Pro-Choice BC



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We're closing our doors! - but opening another

The Pro-Choice Action Network has made the difficult decision to shut down as of January 31, 2009. Over the last few years, we have been relatively inactive due to a lack of need for a provincial pro-choice group in BC. Since about 1998, Pro-CAN increasingly found itself working on national issues instead. The Pro-CAN Board had been discussing the need for a new national group to replace CARAL (Canadian Abortion Rights Action League), which disbanded in 2004.

As a result, Joyce Arthur of Pro-CAN led the formation of a new national group in 2005, called the Abortion Rights Coalition of Canada (ARCC, www.arcc-cdac.ca). ARCC will take up the previous role of Pro-CAN as needed on provincial issues that may arise in the future.

Pro-CAN is currently in the process of closing down accounts, donating or selling our office equipment, and archiving selected historic files for permanent storage. If you were giving an automatic monthly donation to Pro-CAN, these have now been cancelled with our bank. This issue of *Pro-Choice BC* will be the last Pro-CAN newsletter, but we will be maintaining our website for the next two years. Our mailing address will remain valid until March 31.

May we please invite you to redirect your membership support to the Abortion Rights Coalition of Canada, if you have not already done so? The mailed version of this newsletter contains an ARCC flyer and membership form. Online, you can find the membership form at www.arcc-cdac.ca/membership.html.

We would like to thank all of you for the tremendous support you've given us over the years! Thanks to you, Pro-CAN has accomplished so much since its start in 1988 as the BC Coalition for Abortion Clinics. We founded BC's first free-standing abortion clinic, and we successfully promoted abortion rights in countless campaigns over the years. We worked hard to improve access for women, defend their legal rights, protect providers and clinics from harassment and violence. destigmatize abortion, and educate the public about reproductive rights.

The pro-choice movement is alive and well in Canada, thanks to the work of ARCC and other progressive groups across Canada. We continue to need your support — for example, to help defeat future abortion restrictions that the Conservative Party has vowed to introduce. So we hope you'll become part of Canada's vibrant pro-choice movement by joining ARCC. Thank you again!

A bulletin from BC's Pro-Choice Action Network 512 – 1755 Robson Street, Vancouver, BC, V6G 3B7 info@prochoiceactionnetwork-canada.org www.prochoiceactionnetwork-canada.org



For full details on the Appeal Court hearing, plus related links, including to the decision itself and media reaction, see our story:

"Convicted anti-abortion protesters challenge clinic access zone (and lose)"

At:
www.prochoice
actionnetworkcanada.org/arti
cles/bubblezone-case.html



BC Bubble Zone Upheld

A great victory for women in BC and for abortion rights occurred on September 4, 2008. The BC Court of Appeal upheld the Access to Abortion Services Act, which protects two Vancouver abortion clinics from anti-choice harassment. Two anti-abortion protesters, Donald Spratt and Gordon Watson, had challenged their 2000 conviction under the Act.

The appeal focused *only* on whether the Act's admitted infringement of freedom of speech (a constitutional right under Section 2b of the *Charter of Rights and Freedoms*), meets the test of Section 1 of the Charter, which states that an infringement of a fundamental right is allowed only if it meets "reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society."

The three justices agreed unanimously that the legislation infringes only minimally on the protesters' constitutionally protected right to freedom of expression, and that this was justified to protect a woman's right to medical services. The protesters said they would appeal to the Supreme Court of Canada, but it's considered highly unlikely the court will take the case.

Timeline

- September 1995 Access to Abortion Services Act establishes buffer zones around abortion clinics and homes and offices of abortion providers.
- September 1995 Protester Maurice Lewis is the first arrest made under the Act, with numerous other arrests made over the next few years.

- Dec 17, 1998 Donald Spratt and Gordon Watson are arrested outside Everywoman's Health Centre for holding anti-abortion signs within the access zone.
- Aug 8, 2000 Watson and Spratt are convicted of breaching S.2(1)(a) and (b) of the Act.
- Jun 29, 2004 Watson and Spratt are granted leave to appeal by the BC Court of Appeal, solely on freedom of expression grounds.
- Sep 13/14, 2007 Appeal is heard at BC Court of Appeal.
- Sep 5, 2008 Appeal is lost; Court upholds the Access to Abortion Services Act.

The Spratt/Watson case was also a continuation of a case first initiated by anti-abortion protester Maurice Lewis. He was convicted in 1996 of violating the bubble zone, but died before his appeal could be heard.

Intervenors

Four parties intervened in this appeal: three for the Appellants and one for the Crown. (An intervenor is a group or coalition of groups with an interest and stake in the case.)

The intervenor for the Crown was the "Access Coalition," whose members included: Elizabeth Bagshaw Women's Clinic, Everywoman's Health Centre, C.A.R.E. Program, Pro-Choice Action Network, and Westcoast LEAF.

The intervenors for the Appellants were Canadian Nurses for Life, Canadian Religious Freedom Alliance, and the BC Civil Liberties Association.



20th ANNIVERSARY 1988-2008

Proudly pro-choice, we vow to continue moving forward until we achieve Dr. Morgentaler's personal dream:

"Every mother a willing mother, every child a wanted child."



Celebrating 20 Years of Choice

On January 28, 2008, the Pro-Choice Action Network collaborated with Vancouver's four abortion clinics and Westcoast LEAF to host an event to celebrate the 20th anniversary of the Supreme Court's Morgentaler decision. On that day in 1988, the Court struck down Canada's old abortion law, because its arbitrary requirements violated women's constitutional rights to bodily security.

Dr. Henry Morgentaler is a heroic figure who fought for decades to obtain "free abortion on request" for women, with no legal barriers and no need to state a reason. Now 85 and retired due to health problems, Dr. Morgentaler has become one of Canada's biggest heroes. In Sept. 2008, he received the Order of Canada for his accomplishments.

Vancouver's successful celebration event in January honoured Dr. Morgentaler's courage and dedication in obtaining reproductive rights for women. The event was attended by 200 people, many of whom had been active in the historic struggle. After a lively reception with good conversation and delicious food and wine, the crowd sat down to listen appreciatively to an informative panel of speakers — Jackie Larkin, Nitya Iyer, and Shelagh Day — who discussed the history of the abortion rights struggle in Canada, the legal aspects of the Morgentaler decision, and the importance of abortion rights as a basic equality right for women. After the speakers, the film "Henry" was shown, an excellent documentary by Dara Bratt that reveals Dr. Morgentaler's personal side.

Valuable Legacies of the Morgentaler Decision

By Joyce Arthur

First published in the Edmonton Sun, December 17, 2007

Starting in the late 1960s, Dr. Henry Morgentaler sacrificed the next 20 years of his life in a heroic struggle to win reproductive rights for women. Finally, in 1988, the Supreme Court's historic Morgentaler decision repealed Canada's abortion law completely. The law had resulted in unequal access and arbitrary obstacles for women seeking abortions, thereby violating their constitutional rights. One justice recognized the abortion decision as a highly personal one that was protected under a woman's right to liberty and freedom of conscience.

After the law was struck down, access to abortion improved

significantly, with legal clinics opening in several provinces. Canada's abortion rate has since become moderate and stable, with numbers declining slightly in recent years. The lack of restrictions has also allowed abortions to be performed earlier and safer — 90% occur by 12 weeks of gestation, and less than 0.3% after 20 weeks gestation. The latter are done only under extreme circumstances, such as severe fetal abnormalities or lifethreatening maternal health problems.

The fact that Canadian women and doctors act in a timely and responsible manner in the absence of criminal sanctions proves that no laws are needed to limit or regulate abortion. Such laws in other countries are based on patriarchal

"Crisis Pregnancy Centre" Research Report Now Available

Our research project on antiabortion counseling centres in British Columbia, or "fake clinics," has been published, and is available here: www.prochoiceactionnetwork-canada.org/Exposing-CPCs-in-BC.pdf

For highlights of the research, see the Feb 2007 issue of *Pro-Choice BC* on our website.

Background: Many agencies that counsel pregnant women are actually antiabortion Christian ministries. Their main goal is to stop women from having abortions. Most of these centres are not medical facilities. and most of their "counsellors" are volunteers who are not medical professionals and have no recognized training in counselling. Some of these centres are called **Crisis Pregnancy** Centres or "CPCs,"



assumptions that women's main role is to be mothers; women cannot make abortion decisions rationally or without coercion; and therefore, motherhood must be state-enforced. But pregnancies are often unwelcome or ill-advised for a wide variety of reasons. Women are independent beings with rights, and children and motherhood are both too valuable to ever be forced onto someone.

A wonderful legacy of the Morgentaler decision is Canada's management of abortion, not as a crime, but as essential healthcare that saves and improves women's lives. Our experience with no abortion law has become the envy of people around the world. It's a model we should proudly showcase and encourage other countries to emulate.

The greatest legacy of all is increased freedom and equality for Canadian women. Over the last 20 years, reproductive freedom has enabled many more women to pursue an education and career, participate more fully in Canadian society, and realize their aspirations and goals. When women can choose whether and when to have children, the result is happier and healthier families, and a stronger, more civilized society.

However, the Morgentaler legacies are tainted, because abortion remains politicized in Canada. As a result, access to abortion care is still inadequate in some parts of the country. Women often have great difficulty accessing services in remote or rural areas, including Atlantic Canada, Fewer than one in five hospitals across Canada provide this simple, common procedure, and abortion clinics operate only in large cities. A shortage of providers exacerbates the access problem, as does anti-abortion harassment. The most shameful situation is in New Brunswick, where Dr. Morgentaler has had to launch a lawsuit against the province because it continues to enforce a regulation with the same type of restrictions that were declared unconstitutional by the Supreme Court in 1988.

It's been a huge challenge for the abortion rights movement to improve access these past 20 years, but we have overcome many barriers. Proudly pro-choice, we vow to continue moving forward until we achieve Dr. Morgentaler's personal dream: "Every mother a willing mother, every child a wanted child."



....(continued from sidebar)

although many of them have different names. (Our research report uses the term CPCs to refer to all such centres.)

Other studies have shown that most CPCs misinform and try to intimidate women out of having abortions. Women describe being harassed, bullied, and given blatantly false information. Counseling techniques used by CPCs frequently induce anxiety and emotional trauma in women considering abortion. Many women say their confidentiality has been violated, and that mistreatment by CPCs has threatened their health.

We wanted to find out what these centres were doing and saying to women in BC, and whether they were engaging in the same type of deceptive or harmful practices. Indeed, we found that they tend to hide their true agenda from women, and dispense inaccurate information about abortion, some of it dangerous. Υ