminating a pregnancy. The only emotions that are not natural are shame and feelings of isolation. Those
emotions are forced on us by external sources, whether they be anti-abortion activists who want us to feel bad about our choices or pro-choice advocates who try to avoid the complicated emotions that can accompany an abortion. My hope is that this collection will help to normalize the experience of abortion—that is, to make visible this extremely common procedure—and, in so doing, help to dispel the sense of shame with which women who have had an abortion still struggle and that prevents them from talking their feelings through. I also hope that the collection will encourage new and more experientially informed discussion among those of us concerned with safeguarding abortion rights.

Notes
4 Ibid., 97.
9 For further discussion, see Kate Cockrill and Adina Nack, “I’m Not That Type of Person: Managing the Stigma of Having an Abortion,” 984. See also Dr. Ellen Wiebe’s contribution to this volume. As Wiebe has often observed, even women who are seeking an abortion themselves often presume to pass judgment on the motives of others who are doing the same.


14 Kathleen McDonnell, Not an Easy Choice: A Feminist Re-examines Abortion, 71, 77. Perhaps tellingly, when McDonnell’s book was reissued in 2003, by Toronto’s Second Story Press, the subtitle was changed to Re-examining Abortion—which, of course, eliminates the reference to feminism.


17 Writing the opinion in Roe v. Wade, Justice Harry Blackmun argued that the right of privacy is “broad enough to encompass a woman’s decision whether or not to terminate her pregnancy” and declared: “The detriment that the State would impose upon the pregnant woman by denying this choice altogether is apparent.” He then went on to describe the various factors, not only medical but personal and psychological, that play into decisions surrounding abortion, concluding that these factors are something that “the woman and her responsible physician necessarily will consider in consultation.” Roe v. Wade, 410 U.S. 113 (1973) at 153, available at https://www.law.cornell.edu/supremecourt/text/410/113. In other words, as formulated in Roe, a woman’s privacy is not absolute: for reasons of
professional responsibility, her doctor also has the right to be involved in her decision.


19 Ibid. For an analysis, in the Canadian context, of the constraints on “choice” imposed by legal and medical discourse, including the emphasis on the “rights and responsibilities” associated with reproductive activity (5), see Gail Kellough, Aborting Law: An Exploration of the Politics of Motherhood and Medicine. Kellough illustrates her argument by examining OCAC’s activist work during the 1980s, at the time of the Morgentaler hearings.

20 Rickie Solinger, Beggars and Choosers: How the Politics of Choice Shapes Adoption, Abortion, and Welfare in the United States, 5. As Solinger notes, the shift to “choice” reflected “the determination of abortion rights advocates to develop as respectable, nonconfrontational movement after Roe” (5).

21 Ibid., 199–200. For a discussion, in the US context, of the illusory nature of choice for low-income women, many of whom are either black or Hispanic, see Lisa Brown, William Parker, and Jill Morrison, “When a Woman’s Choice Is Not a Choice,” esp. 25–27.

22 Andrea Smith, “Beyond Pro-Choice Versus Pro-Life: Women of Color and Reproductive Justice,” 120, 123, 125.


26 On the shift to a reproductive justice framework in the United States, see Zaikya T. Luna, “Marching Toward Reproductive Justice: Coalitional (Re) Framing of the March for Women’s Lives.”

27 As URGE explains on its “About Our Name Change” web page (http://urge.org/about/about-our-name-change/), the organization recognized that “working for choice is not possible without widening our scope to include all of the issues that impact any person’s ability to choose.” On the rationale for Planned Parenthood’s decision, see Anna North, “Planned Parenthood Moving Away from ‘Choice,’” BuzzFeed, 9 January 2013, http://www.buzzfeed.com/annanorth/


29 See Asian Communities for Reproductive Justice, A New Vision.


33 Andrea Smith, “Beyond Pro-Choice Versus Pro-Life: Women of Color and Reproductive Justice,” 132; Pérez, “Meaning of Reproductive Justice.” As Smith points out, when we rely on dichotomies, “we often lose opportunities to work with people with whom we may have sharp disagreements, but who may, with different political framings and organizing strategies, shift their positions” (133).

34 Jennifer Baumgardner, Abortion and Life, 54.

35 An important exception Rebick’s Ten Thousand Roses, which incorporates such reminiscences.
For a compelling critique of academic feminism, see the essays in Jessica Yee, ed., *Feminism for Real: Deconstructing the Academic Industrial Complex of Feminism*. Much has been written about the tendency of feminist theory, as elaborated within the academy, to become detached not only from activist pursuits from the lived experience of women. See, for example, Elizabeth Fox-Genovese, *Feminism Is NOT the Story of My Life: How Today’s Feminist Elite Has Lost Touch with the Real Concerns of Women*; and Christina Hoff Sommers, *Who Stole Feminism? How Women Have Betrayed Women*.

For further discussion of the relationship between academic research and activism, see Shannon Stettner and Tracy Penny Light, “The Politics of Reproductive Health History: Visible, Audible, and Consequential.” For an effective example of the use of narrative in academic work, see Deborah Davidson, “Reflections on Doing Research Grounded in My Experience of Perinatal Loss: From Auto/biography to Autoethnography.”


Quoted in Baumgardner, *Abortion and Life*, 60.

For insights into women’s reactions to abortion, see Eve Kushner, *Experiencing Abortion: A Weaving of Women’s Words*. Kushner interviewed more than 150 women who had had an abortion, encouraging them to give voice to what proved to be a broad range of emotional responses. In addition, see Katrina Kimport, Kira Foster, and Tracy A. Weitz, “Social Sources of Women’s Emotional Difficulty After Abortion: Lessons from Women’s Abortion Narratives,” for a discussion of strategies that appear to mitigate post-abortion emotional stress.

For a critique of this argument (including the research on which it is based), see Tracy A. Weitz et al., “You Say ‘Regret’ and I Say ‘Relief’: A Need to Break the Polemic About Abortion.” As the authors point out, the counselling that anti-abortion advocates would make legally mandatory focuses on providing women with (potentially biased) information about the risks associated with abortion, including the possibility of long-term psychological damage. The problem for those who support unfettered access to abortion thus becomes “how to meet women’s needs for information regarding abortion without ceding ground to those who use these needs to develop regulations that will make abortion illegal and/or less available” (87).

Brenda Major et al., “Abortion and Mental Health: Evaluating the Evidence,” 885. As they went on to say, “It is important that all women’s experiences be recognized as valid and that women feel free to express
their thoughts and feelings about their abortion regardless of whether those thoughts and feelings are positive or negative” (885). See also Shannon Stettner, “Post-abortion Trauma Syndrome.”


46 On the anti-abortion movement in Canada, see, for example, Katrina Rose Ackerman, “‘Not in the Atlantic Provinces: The Abortion Debate in New Brunswick, 1980–1987,’” and “In Defence of Reason: Religion, Science, and the Prince Edward Island Anti-abortion Movement, 1969–1988.” Additional research is needed, however, especially with regard to the role of fundamentalist Christianity in the movement.


49 For discussion, see Chris Kaposy, “The Public Funding of Abortion in Canada: Going Beyond the Concept of Medical Necessity.”


See Megan Pritchard, “Can There Be Such a Thing as a ‘Wrongful Birth’?” 86; and Victoria Seavilleklein, “Challenging the Rhetoric of Choice in Prenatal Screening.”


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