

Revisiting Abortion

IT'S STILL A HOT-BUTTON ISSUE IN CANADIAN SOCIETY. AND WITH GENDER SELECTION ON THE RISE, IT'S AN EVEN BIGGER DEBATE THAN BEFORE.

CHRISSELLE D'SOUZA EXAMINES THE CURRENT DILEMMAS BEHIND THE PROCEDURE

At 11 a.m. on a fall morning, Emily Cavan sat alone in the waiting room of the Mississauga Women's Clinic nervously playing with the cuffs of her sweater. "Emily Cavan," the nurse called out. It was her turn to see the doctor. She was terrified.

Three days earlier, Cavan found out she was three weeks pregnant. Instantly, her world crumbled. She wondered how she would support herself and knew that she'd have to put her life on hold.

After deciding on abortion, Cavan researched the available clinics and procedures. She was raised pro-life, so Cavan decided not to talk to anyone about the procedure to avoid being judged. She didn't even tell her boyfriend, Mark, in case he wanted her to keep the baby.

Cavan isn't alone. In Ontario, there is one abortion performed for every three to four live births.

Despite these staggering numbers, many Canadians don't look into abortion, according to an opinion piece by Anastasia Bowles for the *National Post*. Abortion is not a black-and-white issue based around the rights of women versus the rights of children. Instead, it relies heavily on the different values, health and lifestyle of a woman, and can only be truly evaluated by taking these considerations into account. The issue was pushed into the spotlight after the precedent-setting case of Dr. Henry Morgentaler was re-evaluated by the Supreme

Court of Canada in 1988. And presently, 52 per cent of Canadians agree that abortion is a woman's choice, according to *Abacus*, a market research firm.

On September 27, 2012, Parliament voted against Motion 312, which requested a committee to examine when a fetus becomes a human being. The motion, which aimed to re-evaluate Canada's abortion regulations, raised public outcry from pro-choice advocates who believed that it infringed on a woman's free will. They were also appalled at Rona Ambrose, Minister for Status of Women, for voting in favour of the motion.

Ambrose claimed her decision was inspired by a greater problem: gender selection. "I have repeatedly raised concerns about discrimination of girls by sex-selection abortion," she posted on her Twitter account and later added: "No law needed, but we need awareness!" Ambrose is convinced that in order to

and prevented discriminatory gender selection. "Deciding to have an abortion solely on the basis of gender is an obvious social justice problem," says Jack Fonseca, project manager at Campaign Life Coalition.

But this issue isn't new. According to the *Journal of Gynaecology and Obstetrics Canada*, a ratio of 109:100 (male to female children) was noted in areas with large immigrant populations. This figure, said to have been higher in previous years, makes gender-selective abortions a recurring issue in Canada.

The issue of sex-selective abortion has faced wide-scale media attention after an article published by the *Canadian Medical Association Journal* in January 2012 concluded that certain ethnic communities, specifically Indian communities, had an uneven ratio of girls to boys, with roughly 100 girls to every 136 males.

"The right to reproductive justice is a key part of the women's movement."

- Carolyn Egan

prevent gender selection, abortion regulations need to be re-examined. Pro-life advocates applauded the motion, believing that it protected female fetuses,

Months later, after the controversial September motion, the abortion debate grew more complex, as pro-choice and pro-life advocates not only battled for

women's rights, but also the questionable legitimization of gender selection. For Joyce Arthur, executive director at Abortion Rights Coalition of Canada, the ongoing abortion debate "shouldn't be allowed anymore."

But the debate continues. Recently, Canadian medical institutions added themselves to the conversation when the Society of Obstetricians and Gynecologists of Canada (SOGC), and the College of Physicians and Surgeons of British Columbia and Ontario publicly condemned sex-selective abortions.

However, some don't believe that sex-selective abortions are an issue that relates to all Canadian citizens. For Debby Copes, a medical practitioner at Choice in Health Clinic, sex-selective abortions do not pertain to the majority of Canadian women who opt for an abortion. "While there might be a concern in certain ethnic groups, it is still the choice of that family if they want to have a child," Copes says. "If a family already has three girls and is trying for a boy, they should be allowed to do so. Even if it is in the new immigrant communities, this effect will filter out with later generations."

For a majority of pro-choice advocates, the issue isn't about restricting abortions, but bringing more awareness to female equality. "We need to change the mindset that girl children are not as good as, or unequal to boys. We need to change this mindset in every culture because here in Canada it exists at the professional levels," says Carolyn Egan, a women's rights activist. For Egan, the argument of sex-selective abortions is raised to chip away at a woman's right to an abortion by those opposed to the procedure.

Currently, Canada's legislation on abortion is a bit confusing. In 1988, the Supreme Court of Canada abolished the former abortion law and claimed the issues of a woman's body were a private matter and solely a woman's responsibility. Since then, abortion has been considered a medical procedure governed by provinces and territo-

ries. SOGC regulates the criteria for the procedure and the College of Physicians and Surgeons and the Canadian Medical Association overlook it. Presently in Canada, a woman cannot choose to have an elective abortion past 20 weeks gestation, as doctors and facilities that allow for an elective termination at that point are rare.

Statistics show most women who have an abortion do so before 12 weeks of pregnancy, and 94 per cent were performed before 16 weeks.

If Motion 312 had passed, it would have resurrected discussions on creating laws against the procedure, something that pro-choice advocates believe shouldn't happen. According to Egan, a ban on abortion "forces" women to have a child that they are not ready for. She believes that even when abortion is occasionally used as a backup form of birth control, the decision rests with the individual. "It's a right to equality for a woman to make a conscious choice

about her pregnancy and the vast ma-

majority of people in this country support that," Egan says. "The right to reproductive justice is a key part of the women's movement."

In Canada, abortion is a quality-assured procedure and part of the medical services paid for by public taxes. The Defund Abortion Campaign was started by Campaign Life Coalition to stop the use of taxpayers money to fund abortions, "which intentionally kill the unborn child and act as back-up birth control," Fonseca says. Proponents of this campaign feel the millions of dollars given to abortion services could be better used "for legitimate medical needs like autism and doctor [and] nurse shortages."

Meanwhile, pro-choice activists focus on creating equal access to abortion services for Canadian women. Presently, induced abortions are not widely performed in Prince Edward Island, Nova Scotia, Saskatchewan, Yukon, the Northwest Territories or Nunavut.



For Egan, defunding abortion would mean that women who are wealthy have access to private resources, while low-income women would have to resort to back-alley abortions. “That is absolutely disgusting that people would put the most vulnerable women in our society in that circumstance,” she says.

If banned, women will not have access to quality health care services that allow them to end an unintended pregnancy. However, Blaise Alleyne, president at Toronto Right to Life, believes that every fetus has a right to life and the lack of legislation in Canada is “in violation of the United Nations Convention on the Rights of the Child” if we do not have a law offering protections to the unborn child.

Joyce Arthur rebuts the above, stating, “A law prohibiting abortion is politically-driven rather than concerned about the health care of the woman and fetus, and the inconsistency of laws proves this.” She suggests a positive law would allow better access to the services and remove the stigma associated with abortion. While such a law would not reduce the number of abortions or stop them all together, increasing access to contraception and making child-rearing more economically feasible would significantly reduce the occurrences of the procedure.

But Fonseca claims that a pro-abortion law based on the health of the woman is too broad and can therefore be interpreted to include medical, financial, mental and emotional health, which would

make any abortion justifiable. Instead, a ban on abortion would prevent women from opting for the procedure, unless the pregnancy was to endanger the life, not just the health, of the woman.

Ultimately, for pro-life contenders, the best alternative would be a complete ban on elective abortions, even in the case of rape. Alissa Golob, youth co-ordinator at Campaign Life Coalition, believes “a child conceived in an act of violence is no less human than a child conceived in an act of love,” and advocates for a complete ban on abortions unless the life of the fetus is in danger. “Through a combination of crisis centres and childcare facilities, women can receive support to care for a child that they might not be ready for,” Golob says.

“[People] need to understand that once you make the decision to engage in sexual activity, babies are a natural product of sex.”

-Alissa Golob

Back in the doctor’s office, Cavan signs some paperwork and enters a private room. The doctor explains the procedure and asks her if she has any questions. Cavan shakes her head, her hands tucked into the pockets of her sweater. She receives a pill and some water, and is told to stay hydrated and expect frequent urination and possible spotting. She stays seated with her knees

shaking and her feet tapping the white tiles on the floor. “You never think that it’s going to happen to you,” Cavan says. “And then it does.”

Like Cavan, Debby Copes couldn’t believe that she was pregnant. At the age of 25, she had two abortions due to an ineffective contraception, Dalkon Shield. “I was devastated,” Copes says. “I had gone through such lengths to prevent this.”

During both pregnancies she was confident that she wanted an abortion. “I wasn’t ready for a child,” Copes says. “The relationship was shaky and neither my husband nor I agreed on if we wanted a kid.”

Copes doesn’t regret either procedure, and clearly remembers the negative feelings associated with her pregnancies.

“I felt invaded and hostile to the pregnancy and I compare it to how I felt about my wanted kids that I had in my late 30s,” Copes says. “Right from the start of missing a period, I started talking to the little thing inside of me and feeling warm and fuzzy about it.”

But getting an abortion wasn’t as easy in 1973, and Copes had to drive to Buffalo for the procedure. She experienced a difference in patient treatment in the United States versus Canada. The procedure in Buffalo “felt like coarse bubbles and some vibration,” Copes says, while the procedure in Toronto was “quick and painful,” and women at the clinic were treated like “idiots and sluts.”

Copes, now a quality advisor at a medical clinic, says that every woman who comes into her office is sure of her decision to have an abortion. “If you are using contraception and the condom breaks, abortion is a backup birth control,” she says “What’s wrong with that?”

Instead of banning abortion all together, some believe that the solution to decrease abortion rates revolve around

increasing contraception awareness. However, “many opposed to abortion are also [often] seen as opposed to birth control,” Egan says.

Pro-life supporter Golob is against contraceptives, such as the birth control pill, due to their “abortification” features that end pregnancies. She claims that “[people] need to understand that once you make the decision to engage in sexual activity, babies are a natural product of sex.”

As an alternative, pro-life supporters believe that instead of abortions, women should opt for child-rearing or adoption. Fonseca claims that the number of babies that would have otherwise been aborted could be a “source of joy” instead of causing “psychological trauma associated with having an abortion or alternatively the baby could be put up for adoption.”

The Silent No More Awareness Campaign encourages women who have had an abortion to speak about why they regret the procedure. Pro-life advocates use this campaign to highlight the psychological traumas associated with abortion. For Angelina Steenstra, the campaign co-ordinator, abortion was a procedure that she regretted. She had an abortion at the age of 15 due to a pregnancy caused by date rape. “The trauma of the abortion added to the trauma of the date rape,” says Steenstra, who remembers having no outlets to speak about her

post-abortion grief.

Steenstra says she still remembers having a graphic abortion involving a vacuum-like sound and watching a glass container fill up with the contents of her uterus. She advocates for women to have access to post-abortion psychological help, and feels that this part of the population is frequently forgotten about. She believes that women who are pregnant, and considering abortion, need to know that there is help. By educating women and the general public, Steenstra hopes that more women will be deterred from getting the procedure.

Today, she believes she would have overcome the trauma of the date rape and learned to love the child that came from it. For Steenstra, choosing to have an abortion was a decision “made by my mind and not my heart.”

For pro-life advocates, women should be encouraged to give a child for adoption instead of having an abortion. When questioned about the psychological costs of having to give up a child for adoption, Golob claims that “the invasive killing of your child is far more traumatic than giving your baby away.” She also mentions Canada’s “thousands of families on adoption waiting lists” and a “low population replacement rate of 1.2.”

But while adoption may seem like a suitable alternative for some, to others it’s not as easy. Caitlyn Guinto, 17, chose to continue her pregnancy, but giving up her child for adoption was unthinkable. She contemplated abortion briefly when she questioned her readiness to have her baby, but decided against it.

“I didn’t want someone else to raise

my kid,” Guinto says. “I would have been attached to my child for the whole nine months and then he’s not mine anymore.” Even though her family encouraged an abortion, Guinto decided to keep the baby. Today, the single mom has no regrets, claiming that her first ultrasound confirmed her decision. “You can’t tell teenagers not to have sex these days,” Guinto says. “Sex is just going to happen.”

In the doctor’s office, Cavan swallows the pill with a glass of water. Though the abortion was simple, she still wonders if her body will be affected in the future. Nonetheless, she is glad that the procedure was not invasive.

“It felt like a regular doctor’s appointment,” Cavan says. “Where I was going to get some medicine.”

But even though the medication was easy to obtain, the emotional process for Cavan was not easy to overcome. She blocks out the date as a way to help herself get over what happened, but she remembers the pregnancy when her and her boyfriend are together and talk about kids. Cavan told her boyfriend about the procedure after the fact, and believes that their bond is now stronger because of the shared intimate experience. “You never know if it’s the right thing,” Cavan says. “I wouldn’t say that I’m glad I did it, but I am relieved.” **M**

**Some names have been changed, as requested*

Approximately 42 million abortions occur per year around the world. The estimated **global rate of abortions is declining** due to the use of **contraceptives**. Canada has an abortion rate of 14.1 per 1,000, while Western Europe has a rate of 12 and the United States has a rate of 20. The global average of abortion procedures is 29.

Canada and Western Europe have some of the **lowest abortion rates in the world.**