

Abortion as a Federal Advocacy Issue in Canada 6 May 2020

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About Action Canada & Housekeeping



- This session is being recorded. Later this week, we will send out an email with the Powerpoint and a link to the recording.
- Please use the chat feature if you have technical, audio, or video issues and we will try to assist.
- Please use the Q&A feature at the bottom of the page if you have a question you'd like to ask the presenters. If we are unable to get to your question, we may answer it in our follow-up email.

The beginnings of state control over reproduction



- Reproductive labour (childrearing, home-making) not viewed as valuable in comparison to waged work
- Criminalization of female midwifery
- Ongoing gaps in access



Abortion in Canada: a brief history

- 1803: the *Ellenborough Act* treated abortion after quickening as a felony
- 1837: *Ellenborough Act* amended to ban abortion before and after quickening
- 1869: Both doctors and women who had abortions could be charged for breaking the law this remained in effect until the 1960's when Canada followed Britain in changing their law
- 1969: "The state has no business in the bedrooms of the nation." Pierre Trudeau introduces the Omnibus Criminal Reform Bill.



The myth of the 1969 Criminal Code reforms

- Clause 18 of the *Omnibus Bill:*Abortions could only take place at hospitals with the consent of a therapeutic abortion committee of at least three doctors and only in cases where the pregnancy would endanger the woman's "life or health."
- The average wait for an abortion was 8 weeks, with many provinces refusing to provide any services.



The Abortion Caravan and the Morgentaler decision

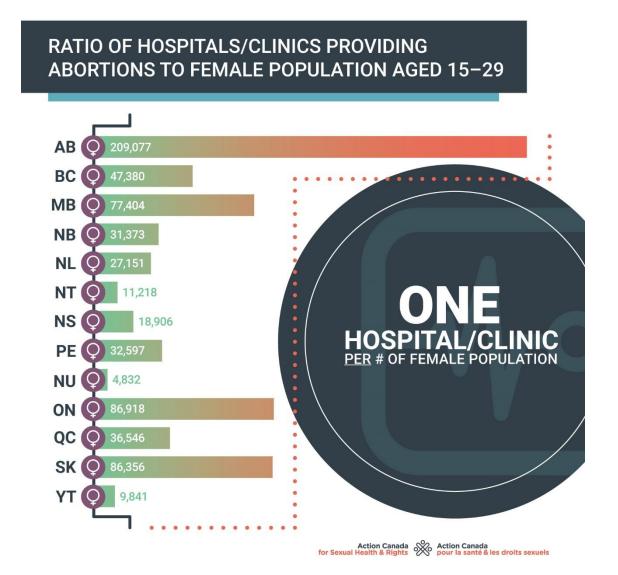


- May 8, 1970: The Abortion Caravan arrives in Ottawa
- 1988: the Supreme Court of Canada strikes down the law which criminalized abortion
- 1995: the Canadian Health Minister deems abortion a medically necessary procedure



The state of abortion access in Canada

- Today: one in six hospitals offer abortion services in Canada, the majority of which are in major urban areas within 150 kilometres of the US border
- 7 out of 13 provinces/territories in Canada have fewer than three abortion providers



The barriers to accessing abortion

	AB	BC	МВ	NB	NL	NT	NS	PE	NU	ON	QC	SK	YT
TOTAL PROVIDERS	5	24	4	5	4	1	11	1	2	38	49	3	1
MEDICAL ABORTION PROVIDERS	3	17	3	3	1	1	9	1	2	22	21	2	1
SURGICAL ABORTION PROVIDERS	4	18	4	4	2	1	4	1	2	31	44	3	1
RURAL PROVIDERS	0	1	0	0	1	0	9	0	1	4	6	0	0
URBAN PROVIDERS	5	23	4	5	3	1	2	1	1	34	43	3	1
HOSPITALS PROVIDING ABORTION CARE	2	10	3	3	2	1	4	1	1	20	18	2	0
CLINICS PROVIDING ABORTION CARE	3	14	1	2	1	0	7	0	1	18	31	1	1
SAFE ACCESS ZONE LEGISLATION	2 clinics + injunction	3 clinics	×	×	✓	X	×	×	X	8 clinics + injunction	✓	×	×
GESTATIONAL LIMIT (w = weeks, d = days)	20 w	23 w + 6 d	16 w	16 w	16 w	20 w	16 w	12 w	19 w + 6 d	23 w + 6 d	24 w	18 w + 6 d	12 w + 6 d
CRISIS PREGNANCY CENTRES	21	26	7	7	0	0	6	2	0	77	14	5	0

Where does responsibility lie?

- 1984: The *Canada Health Act* is passed, establishing criteria on what health care must look like in Canada.
- The criteria for the Canada Health Transfer:
 - Public administration
 - Accessibility (insured services without charge or user fees)
 - Comprehensiveness (includes all medically necessary services)
 - Universality
 - Portability
- International human rights obligations

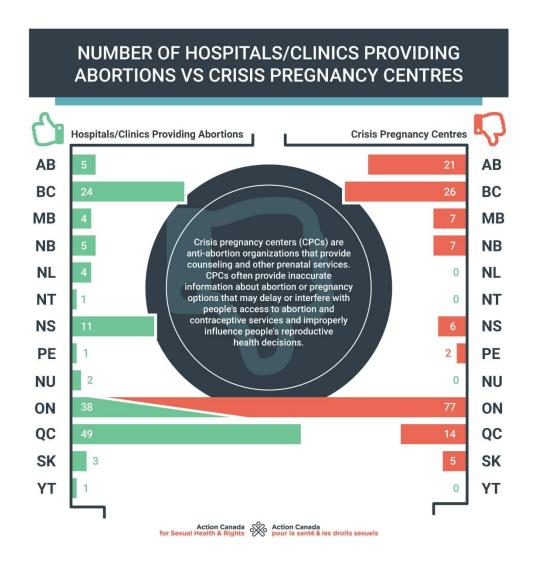


Canada's human rights obligations

- Convention on the Elimination of all forms of Discrimination Against Women (CEDAW)
- International Covenant on Economic, Social and Cultural Rights (ICESCR)
- International Covenant of Civil and Political Rights (ICCPR)



Anti-choice activity and the federal government

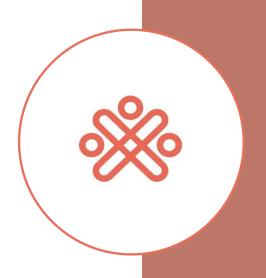


- Crisis pregnancy centres: approximately 180 exist in Canada, often in towns or cities that do not have abortion clinics or service providers
- The role of the federal government: ensure equal access, prevent undue interference by non-state actors, and uphold criteria of the *CHA*



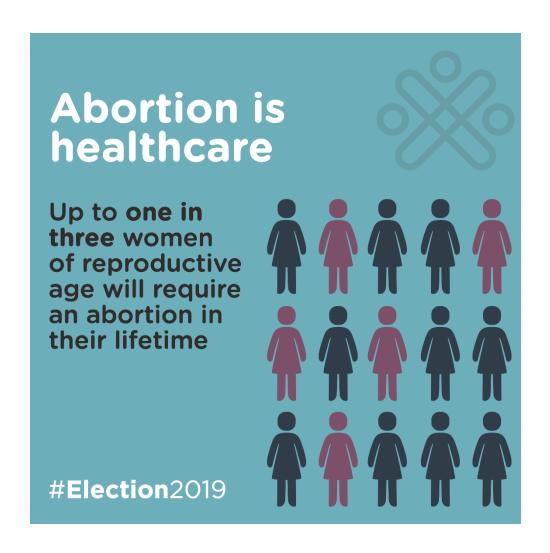
The case of New Brunswick

- New Brunswick has three hospitals providing abortion services and one community-based clinic
- Two hospitals are located in Moncton, one in Bathurst; the clinic is located in Fredericton
- Regulation 84-20: a 30-year old regulation which limits funding of surgical abortion to hospitals



The push for a law and the stigmatization of abortion

- PMB C-233: the Sex Selective Abortion Act
- In almost every parliament since decriminalization, MPs have introduced legislation that could lead to re-criminalization



Gender equality and the future of abortion





Federal action on abortion access

- Abortion access in a pandemic: <u>SRHR and COVID-19</u>
- What should the federal government do?
 - Address uneven access to abortion care across the country by enforcing the Canada Health Act
 - Create a Canadian Global Policy on sexual and reproductive rights to help fill gaps where sexual and reproductive health services have been affected, including by the U.S. Global Gag Rule
 - Task Health Canada with publishing accurate information regarding abortion care and how to access it across the country
 - Establish a fully-funded national protocol for people seeking abortion services post-23 weeks outside of Canada
 - Provide federal leadership on intersecting issues, including comprehensive sexuality education, cost coverage for contraceptive options at the provincial/territorial level



Questions & Wrap-up

- Thank you for joining us today! We will send a follow-up email later this week with a link to the recording
- Learn more about abortion access in Canada: Access at a Glance
- Have questions? Please get in touch at laura@actioncanadashr.org