

**‘A Woman’s Right to Choose’: Second Wave Feminist
Advocacy of Abortion Law Reform in New Zealand and
New South Wales from the 1970s**

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Abstract:

This thesis interrogates the abortion debate in New Zealand and New South Wales over the period 1970 to the present from a feminist perspective. The arguments of this thesis are five fold. First, it argues that abortion was the central issue for second wave feminists in the 1970s because they believed that until women had complete control over their bodies any other gains made by the movement would be of little significance. Second, feminists who did not support abortion law reform left the mainstream movement and set up their own groups because that movement was not prepared to tolerate a diversity of opinions on the abortion issue. Third, not only was abortion a central issue for feminists; it became a central issue for parliament, illustrated by the establishment of royal commissions in both New Zealand and Australia to investigate abortion among a number of other issues. Fourth, from the 1970s New Zealand women travelled to Australia for abortions. After the 1977 restrictive law change this travel was made possible by women's groups in both New Zealand and New South Wales working together to help New Zealand women. Until now this trans-Tasman relationship has been invisible in the literature. Fifth, in the 1980s and 1990s, when there was a backlash against the women's movement, abortion was targeted by many groups because they too saw it as central to women's liberation. Despite the funding and active support of anti-abortionists in New Zealand and New South Wales, they were not able to restrict access to abortion. In short, this thesis addresses how feminists supported, or in some cases opposed, women's access to abortion during the 1970s and the challenges they faced in the 1980s and 1990s.

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Abbreviations:

| | |
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| AJHR | <i>Appendices to the Journals of the House of Representatives, New Zealand</i> |
| ALRANZ | Abortion Law Reform Association of New Zealand |
| AMA | Australian Medical Association |
| AMAC | Auckland Medical Aid Centre |
| ANZ | Archives New Zealand |
| ANZAAC | Australian and New Zealand Abortion Action Campaign |
| ASC | Abortion Supervisory Committee |
| ATL | Alexander Turnbull Library |
| CM | Canterbury Museum |
| Cohab | Committee Opposed to the Hospital Amendment Bill |
| CORAL | Coalition to Oppose Restrictive Abortion Legislation |
| CSA | Contraception, Sterilisation and Abortion |
| DCW | Dunedin Collective for Women |
| DPB | Domestic Purposes Benefit |
| EP | <i>Evening Post</i> , Wellington |
| ML | Mitchell Library |
| MLA | Member of the Legislative Assembly |
| MLC | Member of the Legislative Council |
| MP | Member of Parliament |
| NCW | National Council of Women |
| NOW | National Organisation of Women |
| NSW | New South Wales |

| | |
|--------|--|
| NWH | National Women's Hospital |
| NZMA | New Zealand Medical Association |
| NZPD | <i>New Zealand Parliamentary Debates</i> |
| PSI | Population Services International |
| RTL | Right to Life |
| SMH | <i>Sydney Morning Herald</i> |
| SOS | Sisters Overseas Service |
| SPUC | Society for the Protection of the Unborn Child |
| WAAC | Women's Abortion Action Coalition |
| WEL | Women's Electoral Lobby |
| WONAAC | Women's National Abortion Action Campaign |
| WWWW | Women Who Want to be Women |

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Introduction:

Abortion played an important role in the political life of the 1970s in New Zealand and New South Wales (NSW), a role which has not been reflected in the history either of the women's movement or of the 1970s more generally. Moreover, there has been no study of the relationship between New Zealand and NSW concerning abortion. This thesis examines trans-Tasman feminist advocacy of abortion law reform from the early 1970s when the feminist movement began. Although advocacy of abortion law reform began in the late 1960s in NSW, this was generally by civil liberties groups and humanist groups rather than feminist groups. This thesis proceeds to consider the backlash against abortion law reform that occurred during the 1980s and 1990s, to assess how effective the law changes were. The analysis particularly applies to New Zealand where some now argue an 'abortion on demand' situation exists despite the restrictive law of 1977 still being in place.

This thesis not only compares the abortion situation in NSW and New Zealand, but also illustrates the amount of interaction between feminist organisations in the two states. Transnational histories are becoming more common as historians begin to use categories other than the nation as the basis for their studies.¹ While this

¹ Ann Curthoys, 'Does Australian History Have a Future?', *Australian Historical Studies*, 33:118 (2002), p.142.

thesis still uses the state as a defining category,² it is interested in ‘tracing patterns of influence and networks of connection across national boundaries.’³ Issues apparent in one country may not be in another, but by using a comparative model these issues become more obvious. As Denoon and Mein Smith explain:

The comparative method can elucidate puzzles which elude scholars working within national parameters. In a comparative perspective, nations and societies become constituents which respond differently to similar forces, or similarly to different stimuli. It is beyond dispute that national histories have blind spots, and some topics come into focus only in a wider perspective.⁴

There was no mention of the Sisters Overseas Service, a New Zealand referral service which helped women go to Sydney for abortions, in the Australian secondary literature, although there were large numbers of women coming to Sydney, from New Zealand and Queensland, to have abortions. This abortion trade is more apparent in the New Zealand literature. Consistent with other areas of the Australian –New Zealand relationship, this is because the service was more important to New Zealand women than Australian women.

Main Abortion Organisations

This thesis analyses how and why second wave feminist organisations in New Zealand and NSW supported and advocated either abortion law reform or law repeal. Its perspective is that of feminist history. It does not attempt to understand anti-abortion organisations from their own perspective. While feminism can have many meanings, for the purposes of this thesis, feminist organisations are those groups devoted to the liberation of women from their traditional roles in society. These groups were explicit about their feminist orientation. However, there is an exception:

² This is necessary because the law on abortion is central to the discussion, and laws are made at the state level. I use the term ‘states’ to refer to New Zealand and NSW. Although New Zealand is not a state of Australia, it is a nation state and for convenience I have chosen to use this word.

³ Curthoys, pp.145 - 6.

⁴ Donald Denoon, Philippa Mein Smith with Marivic Wyndham, *A History of Australia, New Zealand and the Pacific*, Oxford, 2000, p.1.

the Abortion Law Reform Association of New Zealand (ALRANZ) was not a feminist organisation, but it will be included in this study to assist explanation. Many individuals who belonged were feminists; some feminist groups supported the work of ALRANZ and it played a major role in the advocacy of abortion law reform in New Zealand. Likewise, the Abortion Law Reform (later Repeal) Association (ALRA) in NSW was not a feminist organisation, although the central figure in the organisation was feminist. Both ALRANZ and ALRA were liberal rather than radical organisations and had grown out of humanist and civil liberties groups of the 1960s.⁵ ALRA was formed in Australia in 1967 and ALRANZ was formed in New Zealand in 1971. ALRANZ had prominent New Zealanders as members such as Sir Edmund Hillary, John A. Lee and others, as did anti-abortion groups. For example, Ruth Kirk, the wife of the Prime Minister at the time, was the patron of the Society for the Protection of the Unborn Child (SPUC).⁶

The Women's National Abortion Action Campaign (WONAAC) and the Women's Abortion Action Campaign (WAAC) were more radical in their outlook and advocated the repeal of abortion laws. They were both feminist organisations, whose membership was made up of women only. Despite the differences in their aims, the liberal and radical groups worked together in each state where possible, to oppose restrictions on abortion laws. WAAC was formed in Sydney in 1972,⁷ and WONAAC in New Zealand in 1973.⁸ WONAAC was originally comprised of women from the universities and the Socialist Action League, but later these groups became

⁵ Rebecca Albury, *The Politics of Reproduction: Beyond the Slogans*, St Leonards, 1999, p.115.

⁶ Joan Bolger, the wife of former Prime Minister Jim Bolger is a present patron of SPUC.

⁷ Verity Burgmann, *Power and Protest. Movements for Change in Australian Society*, Sydney, 1980, pp.107-8.

⁸ Sandra Coney, *Standing in the Sunshine: A History of New Zealand Women Since they Won the Vote*, Auckland, 1993, p.140.

less important.⁹ While it is not clear that WONAAC and WAAC carried out the same activities in their respective states, it is apparent that they held the same position on the abortion issue, that is repeal of the abortion laws, and that they had a direct link to the feminist movement, whereas ALRANZ and ALRA had a more indirect connection.

In Britain, where a liberalised law had been passed in 1967, the Abortion Law Reform Association had been campaigning for reform since the 1930s, and anti-abortion forces had organised themselves only just prior to the passing of the law. To avoid this mistake, anti-abortion groups in NSW and New Zealand formed organisations to oppose the liberalisation of the abortion laws before law reform groups were able to form.¹⁰ This put the pro-choice groups on the back foot from the beginning. It is possible that one of the reasons that pro-choice groups did not succeed in influencing the government in New Zealand was that they were not united, whereas the anti-abortionists were united under the SPUC banner.

SPUC and the Right to Life Organisation (RTL) represented the strong anti-abortion lobby in New Zealand and NSW respectively. Both groups were powerful, especially when compared to the pro-choice lobby in both states. This was due, in part, to the financial support they received from the Roman Catholic Church. Opponents to abortion law reform argued that the legalisation of abortion would lead to a sexually permissive society, which threatened the role of the 'family'. They shaped the debate so that it was about the rights of the foetus, rather than the rights of

⁹ Beryl Hughes, 'Women's National Abortion Action Campaign 1973 -' in Anne Else, ed., *Women Together: A History of Women's Organisations in New Zealand*, Wellington, 1993, p.276.

¹⁰ Raewyn Stone, 'Group Struggle in a Value Field: The Comparative Performance of New Zealand Pressure Groups on the Question of Abortion, 1970 – 1975', *Political Science* 29:2 (1977), p.142.

the woman.¹¹ Therefore, pro-choice supporters were on the defensive, and had to produce arguments about when a foetus became a human being. Albury argues that the focus on the foetus was also advantageous for anti-abortionists because it rendered 'the woman invisible; the pregnant or potentially pregnant woman disappears as a social agent, a citizen or a person – she becomes an object of knowledge for experts.'¹²

Another argument advanced by feminists, and one which feminist writers continue to advance, is that the abortion movement was about providing women with a choice; it was not an attempt to force women to have abortions. Therefore, any individual who did not believe that having an abortion was 'right' did not have to do so. On the other hand, they did not have the right to enforce their morality on others, by trying to prevent abortions taking place. Coleman explains why anti-abortionists felt the need to do this: '[i]t is precisely because moral puritans are absolutists that they display such a zealous and unmitigated enthusiasm for imposing their system of disciplinary truths on the rest of society.'¹³ Coleman reasons that Catholics comprised only 28 per cent of the Australian population, and in many of these cases the association was only nominal, confirming that anti-abortion laws were very much the minority enforcing its will on the majority.¹⁴ The Catholic population in New Zealand was proportionally even smaller.¹⁵ While Catholics were in a minority, they were a sizable minority, particularly in Australia, and have been considered a defining

¹¹ Karen Coleman, 'Discourses on Sexuality: The Modern Abortion Debate,' PhD thesis, Macquarie University, 1991, p.184.

¹² Albury, p.105.

¹³ Coleman, p.371.

¹⁴ Coleman, p.213.

¹⁵ In 1976 the Catholic population of New Zealand was 478,530, or 15.3 per cent of the total population. See the *1976 Census of Population and Dwellings. Vol. 3: Religious Professions* Wellington: Department of Statistics, 1977.

influence on the Australian national identity.¹⁶ Other groups in both countries were anti-abortion, but the Catholic Church was the most vocal in its opposition, thus making itself a target for pro-choice supporters.

The other main criticism of SPUC in the academic feminist literature is from Bunkle, writing in the early 1980s:

The aspect of the anti-abortion position that I most dislike is the punitive tone. Far from being concerned with the quality of human life, they totally dismiss the welfare of the people involved by insisting that sexual sin must be paid for. Having an abortion is seen as an easy escape from paying the price that society inflicts on the unmarried mother.¹⁷

This view, that being sexually active required a punishment, was particularly offensive to feminists because it essentially meant that women would bear the burden of the punishment, and the man involved would only have to accept responsibility if he chose to do so, showing the traditional double standard of morality.

Source Material

Information on the organisations concerned with liberalising the abortion laws has come from primary sources. Both ALRANZ and WONAAC have records at the Alexander Turnbull Library in Wellington, while the Christchurch branch of ALRANZ also has records at the Canterbury Museum. ALRA and WAAC deposited their records at the Mitchell Library in Sydney. Not only do these records provide insight into what was happening within the organisation at the time, but also they contain newspaper articles that provide rich contextual information.

Feminist journals were also consulted to provide more contextual information, as well as to obtain an indication of feminist thought at the time. *Broadsheet* was

¹⁶ See Patrick O'Farrell, *The Irish in Australia*, Kensington, 1993 (rev. ed.).

¹⁷ Bunkle, p.14.

consulted for New Zealand along with several Australian journals, most of which were published in Sydney. Many of these journals only lasted for a few issues, hence the greater number, whereas *Broadsheet* was in publication for over 25 years.

For several reasons, this thesis will concentrate more on New Zealand than NSW. Firstly, due to a limited period and resources, New Zealand sources were more accessible. In addition, New Zealand was also the catalyst of interaction because New Zealand women travelled to Australia, rather than Australian women to New Zealand. It is from this perspective of New Zealand women going to NSW that we can trace the transnational interaction. Therefore, a greater focus is placed on New Zealand and New Zealand women.

While magazines and journals from the 1970s have been consulted in their original form, newspapers have been looked at as part of archival collections. Where there was relevant information available, this has been included, but it was not always possible to obtain full details of the location of these articles in newspapers. In either case, full reference to its location in the archival source is given. Illustrations included in the thesis have come from the Alexander Turnbull ephemera collection.

Thesis Structure

The thesis is arranged in five chapters. The first chapter consists of a review of feminist, medical and legal literature. It also provides some background information on feminism and abortion prior to 1970 and the status of abortion more generally in the early twentieth century. The second chapter, 'Feminist Politics of Abortion', explains why abortion was the central issue for second wave feminists. It looks at the

ways in which feminists in both New Zealand and NSW either tried to reform or repeal the abortion laws. It does this by examining their protests and other actions and evaluating what actions were the most effective in fighting for their cause. The connections between first wave feminists and second wave feminists are examined, particularly the ways in which second wave feminists evoked memories of the first wave feminists in their fight for abortion law reform. This leads into a discussion of women who claimed to be feminists, but were anti-abortion, as these women claimed to be following what the first wave feminists fought for, and believed that the majority of second wave feminists had deviated in their claim for abortion law repeal. The issue of population and women as breeders is also considered. The arguments put forward by opposition groups that women should be having more children, are positioned alongside feminist responses to these arguments. Issues of race and class are contemplated, because these affected how accessible abortion was to women, and it also explains why some women were less supportive of abortion law repeal than others. To conclude the chapter, there is a review of the connections between women in New Zealand and NSW, in relation to their campaigning for a woman's right to choose.

Chapter Three looks at feminist interactions with the state, because it was parliament that had the power to change the abortion laws, and this means that feminist relationships with MPs are important in understanding what happened, and why. The third chapter is centred on the royal commission on contraception, sterilisation and abortion in New Zealand in 1975 and the royal commission on human relationships in Australia in 1974. As far as the New Zealand royal commission is concerned, the submissions made to the commission by feminist

groups will be examined to see exactly what these groups wanted the laws to be, and what they considered important for abortion laws. There is an explanation of the legislation that resulted from the commission, and the impact that the legislation had in New Zealand. The Australian royal commission is not looked at so closely because it did not precipitate any law change in NSW, and it had a much broader scope for inquiry, so abortion was not the one dominant issue in its report, although it was an important factor nonetheless. There is also a discussion on why the commissions had such contrasting recommendations on abortion law reform, when it would seem that the situation in Australia and New Zealand was similar.

The fourth chapter considers the trans-Tasman traffic from prior to the Contraception, Sterilisation and Abortion Act 1977. However, the focus of the chapter is on the traffic after 1977 – essentially the traffic created by the law change in New Zealand. The New Zealand women running services to help women to Australia will be considered, principally the Sisters Overseas Service (SOS), and their relationship with women in Sydney running similar services. There is an attempt to give the numbers of women going to Sydney and Melbourne during this period, although estimates have varied widely. The experience of New Zealand women in Sydney was important, particularly when their feedback helped groups in New Zealand decide where to send women in the future. This involves a more in-depth examination of the abortion clinics in Sydney, as they were much more varied than what New Zealand women were used to, as there had only been one private abortion clinic in New Zealand. The chapter concludes with a comparison between SOS and Children by Choice, a Queensland group who also sent women to Sydney for abortions, as the law in Queensland was very restrictive.

The fifth chapter discusses the backlash which occurred during the 1980s and 1990s against achievements made by feminism, and in particular abortion law reform. The chapter begins with a brief examination of the main anti-abortion groups, SPUC in New Zealand and Right to Life (RTL) in Australia. While the majority of the chapter focuses on the 1980s and 1990s, a short summary of anti-abortion attempts to prevent reform in the 1970s will be given. This is then followed by an examination of the anti-abortion actions in the 1980s and 1990s and a discussion on why these attempts failed.

Chapter One:

Literature Review

While commentators during the 1970s complained that, ‘no issue has been better publicised than abortion. In fact, some people have been bored to tears with it. There has literally been saturation-point coverage,’¹ this focus has not always carried through to the secondary literature that discusses abortion in the 1970s, particularly in relation to second wave feminism. The literature examined falls into the following categories: feminist, medical and legal. Before the examination of the literature on the 1970s some background information on abortion in the earlier twentieth century is given.

Histories or studies of second wave feminism include literature on abortion in New Zealand and NSW as well as Australia more generally, during the 1970s. Although abortion forms a part of these studies, there is usually a lack of depth of information about second wave feminist advocacy of abortion in either country.² The literature on the United States and Great Britain proves useful in providing a contrast to what happened in New Zealand and NSW in the following discussion. The

¹ ‘Blaming the Media’, Item 39, Folder 47, Box 12, ARC 1993.4, Canterbury Museum (CM), see also ‘Shouting Match that gets Nowhere’, *Christchurch Star* 30 April 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

² General histories of the movement have predominated in both countries; for example in New Zealand there is Sandra Coney, ed. *Standing in the Sunshine: A History of New Zealand Women Since They Won the Vote*, Auckland, 1993; Christine Dann, *Up From Under. Women and Liberation in New Zealand 1970 – 1985*, Wellington, 1985; Anne Else, ed. *Women Together: A History of Women’s Organisations in New Zealand*, Wellington, 1993; Charlotte Macdonald, ed. *The Vote, the Pill and the Demon Drink*, Wellington, 1993. In Australia there is Chilla Bulbeck, *Living Feminism. The Impact of the Women’s Movement on Three Generations of Australian Women*, Cambridge, 1997; Gisela Kaplan, *The Meagre Harvest: The Australian Women’s Movement 1950s – 1990s*, St Leonards, 1996; Anne Summers, *Damned Whores and God’s Police*, Camberwell, 2002 (rev. ed); Marilyn Lake, *Getting Equal. The History of Australian Feminism*, St Leonards, 1999.

literature on Great Britain is particularly valuable concerning what happened prior to the 1970s, as both New Zealand and NSW law was based on British law. The literature on the United States is useful when considering the ‘backlash’ and the rise of the morally conservative New Right.

Historical Context

During the early twentieth century in New Zealand and Australia there was a concern with the ethnic make up of the population and its size. This was particularly a fear in Australia due to its size and close proximity to Asia. This problem was even greater, in the eyes of politicians at least, when the decreasing family size of white New Zealanders and Australians was considered. In 1904, the report of the royal commission into the decline of the birth rate in NSW was issued. The cause for the decline seemed obvious to the commissioners – it was because of the selfishness of women. Mein Smith argues that this conclusion was due to the masculine nature of the inquiry regarding its pronatalism.³ During this period many western countries were preoccupied with their population because of a fear of eroding power. There was a fear of ‘race suicide’, particularly in Anglophone societies. It was believed the white women must breed in order to prevent immigrant groups gaining power.⁴

Due to such a strong concern with population levels contraceptive use was discouraged, and this included abortion, which was one of the most important forms of fertility control during this period, if not the most important. There was also a class

³ Philippa Mein Smith, *Mothers and King Baby. Infant Survival and Welfare in an Imperial World: Australia 1880 – 1950*, Houndmills, 1997, p.35. See also Alison Mackinnon, *Love and Freedom. Professional Women and the Reshaping of Personal Life*, Cambridge, 1997, p.23; Donald Denoon and Philippa Mein Smith with Marivic Wyndham, *A History of Australia, New Zealand and the Pacific*, Oxford, 2000, pp.256 - 57; and Elspeth Browne, *The Empty Cradle*, Kensington NSW, 1979, p.122.

⁴ Mackinnon, p.7.

dimension to the concern with population. De Lepervanche claims that it was believed that 'poor whites' bred too fast, in comparison to the rest of the population.⁵ This emphasis on women as breeders of the white race is particularly strong in the Australian literature; it applies in New Zealand as well.⁶

The Depression of the 1930s saw an increase in abortion rates. Many women were prepared to risk their health in their attempts to either self-abort or receive abortions at the hands of illegal abortionists. Abortion was a crime that was generally lightly policed, and this reflected in part public sympathy for both the woman and the abortionist. Even when abortionists were arrested it was difficult to find a jury who would find them guilty.⁷ Between 1927 and 1935, 223 women died of septic abortions in New Zealand.⁸ In response to this the government ordered an inquiry into abortion in New Zealand in 1936. Brookes claims, '[t]he issues of women's health and fertility raised by the Inquiry were seen firmly in the context of the needs of the family and the nation, and not those of individual women.'⁹ Brookes goes on to critique the inquiry for holding individual women responsible for the decline in family size, 'rather than the wider social changes, such as compulsory education and restrictions on child labour, which made large families a liability rather than an asset.'¹⁰ She also states that while some church groups promoted the rights of the unborn child, this was

⁵ Marie de Lepervanche, 'Racism and Sexism in Australian National Life' in Marie de Lepervanche & Gillian Bottomley, eds, *The Cultural Construction of Race*, Sydney, 1988, p.81.

⁶ See Philippa Mein Smith, *Maternity in Dispute. New Zealand 1920 – 1939*, Wellington, 1986; Angela Wanhalla, 'Gender, Race and Colonial Identity: Women and Eugenics in New Zealand, 1918 – 1939', MA thesis, University of Canterbury, 2001; Megan Woods, 'Re/producing the Nation: Women Making Identity in New Zealand, 1906 – 1925', MA thesis, University of Canterbury, 1997.

⁷ Sandra Coney, *Standing in the Sunshine*, p.73.

⁸ Coney, *Standing in the Sunshine*, p.74.

⁹ Barbara Brookes, 'Housewives' Depression. The Debate over Abortion and Birth Control in the 1930s' in Judith Binney, ed., *The Shaping of History*, Wellington, 2001, p.207.

¹⁰ Brookes, 2001, p.208.

by no means a principal concern of the inquiry.¹¹ Rather their concern was with the declining birth rate. Some women's groups who made submissions to the inquiry did support the introduction of contraception in New Zealand as an alternative to abortion, but their recommendations were not endorsed by the inquiry.

The birthrate reached its lowest point in Australia in 1934 and in New Zealand in 1935.¹² Siedlecky and Wyndham claim that abortion 'had a threefold effect in reducing the birthrate. It cut down the number of births, but it also sometimes caused infertility or resulted in death in women still of childbearing age.'¹³ Clearly, economic downturn affected the birthrate. If there was no money to support children, women would not have them, as it became their problem when their children needed feeding and clothing. The abortion rate in New Zealand during the 1930s was suggested to be one abortion to every 3.2 live births by Dr. J B Dawson, professor of obstetrics at Otago Medical School, in his evidence to the 1936 Inquiry.¹⁴ Despite the economic situation, the state considered that women should be able to continue to have children.

Many of those who opposed abortion law reform used population arguments as a justification for continued restriction. The population argument used by anti-choice supporters becomes even more dubious when the population growth in New Zealand from 1945 to 1975 is considered. Dunstall states that this period:

saw the most sustained period of population growth this century – from 1.7 million to just over 3 million people. Indeed, the rate of growth at over 2 per cent per annum until the mid-1960s was high in comparison with most other countries of predominantly European population, and higher than the most optimistic forecast in 1946.¹⁵

¹¹ Brookes, 2001, p.208.

¹² Denoon and Mein Smith with Wyndham, p.296.

¹³ Stefania Siedlecky & Diana Wyndham, *Populate and Perish: Australian Women's Fight for Birth Control*, North Sydney, 1990, p.71.

¹⁴ Brookes, 2001, p.202.

¹⁵ Graeme Dunstall, 'The Social Pattern' in Geoffrey Rice, ed., *The Oxford History of New Zealand*, Auckland, 1992 (2nd ed.), p.454.

Therefore, New Zealand was hardly in urgent need of more people, and more importantly abortion was not reducing the population of New Zealand. Moreover, the post-war population growth in New Zealand was largely fuelled by the baby boom, rather than immigration, indicating that abortion was not having a catastrophic effect on population levels. While the baby boom ended in 1961, the birth rate was still above replacement levels and there is no evidence to suggest that the number of abortions had increased.

Feminist writers have analyzed the emphasis society places on women as reproducers, and conclude that this is because reproducing is essential to society.

Summers states:

[I]t is very convenient for a society to maintain that women are governed by their biology when one of their biological functions is of essential value to that society, and when it is realized that the pursuit of other activities might impede or even prevent the performance of that function.¹⁶

Fenwick supports this view, concerning New Zealand.¹⁷ Conversely, some feminists at the time used the population argument in reverse, for example that there were enough people in the world, and to be socially responsible, society must encourage the use of birth control.

The history of women as 'breeders of the nation' shows that the reason abortion had become illegal, and remained illegal in both countries was more to do with population factors, rather than religious or moral factors which became so important in the 1970s debates.¹⁸ Moreover, it demonstrates that for so long women

¹⁶ Anne Summers, p.278.

¹⁷ Penny Fenwick, 'Fertility, Sexuality and Social Control over Women in New Zealand' in Phillida Bunkle & Beryl Hughes, eds, *Women in New Zealand Society*, Auckland, 1980, p.94.

¹⁸ Although as Brookes (2001) explains, Catholics opposed abortion during the McMillan Inquiry in 1936. However, population seemed to be an underlying concern for many others, although moral and religious reasons could be used to justify this.

were seen to be important only because of their reproductive capacities. Not only was it important for them to reproduce, but it was their duty to their country to do so. Thus, feminists in the 1970s had to counter decades of the image of women as reproducers. As this thesis shows, population arguments were still used by some groups in the 1970s to oppose abortion. By this time, some individuals felt that New Zealand and Australia were having to accept large numbers of immigrants each year to compensate for ‘potential children’ who had been aborted.

First and Second Wave Feminism

The women’s liberation movement, which began in Australia and New Zealand in the early 1970s, is considered the ‘second wave’ of feminism, the ‘first wave’ being the suffrage movement of the nineteenth and early twentieth centuries. What is interesting is that New Zealand led the world in the key demand of first wave feminism when women won the vote in 1893, and the Australian colonies were not far behind.¹⁹ As far as New Zealand is concerned, this leadership did not continue through into the second wave; and in Australia it varied from state to state. Feminism did not disappear between the two ‘waves’, but there was no unified movement because there was no unifying issue, such as the vote, as for the first wave feminists, or abortion, as for second wave feminists. Like the first wave feminists, second wave feminists objected to the sexual double standards governing heterosexual relationships rather than sex itself. As Magarey explains, ‘rather than being opposed to sex, [first wave feminists] were centrally preoccupied with sex, and with the pleasures as well as the dangers of heterosexual union.’²⁰ While the abortion issue was about legislative

¹⁹ South Australia enfranchised white women in 1894, Western Australia in 1899, NSW in 1902, Tasmania in 1903, Queensland in 1905 and Victoria in 1908. Women won the right to vote in federal elections in 1902.

²⁰ Susan Magarey, *Passions of the First Wave Feminists*, Sydney, 2001, p.2.

change, it grew out of women wanting to change the way that they were perceived by men and the assumption that their role in society would be that of reproducer and mother.

First wave feminists believed that the main and most important role women played in society was that of mother. They did not challenge the idea that there is an inherent maternalism in all women, and if anything, they encouraged this line of thinking. For example Dalziel states:

The early New Zealand feminists, female activists and pro-suffrage males argued from a position solidly based on the family. They did not attack the family unit. They did not try to take women out of the home. They saw marriage, home and family as the main and natural vocation of women. Political rights were a recognition of the worth of that vocation and a complement to it.²¹

It was not until the women's liberationists of the 1970s that this belief was challenged.²² The first wave was concerned with protecting women (from their husbands and poverty) and advocated that by giving women the vote society would become more civilised. The second wave challenged the roles that society had assigned to women, and was therefore more revolutionary than the first wave, which was interested in consolidating women's position.

Coney claims that the women's liberation movement in New Zealand was influenced far more by the American movement than the British movement, which was more Marxist and socialist.²³ The sources indicate that this was the same in Australia. By the end of 1972, over twenty women's liberation groups had been

²¹ Raewyn Dalziel, 'The Colonial Helpmeet. Women's Role and the Vote in Nineteenth-Century New Zealand', in Judith Binney, ed., *The Shaping of History*, Wellington, 2001, p.191.

²² Karen Coleman, 'Discourses on Sexuality: The Modern Abortion Debate', PhD thesis, Macquarie University, 1991, p.187.

²³ Sandra Coney, 'Why the Women's Movement Ran out of Steam' in Sue Kedgley & Mary Varnham, eds, *Heading Nowhere in a Navy Blue Suit*, Wellington, 1993, p.63.

formed in New Zealand,²⁴ showing that New Zealand women were very receptive to the ideas espoused by the movement. The women's liberation movement had similar demands in New Zealand and Australia. It sought equal pay, equal employment and education opportunities, free child care, freely available contraception, abortion on demand and an end to sexual exploitation of women.²⁵ The underlying assumption behind these demands was that women should no longer be confined to the domestic sphere. Therefore, while abortion was an issue for second wave feminists rather than first wave feminists, the more general concern about sexuality and the impact of children on women was a matter of interest for both groups. The difference lay in that first wave feminists wanted to improve the role of woman as mother, whereas second wave feminists challenged the validity of this role.

Abortion was the central issue for second wave feminists. It was believed that until women had control of their reproductive capacities, they would not be able to partake fully in paid employment, education and other areas of life, if they so desired. Both Charlotte Macdonald and James Belich claim that the abortion issue was the unifying force in the women's liberation movement.²⁶ However, this ignores the feminist women who were anti-abortion.²⁷ These women were admittedly in a minority, but they were still important and so far have generally been written out of histories of abortion in New Zealand and Australia.²⁸

²⁴ Coney, *Standing in the Sunshine*, p.142.

²⁵ Coney, *Standing in the Sunshine*, pp.142 - 43; Summers, p.544.

²⁶ Charlotte Macdonald, pp.162-3; James Belich, *Paradise Reforged: A History of the New Zealanders*, Auckland, 2001, p.498.

²⁷ While most feminists claimed it was impossible to be a feminist and be anti-abortion, a small group of women challenged this. They formed their own organisation called Feminists For Life because they were generally not welcomed in other feminist organisations.

²⁸ The exception to this is Dalziel's mention of anti-abortion feminists in her history of NOW. See Raewyn Dalziel, 'National Organisation for Women 1972 - ', in *Women Together: A History of Women's Organisations in New Zealand*, ed. A. Else, Wellington, 1993, pp.98-99.

Feminist advocacy of abortion was situated within the context of their demanding complete fertility control. They demanded the right to choose when they would have children, and how many children they would have. Abortion along with freely available contraception were at the centre of fertility control. Dann positions this demand in the context of 'the western liberal political tradition of progress towards individual freedom and self-determination. Yet it is also an issue which confronts the basis of that tradition, because in this matter men and women are not and never will be equal individuals who may aspire to equal rights.'²⁹ This is an important point, because it explains why feminists strongly opposed parliament, essentially made up of men, deciding whether women should have access to contraception and abortion. The slogans of the Movement conveyed this belief. For example,

'Abortion – a woman's right to choose.'

'Not the Church, not the State, Women must decide their fate.'

'My body; my choice.'

'If men got pregnant, abortion would be a sacrament.'

'If male MPs got pregnant, Parliament House would be an abortion clinic.'³⁰

While the movement was centrally concerned with abortion, it was seen in the context of reproductive freedom.³¹ The movement was also concerned with issues relating to women's bodies more generally as well, such as rape, domestic violence and sexual harassment.³²

The literature is clear in stating that abortion was the central issue of the women's liberation movement. Abortion was the central issue for second wave feminism because as Phillida Bunkle explains:

²⁹ Christine Dann, p.51.

³⁰ Dann, p.51.

³¹ Siedlecky & Wyndham, p.66.

³² Rebecca M Albury, *The Politics of Reproduction: Beyond the Slogans*, St Leonards, 1999, p.29.

Abortion was by far the most contentious of the early women's liberation demands: it defied the acceptable pure and pious image of womanhood; it shook the taboo prohibiting public discussion of the realities of women's lives; it made information that had been the domain of the doctors accessible for the first time; and it placed control of women's own bodies fairly and squarely at the centre of women's demands.³³

Feminists had to be strong in their advocacy of abortion because SPUC were strong in their condemnation of it. No other single feminist demand was met with such strong opposition.

The Contraceptive Pill and the 1960s

The 'sexual revolution' of the 1960s was an important factor in abortion becoming the central issue for second wave feminists. The other related and important factor was the introduction of the contraceptive pill in Australia in 1961 and New Zealand in 1962.³⁴ The pill was important to women for two reasons. It made it much easier for women to have children only when they wanted and it allowed women to assert their sexuality, without fear of pregnancy.³⁵ While the pill was controversial when it was introduced, the debate surrounding it began to decrease as the debate surrounding abortion began to increase again.³⁶ The sexual revolution was seen as encouraging a sexually permissive society by some conservative groups. By others, it was seen to be liberating. Coombs, in her book on the Sydney Push³⁷ discusses how the women of the group had abortions at the Heatherbrae Clinic, which operated in Bondi and had done so since the early 1950s.³⁸ Although, groups and individuals like the women of the Sydney Push were unusual in that they were in a position to access

³³ Phillida Bunkle, *Second Opinion: The Politics of Women's Health in New Zealand*, Auckland, 1988, p.9.

³⁴ Denoon and Mein Smith, p.384.

³⁵ Verity Burgmann, *Power and Protest. Movements for Change in Australian Society*, Sydney, 1993, p.82.

³⁶ Browne, p.63.

³⁷ The Sydney Push was a loosely formed group of intellectuals and radicals in Sydney in the 1950s and 1960s.

³⁸ Anne Coombs, *Sex and Anarchy: The Life and Death of the Sydney Push*, Ringwood, 1996, p.256.

safe abortions due to their social connections and resources that most other women lacked.

The introduction of the contraceptive pill to New Zealand and Australia provides an important backdrop to the abortion debates of the 1970s. The pill was most popular in English speaking developed countries, and although the pill was introduced later in New Zealand and Australia than the United States, use of the pill in both countries quickly surpassed use rates in all other countries, including the United States. By 1968 at least a third of married women of childbearing age in Australia and New Zealand were using the pill.³⁹ Marks argues in her book, *Sexual Chemistry*, that 'the efficacy of the pill raised people's expectations of the efficacy of contraceptive techniques in general.'⁴⁰ After they had experienced the pill, women were no longer prepared to accept unwanted pregnancies, as they may have before, and no two nations experienced the pill more thoroughly than Australia and New Zealand.

The contraceptive pill offered women the possibility of complete fertility control, and this made them less accepting of unplanned pregnancies.⁴¹ Yet, the pill was not available to all. Summers claimed in *Damned Whores and God's Police*, that it was common for young girls wanting a prescription for the pill to be refused by doctors who felt that they should not be involved in a sexual relationship.⁴² Moreover, until 1972, in Australia there was a luxury tax on oral contraceptives that made them very expensive. However, this was removed and the pill became a government

³⁹ Lara V Marks, *Sexual Chemistry: A History of the Contraceptive Pill*, New Haven, 2001, p. 183.

⁴⁰ Marks, p. 192.

⁴¹ Siedlecky & Wyndham, p.78.

⁴² Summers, p.280.

subsidised pharmaceutical, removing at least the financial barrier to obtaining it.⁴³ The limitations on obtaining the pill are important because during the 1970s anti-abortionists argued that if women were responsible and used the pill, there would be no need for abortions.

Women continued to use illegal abortionists right through until the 1970s, and the number of women being admitted to hospital during the 1960s because of backstreet abortions became a concern in both New Zealand and NSW. Sandra Coney asserts that between 200 and 300 women were admitted to hospital each year in the early 1960s suffering from complications after illegal abortions. She goes on to state that even in 1966, three women died in New Zealand as the result of illegal abortions.⁴⁴ While some women had always died from abortion, or suffered complications, by the 1960s this was no longer considered acceptable. Medical advances meant that abortions could be performed safely in hospitals, and therefore any deaths resulting from septic abortions were unnecessary. This factor, combined with the fact that some groups in the 1960s were prepared to support abortion reform,⁴⁵ meant that abortion was to become an 'issue' again for women, politicians, doctors and police.

It was not until abortion clinics were founded in Sydney and Auckland during the 1970s that women's access to abortion generally improved. Coney claims that until the Auckland Medical Aid Clinic (AMAC) was founded in Auckland in 1974,

⁴³ Margaret Ripper, 'An analysis of the Development of Birth Control Advocacy in Australia', BA (Hons) thesis, 1977, p.48.

⁴⁴ Coney, *Standing in the Sunshine*, p.140. The deaths of these three women were used by *Broadsheet* on its cover in June 1977 (no. 50) as part of its condemnation of the report of the royal commission into contraception, sterilisation and abortion.

⁴⁵ Siedlecky & Wyndham, p.66.

‘women’s access to a safe, legal abortion service was little better than it had been during the Depression.’⁴⁶ Consequently, when the women’s liberation movement began in NSW and New Zealand in the early 1970s, safe abortion was difficult to obtain. While some liberal groups of the 1960s had been calling for reform, no real change had occurred, and there had been no mass movement demanding liberalisation.

An important argument put forward in some of the literature was that women should have a ‘real choice’ when it came to abortion. This would mean that adequate financial support would be available to women should they choose to continue with their pregnancy. Greer claimed that, ‘[t]oo many women are forced to abort by poverty, by their menfolk, by their parents. Poverty has many faces; it may be the poverty of the young, the unmarried, the student, the unemployed, the female or a combination of these.’⁴⁷ This view is supported by Bacchi who states:

[F]or choice to have any meaning, the conditions have to exist for women to be able to choose to have children as well as to choose not to have them. For women to be able to choose to have children means that it should be possible to have supports and services necessary to raise children (child care, parental leave, etc).⁴⁸

This supports feminist claims that they were pro-choice rather than pro-abortion. On the other hand, while they did campaign for the Domestic Purposes Benefit (DPB) and other measures, most of their energy went into campaigning for legal abortion. This meant that in the 1980s legal abortion became more accessible, but the DPB still provided only basic assistance, and child care was not freely available.

⁴⁶ Coney, *Standing in the Sunshine*, p.140.

⁴⁷ Germaine Greer, *Sex and Destiny. The Politics of Human Fertility*, New York, 1984, p.231. See also Germaine Greer, *The Whole Woman*, London, 1999, p.87.

⁴⁸ Carol Lee Bacchi, *Women, Policy and Politics: The Construction of Policy Problems*, London, 1999, p.160.

While it was clear that abortion was going to be an issue in New Zealand and NSW during the 1970s, it is equally clear that the majority of politicians did not want this to be the case. Lovenduski and Outshoorn argue that western political systems were not suited to deal with the abortion issue because they were organised around ‘socio-economic cleavages’ and the abortion issue did not fit within this arrangement. It cut across the Left-Right dimension meaning it had the potential to divide parties. Most politicians were not prepared to make a stand on the issue if it potentially meant losing their seat in parliament.⁴⁹ This was particularly so in Australia, where the Labor party received strong support from the Roman Catholic Church, and many of its members were Catholic.⁵⁰ There was a similar divide in the New Zealand parliament. Cohan argues:

Abortion as a problem has remained at the margins of issue consideration for many reasons, two being the inferior status of women within the polity and the close supervision of such questions with a moral element by the religious institutions of society invariably controlled by men.⁵¹

Politicians would only deal with the abortion issue when they had no other choice. It was never dealt with completely in NSW. Instead, the courts were given the role of deciding the law, and in New Zealand a more conservative solution than most New Zealanders wanted was reached.

Demise of the Women’s Movement and the Backlash

Sandra Coney claims that the women’s movement in New Zealand began to slow down by the end of the 1970s. She links this to the fact that throughout the 1970s

⁴⁹ Joni Lovenduski & Joyce Outshoorn, ‘Introduction: The New Politics of Abortion’, in J. Lovenduski & J. Outshoorn, eds, *The New Politics of Abortion*, London, 1986, pp. 1 – 2.

⁵⁰ While abortion is considered an issue for state governments rather than the federal government, it became an issue in the 1972 federal election, when the Liberal party claimed that Whitlam would support reforming the laws.

⁵¹ Alvin Cohan, ‘Abortion as a Marginal Issue: the use of the Peripheral Mechanism in Britain and the United States’, in *The New Politics of Abortion*, eds. J. Lovenduski & J. Outshoorn, London, 1986, p.27

the emphasis of the movement had been on abortion law reform.⁵² But by the end of the 1970s feminists felt that they had been defeated on this issue.⁵³ Coney explains, 'the defeat of one of the movement's central aims – a woman's right to choose – did not lead to soul-searching or debate about effective tactics and organisation, but it did have a psychological effect.'⁵⁴ According to Siedlecky and Wyndham, a similar pattern took place in Australia, despite the abortion laws being liberalised there.⁵⁵ Whatever the cause, it does seem that by the 1980s there was no longer a mass movement towards change for women as there had been during the 1970s.

At the same time that the organised feminist movement was in decline, the 'New Right' was beginning to gain support. Coney positions the two movements as conflicting.

The values espoused by feminism are diametrically opposed to the New Right. Feminism encompasses co-operation, egalitarianism, collectivism, creative expression and social justice. The concept of sisterhood, so important to the early women's liberation movement, connected women across boundaries of race, class, nationality and sexuality while acknowledging these differences. By contrast, the New Right stands for economic determinism, individualism, self-interest, competition and the accumulation of privilege and wealth.⁵⁶

While the 'New Right' has its origins in American politics, it has had an impact in New Zealand and Australia, although not to the same extent and not as early as in the USA. French criticizes the New Right for wanting to make abortion illegal:

The drive to criminalize abortion is unremitting. Considering most men's disinterest in children, and their frequent abandonment of and failure to support their children, the fervor with which Catholic or Protestant fundamentalist men fund campaigns to criminalize abortion is nothing short of astounding.⁵⁷

Thus, she raises the same issue that prevailed throughout the twentieth century. Men, with the support of the state wanted to control women's sexuality, and oblige them to

⁵² Coney, 'Why the Women's Movement ran out of Steam', p.60.

⁵³ Ibid, p.61.

⁵⁴ Ibid, p.62.

⁵⁵ Siedlecky & Wyndham, p.97.

⁵⁶ Coney, 'Why the Women's Movement ran out of Steam', p.78.

⁵⁷ Marilyn French, *The War Against Women*, London, 1992, p.91.

have children, but were not always prepared to adequately support these children either at the individual or state level.

The situation was similar in Australia. Albury believes that the abortion situation has been 'normalised', despite the attempts of anti-abortionists to borrow tactics from their counterparts in the United States. She explains that this is because the state, in all its forms has 'refused to engage in the kind of grandstanding played out in the United States.'⁵⁸ New Zealand and Australia seem to have a similar history in this respect. While there were attempts to restrict access to abortion in the 1980s and 1990s, these attempts were not as successful as attempts made in the United States. While anti-abortionists were unable to change the law, they did have other means of making access to abortion unpleasant for women. In both NSW and New Zealand anti-abortionists protested outside abortion clinics, and have continued this strategy right up to the present. Allen explains some of the protesting tactics that have been used in NSW outside clinics: 'At the worst extreme this had led to violence, vandalism, arson bombings, or else forcible trespass and verbal abuse of doctors, staff and patients. More routinely, rosters of such picketers are organized so they confront women as they emerge after an abortion.'⁵⁹ Nevertheless, this is minor in comparison to the actions taken in the USA.

Susan Faludi attempts to describe the characteristics of men involved in the anti-abortion movement. She argues that younger men (in their late 20s and 30s) involved in the anti-abortion movement tend to be in the lower income brackets.⁶⁰

⁵⁸ Albury, p.112.

⁵⁹ Judith A. Allen, *Sex and Secrets: Crimes Involving Australian Women since 1880*, Melbourne, 1990, p.211.

⁶⁰ Susan Faludi, *Backlash*, New York, 1991, p.438.

She sees these men as distinct from older, religious men who belong to organisations such as SPUC. These younger men are normally downwardly mobile, and they blame this on the increasing independence of women. They resent women's professional progress and fear their newly found sexual freedom. She criticises the pro-life argument that the number of abortions are increasing and states 'women have been terminating about one in three pregnancies for at least the last hundred years.'⁶¹ Feminists in the USA faced a far greater backlash concerning abortion than those in New Zealand and Australia, but this was due to the American population being more morally conservative and religion being particularly influential in that country, more so than in Australia or New Zealand, rather than differences in the feminist movements between the countries.

Class and Race Issues

During the 1950s and 1960s, prior to abortion being legal in NSW, wealthy women were usually able to find a doctor to perform the procedure or they went to Japan, where abortion had been legal since the late 1940s. Working class women had to go to 'back-street' abortionists. Neither experience would have been pleasant;⁶² however, the wealthy woman would at least have had a safe operation. In New Zealand, wealthy women went to Adelaide and Melbourne from 1969 and Sydney from 1971 to have abortions, and again poorer women went to back-street abortionists. Some feminist referral agencies were aware of competent back-street abortionists and so sent women to them if they could not afford the trip to Australia.⁶³ Even once abortion became legal it still had to be paid for, and although the cost was

⁶¹ Faludi, p.440.

⁶² An abortion would probably never have been a pleasant experience, but the services provided by specialised clinics after abortion became legal, in particular Preterm, were considered to make the experience as comfortable as possible.

⁶³ Dann, pp.54 - 55.

high, it was far more reasonable than it had been prior to legalisation. In Australia, abortion was added to a list of medical benefits in 1974, at the request of the Australian Medical Association (AMA), making it even more affordable. In addition, women who had health insurance were able to claim on that, though poor women were unlikely to have insurance.⁶⁴

Baird criticises the view that illegal abortionists were unable to provide an acceptable abortion service. She claims that it was a middle class preference to have doctors performing the procedure, and '[t]he post law reform legal right to choose to ask a doctor to perform an abortion is a confirmation and legitimisation of middle class preferences and an erasure of other discourses which might promote other choices.'⁶⁵ While it is difficult to test this thesis because working-class women's views are not recorded as much as middle class women's, it is a factor to keep in mind.

Race is an important component to the abortion debate, but in different ways when considering NSW and New Zealand. Bulbeck and Burgmann both make the point that while white women were campaigning for access to abortion, Aboriginal women were fighting against forced sterilisation and having their children removed from their care.⁶⁶ Bulbeck does acknowledge that WAAC included no forced sterilisation in its list of demands, but it was not the main focus of the WAAC campaign. In 1975, at the Women and Politics conference, Aboriginal women demanded: 'stop forced sterilisation on our black women in Australia, while white

⁶⁴ Siedlecky & Wyndham, p.96.

⁶⁵ Barbara Baird, "'Somebody was going to disapprove anyway': Re-thinking Histories of Abortion in South Australia, 1937 – 1990', PhD thesis, Flinders University, 1998, p.293.

⁶⁶ Bulbeck, p.106; Burgmann, p.121.

women campaign for the right to abortion'.⁶⁷ White women could have included Aboriginal women's demands more fully in their campaign, especially because abortion was a part of the larger issue of reproductive freedom, which clearly involved no forced sterilisation.⁶⁸ This practice of sterilising Aboriginal women was a part of its white Australia policy, which had begun with federation and was one justification for prohibiting abortion and contraception for white women.⁶⁹

While in the secondary literature the emphasis is on class rather than race, this is in contrast to what has been located in the primary literature for New Zealand where there is a much greater emphasis on race. While neither race nor class takes on a great significance in contemporary debates in NSW, issues of class are more prominent. In contrast, race has had an increasing importance in New Zealand history, and this can be explained in part by the fact that Maori women had a larger role in the women's movement than Aboriginal women did in Australia.

The Medical Profession and its Relationship to Women

Doctors' power over women's bodies is an important theme which emerges in the secondary literature. Petchesky claims that two assumptions underpin the feminist view of reproductive freedom.

The first is derived from the biological connection between women's bodies, sexuality, and reproduction. It is an extension of the general principle of "bodily integrity," or "bodily self-determination," to the notion that women must be able to control their bodies and procreative capacities. The second is a "historical and moral argument" based on the social position of women and the needs that such a position generates. It states that, insofar as women, under the existing division of labor between the sexes, are the ones most affected

⁶⁷ Gisela Kaplan, p.146. See also Marilyn Lake, pp.270-71.

⁶⁸ Baird, pp.104-05.

⁶⁹ See also Loretta J Ross, 'African-American Women and Abortion,' in Rickie Solinger, ed., *Abortion Wars. A Half Century of Struggle, 1950 – 2000*, Berkeley, 1998, p.170.

by pregnancy, since they are the ones responsible for the care and rearing of children, it is women who must decide about contraception, abortion, and childbearing.⁷⁰

The medical profession in both New Zealand and Australia was opposed to abortion for most of the period prior to 1970. It then became more divided on the issue, and overall seemed to support some form of liberalisation of the laws, but certainly not repeal of the laws. Summers criticises doctors for making women 'plead' for access to forms of fertility control such as abortion and contraception.⁷¹ Feminists resented the fact that doctors, who were mostly men at this time, had so much power over their bodies. Greer believed:

Rather than legalistically insisting upon the right to have abortions as late as possible, the emphasis should be on attacking the obscurantism and arrogance that make late terminations too common. In virtually every abortion that is carried out there is an unacceptable element of delay caused by the inaccessibility of advice, the caprice of doctors and competition with other forms of health care, as well as sheer humbug, cant and callousness.⁷²

After the passing of the Contraception, Sterilisation and Abortion Act in 1977 in New Zealand, there were many examples of hospitals and doctors being so inefficient that women who were legally entitled to have an abortion could not because there was no one to perform the service, or because the process to be approved for an abortion had taken so long that they were too advanced in their pregnancy to have the procedure.⁷³

Despite the arrogance of individual doctors and the medical profession as a whole during this period, as Bacchi points out, '[t]he onset of liberalization in abortion laws owed a great deal to changes in the position of the medical profession

⁷⁰ Rosalind Pollack Petchesky, *Abortion and Woman's Choice. The State, Sexuality and Reproductive Freedom*, Boston, 1990 (rev. ed), p.2. See also Belinda Trainor, 'Having or Not Having Babies – What Power do Women Have?', *New Zealand Women's Studies Journal*, 3, 2, (1988), p.50.

⁷¹ Summers, p.279.

⁷² Greer, *Sex and Destiny*, p.230.

⁷³ 'Abortions still at Women's Hospital', *Press*, 1 May 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

on the issue.’⁷⁴ While medical training was changing during this period in New Zealand and NSW, the medical profession was still dominated by older doctors who had not been exposed to the new ideas presented in medical schools. Nevertheless, it was because doctors were prepared to interpret the 1977 legislation in New Zealand more and more liberally that abortion became far more accessible.

Legal Issues

Most writers who dedicate any substantial amount of space to abortion in their work, are keen to point out that secular laws prohibiting abortion are a relatively recent phenomenon. Kaplan claims that ‘[i]n Europe anti-abortion laws are no older than the Industrial Revolution and were mostly framed at the beginning of the twentieth century. They tended to be passed at times of nationalism and racism, fascism and the preparation for war.’⁷⁵ It was not until 1803 with Lord Ellenborough’s Act that abortions performed before quickening were considered illegal in England.⁷⁶ This law was replaced in 1861 with the Offences Against the Person Act which prohibited abortions with no exceptions.⁷⁷ These laws formed the basis of the laws relating to abortion in New Zealand and NSW.⁷⁸

In 1939, the ‘Bourne Ruling’ in England, made it legal to perform abortions if a doctor believed that not to have an abortion would jeopardize the woman’s physical

⁷⁴ Bacchi, p.151.

⁷⁵ Kaplan, p.79.

⁷⁶ Dorothy McBride Stetson, ‘Women’s Movements’ Defence of Legal Abortion in Great Britain’, in Dorothy McBride Stetson, ed., *Abortion Politics, Women’s Movements and the Democratic State*, Oxford, 2001, p.135.

⁷⁷ Stetson, p.135.

⁷⁸ See Tracy Tulloch, ‘State Regulation of Sexuality in New Zealand 1880 – 1925,’ PhD thesis, University of Canterbury, 1997.

or mental health to such an extent that she would be left impaired.⁷⁹ Because this decision was made in an English court, it had no binding precedent in New Zealand or NSW courts, although it was of persuasive value. While this is not stated explicitly in any of the literature covered, the importance of the Bourne Ruling is emphasised by its being mentioned in much of the literature, particularly the Australian literature. This is because the law relating to abortion was changed by case law in Victoria in 1969 and NSW in 1971, with the Bourne ruling being influential in both cases.

The legislation about abortion in Great Britain and South Australia was an important influence on the history of abortion law reform in New Zealand and NSW. The literature on the subject provides a comparative context for this thesis. Legal change in Britain was particularly important because it was the catalyst for abortion reform in South Australia, and this led to demands from feminists in NSW and New Zealand. However, feminists wanted the law reformed further in New Zealand and NSW than had occurred in the British and South Australian law.

The issue of feminism and its advocacy of abortion law reform is important when looking at Britain and South Australia, because they both underwent a law change before the arrival of second wave feminism. Stetson argues:

In most countries, abortion came to the public agenda, not as a women's movement demand, but as a response to demands from doctors and progressive politicians to respond to the increase in abortions outside the law. But it was not gendered. Instead, the debate over reform of abortion laws was presented primarily as a problem for doctors who wanted less outside control over their use of the procedure against moralists and religious groups who considered abortion to be immoral, even murder.⁸⁰

This appears to be true for Britain and South Australia, as early states to legalise abortion. However, it does not apply to New Zealand or NSW for a number of

⁷⁹ Helen Smyth, *Rocking the Cradle. Contraception, Sex and Politics in New Zealand*, Wellington, 2000, p.153.

⁸⁰ Stetson, p.4.

reasons. First, access to abortion in NSW was improved after the Levine Ruling of 1971 which clarified the abortion laws in that state. In contrast, New Zealand did not reform its abortion law from a feminist perspective: the law change in 1977 restricted access to abortion. Despite strong advocacy in both states, feminist attempts to repeal the abortion laws were unsuccessful.

Barbara Brookes' monograph forms the central work on abortion law reform in England. She explains how ALRA was founded in England in the mid-1930s,⁸¹ 35 years before similar organisations were founded in Australia or New Zealand. By the time the law was reformed in 1967, Britain had had an organisation advocating reform for over thirty years. Moreover, SPUC was not set up in Britain until the 1960s, meaning that for much of the time ALRA had no organised adversary. While ALRA clearly predated second wave feminism, Brookes argues that during the 1960s it was 'reinvigorated by a new generation of well-educated women, pursuing "an unfashionable feminism"' by doing voluntary work for the cause while raising their young children.'⁸²

Brookes does agree with Stetson that the medical profession played a major role in the reform of the abortion law. She believes that by the 1960s, the medical profession was secure and no longer needed a law to protect it from potential competitors. Due to the introduction of the contraceptive pill and other factors, fertility control was seen as being desirable, and no longer something that doctors had to prevent. Moreover, doctors who performed abortions were forced to justify them with 'psychiatric indications'. It was in the interest of the medical profession to

⁸¹ Barbara Brookes, *Abortion in England 1900 – 1967*, London, 1988, p.79.

⁸² Brookes, 1988, p.153.

reform the law so that they were not liable for prosecution.⁸³ This also meant that the final decision would not be in the hands of parliament, or the woman, but the doctor.

ALRA helped, probably without realising, by arguing for abortion on health grounds. Brookes states that this led to 'the medical profession claim[ing] health as its territory. In effect the 1967 Abortion Act served to strengthen medical autonomy and left women reliant on the profession's goodwill.'⁸⁴ The major change was that, prior to the 1967 Act, abortion was legal only where pregnancy threatened the woman's life. After the passing of the Act, abortion was legal if the pregnancy posed a grave physical or mental danger to the woman. Smyth sees that the 1967 British Act was the impetus for abortion reform around the world. She states, 'within a decade 43 countries and states changed their laws. Only three made their abortion laws tighter – New Zealand included.'⁸⁵

Although different factors were involved in the legislative process in Britain and South Australia, they both provide examples of states that reformed their laws before the advent of second wave feminism. In addition, because of New Zealand and NSW's close relationship with these two reforming polities, they provided an example to look to, when the question of abortion law reform was being debated. It seems clear that feminist advocacy of abortion law reform was not necessary in order to reform the law; however, this does not negate the important impact it had in other states, such as New Zealand and NSW. The changing role of women in society, already evident in the 1960s when the law changes occurred in England and South Australia, is indicated by second wave feminism in the 1970s.

⁸³ Brookes, 1988, p.155.

⁸⁴ Brookes, 1988, p.156.

⁸⁵ Smyth, p.153.

The Levine Ruling in 1971 produced case law that altered the law on abortion in NSW. A similar law had come into effect in Victoria in 1969, known as the Menhennit Ruling. On 11 May 1970, the Heatherbrae abortion clinic was raided by police and the staff was arrested. While the staff were on trial, the Sydney Women's Liberation demonstrated outside the courts. The Levine Ruling was finally handed down in October 1971 and the Heatherbrae staff were acquitted.⁸⁶ The Levine Ruling is thoroughly discussed in the literature, as it is the turning point in the history of abortion in NSW. Judge Levine ruled in the Magistrates Court that social and economic factors could be taken into account when deciding whether a woman could have an abortion or not. This, in effect, produced abortion on demand in NSW.

The literature does acknowledge that the ruling was handed down at the beginning of the women's movement in Sydney. The inclusion of economic and social factors as a reason for abortion in his ruling suggests that Levine could have been influenced by feminist demands, or alternatively he could have seen the class implications. Feminists did have some reservations about the decision. The most important was that if another abortion case were ever to go to a higher court, the Levine Ruling could be overturned, and abortion could possibly become illegal again.⁸⁷ The alternative view is that NSW obtained a much more liberal law, and more quickly, than if the state parliament had passed a law on abortion. Moreover, the Levine Ruling has never been overturned, so while there was a real possibility of this, it has never eventuated.

⁸⁶ Sue Wills, 'The Politics of Sexual Liberation', PhD thesis, University of Sydney, 1981, p.16 -18.

⁸⁷ Allen, p.214.

Conclusion

The literature on feminist advocacy of abortion tends to lack detail, especially when considering the trans-Tasman abortion traffic. Furthermore, the relationship between NSW and New Zealand has not been explored in the literature, despite many indications that there were both interactions between the two states and similarities in their histories. Moreover, a history has not been written, which considers abortion as a feminist issue from the early 1970s through to the 1980s and the backlash. Different works deal with different phases of the movement, but this makes it difficult to assess whether the factors which caused abortion to become a political issue are the same factors which subsequently reduced its significance. The role which feminism played in abortion law reform needs to be considered, especially because abortion was the central issue to the feminist movement during the 1970s.

Chapter Two:

The Feminist Politics of Abortion

Abortion was the central issue for second wave feminists. This chapter examines the major groups in both New Zealand and NSW who supported the reform of the abortion laws, and the ways in which they did this. The issue of feminists who did not support abortion law reform is also dealt with. Demographic issues and their relationship to abortion are considered, along with class and race factors. The interaction between feminist groups in New Zealand and NSW are examined, and this is followed by a discussion on the abortion clinics set up in both states during the 1970s.

The second wave feminist movement espoused a number of important causes: equal pay, equal opportunities in education and employment, freely available contraception and abortion, free 24 hour child care and an end to sexist advertising and sexual exploitation of women. However, the most central issue for second wave feminists was freely available abortion. There were several reasons for this. Firstly, abortion was seen as a symbolic issue, because feminists believed that central to the liberation of women was the liberation of their bodies. Secondly, there was a strong opposition group to abortion law reform in both New Zealand and NSW which meant that extra efforts had to be made in promoting abortion law reform by the feminists. Moreover, feminists knew that not having legal abortions available did not stop women from having abortions, it only made them unsafe. It was believed that once abortion laws were repealed, other freedoms would follow. As Fran Jelly explained,

‘very few slaves fighting for their freedom have called for long service leave, superannuation and free train travel on holidays. If they had called for such things, they would have had a great deal of trouble winning their demands.’¹ Hence, according to this line of thought, before the women’s liberation movement could proceed, abortion had to be made freely available to all women.

Support for abortion law reform was not limited to women’s liberation groups. There were many other groups and individuals who supported the reform of abortion laws, for a variety of reasons. This partly explains why some feminists wanted to have groups with the specific aim of either reforming or repealing the abortion laws so that those who were not overly interested in the other demands of the second wave feminists would still have the opportunity to fight for abortion law change.² There were others who believed that while men could partake in the struggle for abortion law reform, only women could be relied upon.³ Despite the differing views within the movement about who should be involved in the fight for abortion law change, it was clear that this fight was seen as central to the second wave feminist movement, both by the majority of those within the movement and spectators of the movement.

Reform and Repeal

The two major groups involved in campaigning for a liberalisation of the abortion laws in New Zealand were ALRANZ and WONAAC. ALRANZ which supported the reform of the abortion law was in general made up of liberals, both male and female, who had had experience in humanist or civil liberties groups. These

¹ Fran Jelly, ‘Abortion: A political struggle’, *Abortion is a Woman’s Right to Choose*, no.8 (1975), p.11.

² Jelly, p.11.

³ ‘Editorial’, *Abortion is a Woman’s Right to Choose*, no.10 (1976), p.2.

people tended to be very well educated. In contrast, WONAAC only had female members, and supported the repeal of the abortion laws. Stone, in her study on ALRANZ and WONAAC described the differences between the two groups. She claimed that the ALRANZ executive was mostly 'young married women or young academics', and that ALRANZ aimed to 'make the public understand the issue and to achieve this has almost a horror of anything sensational or emotional.' This stance was different to that of WONAAC who were far more 'hard-line.'⁴ The other major difference between the two groups, according to Stone, was that WONAAC activists were 'of a lower socio-economic status than SPUC and ALRANZ activists,'⁵ and this in fact made them 'more representative of the female population as a whole than the female members of ALRANZ.'⁶

While WONAAC was dedicated to the repeal of the abortion laws, ALRANZ took a more moderate approach to reform of the laws. ALRANZ wanted terminations to be legal when agreed to by the woman and her doctor and when carried out in the first 12 weeks by a medical practitioner. It also wanted counselling and contraceptive advice to be available to women.⁷ WONAAC was not opposed to providing counselling or contraceptive advice, however, it did not believe that it should be compulsory. WONAAC believed that its position was best summed up by its slogan: 'A woman's right to choose'. They believed that it was this slogan that made the organisation well known in New Zealand.⁸

⁴ Sandy Hall, 'A Very Fertile Land', *Broadsheet*, no. 45 (1976), p.24.

⁵ Raewyn Stone, 'Group Struggle in a Value Field: The Comparative Performance of New Zealand Pressure Groups on the Question of Abortion, 1970 - 75', *Political Science*, 29:2 (1977), p.144.

⁶ Stone, p.144.

⁷ Poster for ALRANZ, MS-Papers-1636-4/09, Alexander Turnbull Library (ATL).

⁸ WONAAC: 'Contribution to National Women's Abortion Conference', p.3, 91-123-1/2, ATL.

There was some disagreement between the two New Zealand groups over how to promote their cause. WONAAC believed that ALRANZ had failed to fight SPUC on a feminist basis and so WONAAC called for the repeal of the abortion laws. It also believed that ALRANZ had a low profile and concentrated on research rather than public demonstrations. ALRANZ felt that the word 'repeal' had a negative connotation, and that 'woman and her doctor' seemed more respectable. It believed that the reason the group had not succeeded in liberalising the abortion laws was because many people associated it with WONAAC.⁹

The different stance taken by WONAAC and ALRANZ caused considerable tension between them, and this weakened their power, especially because SPUC was able to present a united front. While ALRANZ was not a feminist organisation, individual members were, and *Broadsheet* commented, 'although the basic idea behind ALRANZ is liberalisation of the laws, I have a suspicion that a lot of the women members support repeal.'¹⁰ However, in 1976 *Broadsheet*, in a report on the National Abortion Conference, which was held 31 July – 1 August, claimed:

Now that the campaign is to be organised by WONAAC, however, which has the stated aim of repeal, it seems unlikely that the less radical women will join in. In this sense the conference did not unite all women who oppose anti-abortion laws as it might have done.¹¹

Therefore, it is clear that there was not generally a united front between the women who supported reform of the law, and the women who sought repeal. However, it seems that in some circumstances, for example in Christchurch, ALRANZ and WONAAC were able to work co-operatively together.¹² Unfortunately, the internal divisions in the movement made it easier for SPUC to achieve its goals. SPUC also

⁹ Anna Watson to Jan Clark, 10 September 1976, 79-016-1/19A, ATL.

¹⁰ Kay Smith, 'WACC', *Broadsheet*, no.12 (August 1973), p.6.

¹¹ Christine Dann, 'Talking About Abortion', *Broadsheet*, no.42 (September 1976), p.13.

¹² Patricia Syme, interview, 19 December 2003.

had the advantages of a large membership based on the Catholic and Mormon Churches, and was very well funded.

That there were some women who belonged to both ALRANZ and WONAAC occasionally added to these tensions; dual membership usually resulted in a choice between one group or the other. For example, after the passing of the Contraception, Sterilisation and Abortion Act in 1977, Penny Fenwick resigned from the Christchurch Branch of ALRANZ. Her resignation was precipitated by a comment made to the *Press* by Jacqueline Steincamp about some women who laid a wreath in the Catholic Cathedral in protest.¹³ Fenwick wrote:

I wish to resign my membership of ALRANZ and I would like to state my reasons for doing so. For some time now I have been disturbed by the attitude adopted by ALRANZ on a number of issues in the abortion struggle, most particularly its attitude to those women who adopt a more militant, feminist attitude to the struggle, those whom ALRANZ sneeringly dubs the 'radical'. It has become increasingly obvious that ALRANZ sees these women as almost more of a threat than our supposed common opponents.¹⁴

Clearly, some people felt that the pro-choice faction should be unified. Because this did not happen it resulted in even more factionalism within the pro-choice movement.

ALRA and WAAC were the two major groups promoting abortion law reform or repeal in Sydney during the 1970s. They appear to have been more divided than their New Zealand counterparts. WAAC wanted the repeal of the abortion laws from the outset.¹⁵ In contrast, ALRA originally wanted the law to be reformed, but later it wanted the laws repealed also, changing its name to the Abortion Law Repeal Association.

¹³ Patricia Syme described Steincamp as a 'maverick'. Steincamp was later pushed out of ALRANZ in Christchurch; interview, 19 December 2003.

¹⁴ Penny Fenwick to the Secretary, ALRANZ Chch Branch, 19 December 1977, ARC 1993.4, Item 11, Folder 11, Box 3, Canterbury Museum (CM).

¹⁵ 'Why Reform is not Enough', *Abortion is a Woman's Right to Choose*, no.14 (1977), p.6.

The division between the two groups seems to have been centred around a generational difference. Most of the members of ALRA were in their fifties, while the majority of WAAC were in their twenties and thirties. The secretary of ALRA, and later the president, Julia Freebury, commented:

Some of the younger women even have the hide to criticise the older women in the movement and tell them they are not radical enough. That really annoys me. There needs to be more cohesion between the women if they are going to get anywhere with their demands.¹⁶

In 1980, WAAC wrote to their counterpart in Queensland alleging that Freebury charged \$30 for each abortion referral that she assisted with, which went to ALRA, of which she was the sole member and operator. They went on to criticise her for not sending women to feminist clinics in Sydney, preferring doctors Tom Wall and Lew Wald, who they claimed treated women appallingly.¹⁷ However, on the same day, WAAC wrote to Freebury asking her for financial assistance for their campaign against Right to Life,¹⁸ demonstrating that they were prepared to ask her for money, despite believing she had obtained it unfairly.

Feminist Activism and Protest

Different feminist groups went about promoting abortion law reform or repeal in a number of diverse ways. The first abortion protests in Sydney were sparked by the trial of the staff of the Heatherbrae Clinic in 1971. This was the trial that would eventually result in the Levine Ruling, which clarified the law on abortion in NSW. The Heatherbrae Clinic had been operating in Bondi since the 1950s, yet police had chosen to target it only in 1971. On 22 September 1971, thirty women demonstrated

¹⁶ 'Every child should be wanted', *Daily Telegraph*, 14 June 1972, Scrapbook XI, MLMSS 7012/5, Mitchell Library (ML).

¹⁷ Meredith Braunhill (WAAC) to Women's Campaign for Abortion (Qld), 30 September 1980, Correspondence 1980, Box 1, ML 172/03, ML.

¹⁸ Meredith Braunhill (WAAC) to Julia Freebury, 30 September 1980, Correspondence 1980, Box 1, ML 172/03, ML.

wearing smocks with 'Support Abortion on Request' written on them. This was while the staff from Heatherbrae first appeared on their charges.¹⁹ Later in the year, the Campaign for Free Birth Control and Abortion on Request organised a march from the Sydney Town Hall to Hyde Park on 20 November. It was timed to co-inside with marches in Washington DC and San Francisco, showing the awareness that these groups had of what was happening in other parts of the world.²⁰ Over 200 people were involved in the protest, and on the back of a truck, two demonstrators caricatured a cleric and Premier Askin.²¹ The number of people involved in these protests grew quickly, and on 11 March 1972, nearly 4,000 people marched through Sydney's streets.²²

Sydney women also protested outside the offices of the Australian Broadcasting Authority (ABC) after the general manager refused to screen a recording of a debate in the Sydney Town Hall featuring Germaine Greer. It was claimed that Greer had been 'over-exposed and now attracts little public interest.'²³ However, the Town Hall had been packed for her debate, and hundreds of people had been turned away because there was no space. Despite the efforts of the protestors, the recording was never shown.

Protests in Sydney continued, and on 11 May 1974 women marched in Sydney, as well as Melbourne, to commemorate the defeat of the Medical Practice

¹⁹ 'Reformers demonstrate', *Australian*, 21 September 1971, Scrapbook IX, MLMSS 7012/5, ML.

²⁰ Julia Freebury, 'Support International action abortion on request children by choice', Scrapbook X, MLMSS 7012/5, ML.

²¹ 'Demonstrators take abortion rights demand into the city streets' *Tribune* 24 November 1971, Scrapbook X, MLMSS 7012/5, ML.

²² 'Sister Power! 4,000 Join Women's Lib March' *The Sun* (Sydney), 11 March 1972, Scrapbook X, MLMSS 7012/5, ML.

²³ 'ABC puts ban on "over exposed" Germaine', *Sunday-Australian*, 19 March 1972, Scrapbook XI, MLMSS 7012/5, ML.

Clarification Bill in the federal parliament.²⁴ On 12 March 1977, there was a demonstration in Sydney for International Women's Day. WAAC chose this day to announce that they were drafting a bill to repeal sections 82 and 83 of the NSW Crimes Act.²⁵ Not only did Australian feminists protest in support of women in other countries, they were also informed through newsletters and magazines of protests in other countries, particularly New Zealand.

Protests about abortion were common in the major cities of New Zealand during the 1970s. Parliament was often the centre of protests because both WONAAC and ALRANZ were based in Wellington, and because it was parliament that had the power to change the abortion laws. For example, when feminists heard that the National MP, Frank Gill was planning to introduce a bill to restrict access to abortion they organised a march to take place on 23 June 1976. They assembled in Pigeon Park and marched through the city to parliament where they held a rally.²⁶ After the controversy of the Contraception, Sterilisation and Abortion Act in December 1977 which restricted access to abortion, the number of protests increased, and over 1500 people marched in Wellington on 8 March 1978 under the banner 'A Woman's Democratic Right to Abortion.' Several women spoke at the Cenotaph, including the member of parliament, Whetu Tirikatene-Sullivan and Julia Freebury, from ALRA in Sydney.²⁷

The change in the New Zealand law in 1977 marked a change in the nature of some of the protests which took place. On 18 December 1977, nine women dressed in

²⁴ J Beckmann, 'Abortion is a woman's right to choose', Scrapbook XVII, MLMSS 7012/6, ATL.

²⁵ 'WAAC Speaks on IWD', *Abortion is a Woman's Right to Choose*, no.14 (1977), p.12.

²⁶ Viv Hardy (Abortion Rally Committee) to 'Sisters', 3 June 1976, 91-123-1/3, ATL.

²⁷ 'International Women's Day Chosen for Protest', *Evening Post*, 8 March 1978, 91-123-2/2, ATL.

black marched into the Roman Catholic Cathedral in Christchurch during mass. They placed a wreath and a placard in front of the altar and then left without making any noise. The placard read, 'your church supports the new abortion law and the killing of desperate women. Do you care?'²⁸ This action was condemned by some members of ALRANZ in Christchurch as being too radical, while others felt that it was necessary given the state of the abortion laws. Another example of a more radical form of protest was targeting anti-abortion MPs' homes. Two Christchurch MPs, Bert Walker and Mick Connelly, both had pro-abortion slogans painted on their driveways and fences, as well as on Walker's house.²⁹ Feminists wanted these men to be made accountable for their actions, and while it was a very personal attack, many felt it was justified considering the role these men had played in removing New Zealand women's access to abortion.

Abortion protests continued into the 1980s, and on 16 May 1981, International Abortion Day,³⁰ WONAAC picketed St Mary's Church on Boulcott Street, Wellington, to show their solidarity with the women of Spain, where the Catholic Church had been denying women access to abortion and the ability to control their own fertility.³¹

Suffrage Day in New Zealand, 19 September, was often used as a day of protest by women's liberationists, who believed that abortion was to their cause what the vote had been to the first wave feminists.³² For example in 1978, the 85th anniversary of women gaining the vote, women laid a wreath on parliament's steps

²⁸ 'Abortion protest during mass', *Christchurch Star*, 19 December 1977, 89-326-1/20, ATL.

²⁹ 'It's a damn shame', *Press*, 16 December 1977, 89-326-1/20, ATL.

³⁰ This day was set aside by the International Contraception, Abortion and Sterilisation Campaign.

³¹ WONAAC Newsletter, no.53, (April/May 1981), Item 26, Folder 27, Box 7, ARC 1993.4, CM.

³² WONAAC Press Release, 11 September 1973, 91-123-1/1, ATL.

with a sign which read, 'for all the women who have been murdered, sterilised or psychologically maimed by criminal New Zealand abortion laws.'³³ It was common during the 1970s to focus Suffrage Day protests on parliament. In another incident, women's liberationists dressed as suffragists chained themselves to a post outside a supermarket owned by Melvyn Courtney, the Labour MP for Nelson, and a supporter of the restrictive legislation passed in 1977.³⁴ Clearly, despite the differences between first wave feminists and second wave feminists, the second wave felt a connection to their nineteenth-century counterparts.

While in many ways second wave feminists saw themselves as different from the first wave, they still used the connection with the earlier movement to make a point. The comparison between the vote for first wave feminists and abortion law repeal for second wave feminists was often made. An article in *Broadsheet* explained:

If we look at the abortion struggle in New Zealand now within its historical and social context, what can we learn? A comparison with the suffrage movement shows us the need for a sustained and vigorous campaign, directed at involving the maximum number of people *against* the government which denies us our rights, and *for* a woman's right to choose, using all means possible.³⁵

Feminists were prepared to use whatever means they had to fight for abortion law reform, and they used the example of first wave feminists as justification for their arguments.

The most important legacy first wave feminists had left women was the right to vote. The general election in 1978 was an opportunity to make their discontent known, and felt, especially by the anti-abortion politicians. After the Contraception,

³³ 'Protestors say it with flowers', 20 September 1978, 91-123-2/2, ATL.

³⁴ 'Chained Women Protest', *Press*, 29 March 1980, 91-123-2/3, ATL.

³⁵ Christine Dann, 'Editorial', *Broadsheet*, no. 58 (1978), p.7. See also Di Cleary (WONAAC) to the Editor, *Dominion*, no date, 91-123-3/2, ATL.

Sterilisation and Abortion Act had been passed in December 1977, there was a feeling that the movement had failed. Accompanying the 1978 election was a referendum on liquor licensing. Some feminists supported the idea that they should vote for prohibition in order to register their unhappiness with the new abortion law. A pamphlet entitled 'No booze until we can choose' was circulated amongst women's groups.³⁶ However, this campaign was not endorsed by Margaret Sparrow, the president of ALRANZ as she felt that doing this would only 'cloud the issue'.³⁷ This move again connects the first and second wave feminists because temperance was a major demand of the first wave feminists, and many had belonged to the Women's Christian Temperance Union (WCTU). The difference was that second wave feminists did not want to deny alcohol to the population forever. Instead, they only intended to make a point and make it known that many were discontented with the abortion laws.³⁸

As well as voting for prohibition in the 1978 election, women were encouraged only to vote for candidates who were pro-choice. Women were persuaded to question candidates on their views. For example, *Broadsheet* informed women of the voting record of current MPs on the 1977 Act.³⁹ Furthermore, some electorates were identified as being critical, especially where one of the two major candidates supported reform while the other clearly opposed it. In addition, these were electorates where the majority in the 1975 election had been less than 5000.⁴⁰

Broadsheet defended the practice of single issue voting:

³⁶ 'Prohibition big issue this poll?', Item 40, Folder 48, Box 12, ARC 1993.4, CM.

³⁷ 'Prohibition vote rejected', *Dominion*, 6 October 1978, 80-386-2, ATL.

³⁸ Christine Dann, 'Voting for a Woman's Right to Choose', *Broadsheet*, no. 64 (1978), p.21.

³⁹ See Appendix C

⁴⁰ See Appendix B

Many people will say you shouldn't vote on only one issue when electing an MP. My feeling is that your average man's attitude to abortion and women's rights in the matter is a very good indication of his attitudes on a whole related series of social issues.⁴¹

Again, this strategy was linked to the works of the first wave feminists. The vote to the suffragists was the means by which they could gain all their other demands, and it was believed that women of the 1970s would be able to use the vote to alter the abortion laws.⁴²

Anti-Abortion Feminists

An important group of women involved in second wave feminism, but who have so far been written out of the histories of the movement, were the feminists who were anti-abortion. They generally located themselves within the feminist movement, but connected themselves more with what they believed were the ideals of first wave rather than second wave feminism. Daphne de Jong, writing in the *New Zealand Listener* claimed:

The earliest feminist battles were fought against the legal chattel status of women. Many feminists were among those who overturned the US Supreme Court decision of 1857, that a black slave was 'property' and not entitled to the protection of the constitution. Feminism totally rejected the concept of ownership in regard to human beings. Yet when the court ruled in 1973 that the foetus was the property of its mother, and not entitled to the protection of the constitution, 'liberated' women danced in the streets.⁴³

She went on to state that women must demand recognition of the fact that they do become pregnant, and that they have the same rights as everyone else when they are pregnant.⁴⁴ For example, job protection and an income should be provided for pregnant women. However, other women felt that it was impossible to call oneself a feminist but be anti-abortion. Christine Dann commented on feminist and unionist Connie Purdue:

⁴¹ Mary Sinclair, 'Abortion Tactics', *Broadsheet*, no. 57 (1978), p.24.

⁴² Mary Sinclair, 'Abortion Tactics', *Broadsheet*, no. 57 (1978), p.24.

⁴³ Daphne de Jong, 'Feminism and abortion – the great inconsistency', *New Zealand Listener*, 88, 1984 (1978), p.21.

⁴⁴ Daphne de Jong, 'The Feminist Sell-Out', *New Zealand Listener*, 88, 1985 (1978), p.18.

What is a 'feminist'? Connie Purdue has gone on record before as saying that she is a 'feminist' as opposed to a 'woman's liberationist'. 'Women's liberationists' in Purdue parlance, are 'extremists' who blacken the respectable name of feminism.⁴⁵

The issue of whether one could be a feminist but be anti-abortion was to prove to be very divisive to the second wave feminist movement. Ultimately, women who did not support at least abortion law reform, if not repeal, were isolated and formed their own groups, known as Feminists for Life. This dispute underlines how central abortion was to second wave feminists.⁴⁶

The turning point for anti-abortion women in the New Zealand feminist movement was at the 1973 United Women's Convention when a group of anti-abortion women, led by Connie Purdue, walked out of the Conference in protest.⁴⁷

Deidre Milne wrote an open letter to Purdue that was published in *Broadsheet*:

I very much object, as I am sure you do, to attempts to tie feminism to the abortion issue, so that anyone who does not support abortion law reform is not a feminist, and anyone who does, is. This is ridiculous. We all realise that abortion is only one of the topics involving women's sexuality, not the basic feminist issue.⁴⁸

However later letters to the editor in *Broadsheet* revealed that pro-choice feminists were not prepared to accept anti-abortion feminists as their sisters. One woman wrote:

Jenny Tanner's letter (April) filled me with disgust and disbelief. She says she wishes to achieve the same goals as other feminists, such as safeguarding a woman's right to choose, yet she imagines she can do that by being a member of SPUC, a misogynist outfit if ever there was one!⁴⁹

A chronological shift can be seen, between the two letters. The first was written in 1973, the second in 1977. By the time of the second letter the strength of anti-abortion groups had been felt by the feminist movement, and it could no longer afford to be divided on its most central issue. Feminists were clear that they would not consider

⁴⁵ Christine Dann, 'Connie Purdue – Self Styled Feminist', *Broadsheet*, no. 35 (1975), p.11.

⁴⁶ WONAAC Press Release, 'Bill of Rights for Pregnant Women Inadequate', 29 November 1976, 91-123-1/3, ATL.

⁴⁷ '26 Walk Out in Protest at Resolution', *New Zealand Herald*, 17 September 1973, f-89-326-1, ATL.

⁴⁸ Deidre Milne, 'An Open Letter to Connie Purdue', *Broadsheet*, no. 14 (1973), p.2.

⁴⁹ Angela Graham, 'Letters', *Broadsheet*, no. 50 (June 1977), p.2.

anti-abortion women to be feminists, and they saw them as 'enemies' in the same way that they considered other anti-abortionists.

The majority of women who actively participated in the women's liberation movement were pro-choice and so found the anti-abortion women difficult because they saw them as a minority who were trying to take control of the movement. After the split at the 1973 United Women's Convention, Toni Church complained in the *Broadsheet* editorial:

How can it be that something, which for most of those who attended the Convention occupied but five minutes of the two days, could receive so much publicity? It happened because the press, ever-hovering like vultures looking for trouble, seized on that as 'news'. The imaginary grievances of the approximately 25 women who walked out of the Convention were duly recorded.⁵⁰

There appeared to be a double resentment of the anti-abortion women: first that they opposed abortion law reform, and this was seen to be contradictory to the goals of feminism; and second that they were undermining the movement because their dissent sapped the strength of a united front. This problem continued, and in 1975, International Women's Year, it was felt that, 'Catholic women and noted anti-abortionists like Connie Purdue turned out in force to the elections for the Auckland Regional Committee of International Women's Year and got some of their number elected to that Committee.'⁵¹ There was a feeling that anti-abortionists were trying to 'trick' the public by not just appearing under the SPUC banner, but also under the feminist banner, and this made it hard for the feminist groups to present a united front. One writer in *Broadsheet* argued, 'by infiltrating or forming new organisations not overtly anti-abortion they hope to lend credibility to their demands and give the

⁵⁰ Toni Church, 'Editorial : "In Retrospect"', *Broadsheet*, no. 14 (1973), p.4.

⁵¹ 'Editorial – New Tactics in the Abortion Struggle', *Broadsheet*, no. 28 (1975), p.5.

erroneous impression that their views are much more widespread than they are.’⁵² Despite this, Marilyn Pryor led a seminar on behalf of SPUC at the 1975 United Women’s Convention. This was part of an attempt by the Convention to represent a wide range of views held by women. But by the 1977 United Women’s Convention, representatives of SPUC were no longer welcome.

The National Organisation for Women (NOW) was one group in which the clash was played out publicly. NOW had been founded in New Zealand by Sue Kedgley and Connie Purdue, and originally had no policy on contraception for under 16 year olds, or on abortion. When Cherry Raymond first became president of NOW, she made this statement:

I am personally pro-abortion, but would not like to see NOW becoming authoritarian over this issue. I agree with the sentiment of a ‘woman’s right to choose’ in that no woman should be refused an abortion if she wants it and conversely, no woman should be forced to have an abortion if she doesn’t want it. I have no objection to such a clause becoming part of the NOW constitution.⁵³

Later on, as abortion became more central to the feminist movement, NOW did develop a liberal policy on it, and this resulted in the anti-abortion women resigning from the organisation.

In Australia, the equivalent of Feminists for Life was Women Who Want to be Women (WWWW). The leader of the group, Babette Francis came to New Zealand in 1981 and claimed that WWWW wanted equality, but they also wanted ‘recognition of uniquely female roles.’ She stated in an interview, ‘we think women should keep on trying to raise men to a more responsible level, rather than go the other way.’⁵⁴ The connections with first wave feminism were apparent to the organisation: women

⁵² Ibid, p.5.

⁵³ ‘Cherry Raymond NOW’s New President’, *Broadsheet*, no. 18 (1974), p.4.

⁵⁴ Phil Gifford, ‘Beyond the second stage’, *New Zealand Listener*, 31 October 1981, 91-123-3/2, ATL.

should have a civilising effect on men. Another Australian group also portrayed men as people who try to avoid their responsibilities. In a pamphlet explaining how abortion was ‘a tool of male oppression’ the group stated,

Thanks to the pill, the scalpel, the syringe and the vacuum aspirator, men have now been freed from the fear of getting a woman accidentally pregnant. Men no longer have to fear the “shotgun wedding”, the maintenance order or the stigma of getting a woman pregnant.⁵⁵

There is no mention of the fact that women now had a choice about whether to continue with a pregnancy. Nor is there any critique of a society where people ‘have to fear’ becoming pregnant outside marriage.

Sometimes, these anti-abortion feminist groups ran services to help pregnant women. Pregnancy Help was one such service run in New Zealand. It was described by its president, Thelma Burton as ‘true feminism in action – women helping women through a phase of life which only women can experience.’⁵⁶ However, many other feminist groups criticised Pregnancy Help because they put pressure on women to continue with their pregnancy, rather than allowing them to choose. Also, while they helped women up until they gave birth, little or no support was offered to mothers of young children.

One argument put forward by anti-abortionists was that freely available abortions would encourage young single women to be more promiscuous. However, second wave feminists were always anxious to highlight that many married women wanted to have abortions as well. While this is factually true, single women were the main users of abortions in the 1970s and beyond. Albury argued that:

Many opponents of freely available abortion assume that only unmarried women want abortions. For them, an enforced pregnancy followed by adoption of the baby is the proper

⁵⁵ Flier, ‘Abortion: A Tool of Male Oppression’, File 10, Box 4, ML 172/03, ML.

⁵⁶ ‘Pregnancy Help “True Feminism”’, *Evening Post*, 26 July 1977, 91-123-2/1, ATL.

solution to an unwanted pregnancy. The ideology of the family way of life is so strong that it justifies using pregnant single women as breeders for sterile married couples who are incomplete without their 'own' child.⁵⁷

In the first issue of *Broadsheet*, a comment was made in an interview with a Labour MP, Mike Moore, about married women and abortion. Moore had stated, 'I'm not very concerned about the single girls – it's the housewives with sagging bottoms and varicose veins that I feel sorry for,' and the writer commented, 'In this view Mr Moore is supported by such evidence as there is, which suggests that an overwhelming proportion of women who would like to obtain abortions are married.'⁵⁸

While it was important that the feminists pointed out that it was not only single women who wanted access to abortion, it is also true that by over-emphasising the married women aspect, they were able to avoid arguments about society becoming more permissive. The 1970s was a turning point in the history of abortion because previously the majority of abortions had been performed on married women. In Australia, Melbourne abortionist, Bertram Wainer claimed,

Despite the general belief that single girls are the usual candidates for abortion, such is not the case, nor is promiscuity the major cause. The average woman seeking abortion is, according to a recent Australian survey, aged between thirty and thirty-four, married and has two or three children.⁵⁹

Wainer offered no evidence to support his claim. However, data collected in Sydney by the Preterm Foundation suggests a somewhat different picture. Table 1 shows that over half of the women presented to the Preterm Clinic between June and October 1974 had never been married. Of the 1007 women presented to the clinic, 96.9 per cent of them had a termination.

⁵⁷ Rebecca Albury, 'Attacks on Abortion Rights: The Latest Round', *Scarlet Woman*, no. 9 (1979), p.22.

⁵⁸ 'Interview with Mike Moore', *Broadsheet*, no. 1 (1972), p.6; for another example see Sandra Fraser, 'Abortion', *Broadsheet*, no. 3 (1972), p.6.

⁵⁹ Bertram Wainer, *It Isn't Nice*, Sydney: Alpha, 1972, p.44.

Table 1: Marital Status of First 1007 Women Presented to the Preterm Foundation, June – October 1974. ⁶⁰

| Marital Status | Preterm | | The Women's Hospital (Crown St) | | Census 1971 NSW Females 15 – 44 yrs | |
|----------------|---------|------|---------------------------------|------|-------------------------------------|------|
| | No | % | No | % | N= 966,473 | % |
| Never-married | 526 | 52.2 | 79 | 45.4 | | 29.9 |
| Married | 364 | 36.1 | 53 | 30.5 | | 65.7 |
| Separated | 72 | 7.1 | 36 | 20.7 | | 2.1 |
| Divorced | 34 | 3.4 | 2 | 1.1 | | 1.4 |
| Widowed | 7 | 0.7 | 4 | 2.3 | | 0.9 |
| No data | 4 | 0.4 | | | | |
| Total | 1007 | 100 | 174 | 100 | | 100 |

However, the authors of the survey concluded that even when the women were not married, they were normally in a 'steady relationship, contrary to the common belief that women seeking abortions are those indulging in promiscuous sexual relationships.'⁶¹ Again, this shows a concern to justify the position of these women as 'sexually moral'. In New Zealand, available data for a slightly later period shows similar results. In 1980, just under a quarter of women having abortions were married, and almost 60 percent had never been married. The rest were either separated, divorced or widowed.⁶²

Feminists in both New Zealand and NSW were presented with the argument that abortion would decrease the population size, and would therefore affect the economy. Many did not see that the overall population of a country should influence individuals' decisions to have children, and put forward the following argument:

The women's movement must fight against any association of population control measures with the struggle for abortion, because these measures are against the interests of women. We do not want anyone deciding for us either to have children or not to have them. We want to decide.⁶³

⁶⁰ Emmi Snyder & Susan Wall, *Abortion in Sydney: A Perspective on Change*, Sydney, 1976, p.7.

⁶¹ Snyder & Wall, p.7.

⁶² *Appendices to the Journal of the House of Representatives* (AJHR), 1983, E-28, p.9.

⁶³ 'Broadsheet Report: Abortion Action', *Broadsheet*, no. 7 (1973), p.11.

However, others tried to argue that fewer people were needed because the world was in danger of being over-populated. These women put forward the following argument:

The human race reached 1000 million around 1830. It took till 1930 to reach the second 1000 million, thirty years to reach the third – we will probably reach the fourth by 1974. We can't cope with all these people. And New Zealand has one of the highest population growths in the Western world.⁶⁴

The problem with this second approach was that if it was proven at any later time that the world population was declining, then the above argument could be used against women.⁶⁵ Ultimately feminists wanted to secure the right to an abortion for all women, and by using demographic arguments they ran the risk of this been used against them at a later date. Also, they tended to use population statistics for the world, rather than for their individual countries, be it New Zealand or Australia, most probably because it would have been more difficult to argue that either of those countries were overpopulated.

Anti-abortionists often cited a declining birth rate as a reason for opposing abortion. Some, such as Dr H P Dunn, argued that the decline in natural increase was due to 'the increased number of abortions being performed in New Zealand,' as well as the increase in the number of New Zealanders seeking sterilisation. Dunn concluded his comments with the statement, 'the falling birth rate had a bad effect on family development.'⁶⁶ He made no attempt to justify this statement. His comments were typical of anti-abortionists who saw abortion as a new issue, and not something that happened in the 'good old days'. Others shared Dunn's concerns. One woman wrote:

We are losing one classroom roll every working day in New Zealand through abortion. The numbers aborted in recent years would make up the entire population of an average-size

⁶⁴ Sandra Fraser, 'Abortion', *Broadsheet*, no. 3 (1972), p.6.

⁶⁵ Fran Jelly, 'Abortion: a political struggle', *Abortion is a Woman's Right to Choose*, no.8 (1975), p.9.

⁶⁶ Judy McGregor, 'Babies in slump link', *Dominion*, 11 May 1976, 91-123-1/3, ATL.

New Zealand town. If we are losing one classroom of pupils a day that means one teacher's job a day is literally going down the drain!⁶⁷

While it is possible that the number of abortions being performed during the 1970s may have increased, it is difficult to be certain, because of the prevalence of backstreet abortions in at least the first half of the decade. The numbers were still far lower than in the 1930s, when the New Zealand government launched a commission of inquiry into abortion. Abortion resurfaced as an issue when population concerns were at their height. The birth rate had reached its nadir in the 1930s. And by the 1970s the baby boom had ended and population growth was a concern once again.

Australians were even more concerned about population levels than New Zealanders were in the 1970s. In 1971 around 280,000 babies were born in Australia. This was the highest number of births since 1951.⁶⁸ However, after this the number of births per year began to decrease. By 1973-4, the number of births at one hospital was at a twenty year low.⁶⁹ One medical specialist in Sydney suggested that this decline was due to the economic situation. He believed that people knew that having children was expensive. He did not believe it was due to the contraceptive pill, as it had been available in Australia for over ten years by this time, and the baby boom of the early 1970s had taken place when the pill was readily available.⁷⁰

The role of contraception in the abortion debate is an important one. While some people would include abortion as a form of contraception, for the purpose of this thesis, contraception includes only those methods that attempt to prevent conception.

⁶⁷ Letters to the Editor, *Hawkes Bay Herald Tribune*, 20 October 1982, MSX-2796, ATL.

⁶⁸ 'Births jump to 280,000 in baby boom year. State figures soar after abortion blitz', *The Sunday Australian*, 30 January 1972, MLMSS 7012/5, ATL.

⁶⁹ 'Baby Boom Goes Bust', *Daily Mirror*, 12 November 1974, Scrapbook XVIII, MLMSS 7012/6, ML.

⁷⁰ 'Baby Boom Goes Bust', *Daily Mirror*, 12 November 1974, Scrapbook XVIII, MLMSS 7012/6, ML.

New Zealand and Australian women had the highest rate of use of the contraceptive pill in the world.⁷¹ Many people felt that women needed abortions because they had not used contraception. However, the situation was not as clear cut as that. Many women found that they could not take the contraceptive pill because of the side effects, while others found that doctors would not prescribe it to them because they were not married. The cost of contraception also made it inaccessible to many women.

A survey was carried out on the contraceptive practices of New Zealand women, aged 15 years and over, in 1976. It was found that 93 per cent of women between the ages of 15 and 44 considered themselves to be at risk of pregnancy.⁷² The results of the survey are shown below in Table 2. Not only were there a high proportion of women not using any contraception, a smaller proportion of women were using inadequate contraception. The younger women were the more likely it was that they were not using any contraception.

Table 2: Contraceptive Practice by Age in New Zealand, 1976.⁷³

| Method | 15 – 24yrs % | 25 – 34yrs % | 34 – 44yrs % | 45 – 54yrs % | 55+yrs % |
|------------------|-----------------|-----------------|-----------------|-----------------|-------------|
| Not applicable | 10.0 | 2.3 | 7.7 | 39.9 | 67.0 |
| None | 40.7 | 17.1 | 16.7 | 23.0 | 31.1 |
| Pill | 44.8 | 33.9 | 18.0 | 11.9 | 0.5 |
| IUD | 0.8 | 8.6 | 3.6 | 0.6 | - |
| Tubal Ligation | - | 12.7 | 20.7 | 3.4 | 0.5 |
| Vasectomy | 0.2 | 12.1 | 13.4 | 3.4 | - |
| Total Adequate | 45.8 | 67.3 | 55.7 | 19.3 | 1.0 |
| Condom | 1.5 | 7.8 | 9.3 | 9.5 | - |
| Rhythm | - | 0.7 | 2.0 | 1.7 | 0.5 |
| All Other | 2.2 | 5.9 | 11.3 | 7.3 | 1.0 |
| Total Inadequate | 3.7 | 14.4 | 22.6 | 18.5 | 1.5 |
| Total | 100.2 | 101.1 | 102.7 | 100.7 | 100.6 |

⁷¹ 'The pill is proved at last – 700,000 women are not wrong', *Sydney Morning Herald*, 23 May 1974, Scrapbook XVII, MLMSS 7012/6.

⁷² B J Kirkwood, W A P Facer, Glenys M Lawrence, R B Hunton, 'Contraceptive Practice Among New Zealand Women', *New Zealand Medical Journal* (NZMJ) 90, 641 (1979), p. 108.

⁷³ Kirkwood, et.al, p.109.

The relationship between contraception and abortion was discussed at the first United Women's Convention in 1973, and it was decided that 'the problems of abortion cannot be discussed in isolation. Abortion is recognised as a last resort, not as a substitute for contraception and a responsible attitude towards sexuality.'⁷⁴ Feminists were continually emphasising the importance of education and accessibility as factors which determined contraceptive use. However, they also wanted men to take more responsibility for contraception as well. In a press statement in 1981, Di Clearly on behalf of WONAAC stated:

It is high time sexually active men were pilloried for not using contraception. Every week women are subjected to callous remarks and moral condemnation by SPUC as they berate the rising number of abortions. But there is total silence about male responsibility for unwanted pregnancy.⁷⁵

There was little change in this situation until the publicity surrounding the AIDS virus during the 1980s, which meant that men were more likely to take some responsibility.

The other method of contraception which was available, and was the most effective, was sterilisation. Yet, many doctors were reluctant to carry out these operations. In 1971 the Australian Medical Association (AMA) abolished its ethical restrictions on sterilisation of men and women.⁷⁶ However, this did not automatically make sterilisation more accessible for women and men. In New Zealand, only women could have state-funded sterilisation operations before 1977, and often these were difficult to get. After the passing of the Contraception, Sterilisation and Abortion Act in December 1977, sterilisation for both sexes became more accessible.

⁷⁴ Deirdre Milne, 'Report on Abortion Workshop', in Sandra Coney, ed., *United Women's Convention*, Auckland, 1973, p.66.

⁷⁵ WONAAC Press Statement, 22 August 1981, 91-123-3/2, ATL.

⁷⁶ 'Sterilisation ban dropped', *Australian*, 2 June 1971, Scrapbook VIII, MLMSS 7012/5, ML.

Class and Race Issues

Feminists in both New Zealand and NSW were concerned that abortion not only be available but that it also be free, so that all women would have access to it. In a debate in the Sydney Town Hall in 1972, Germaine Greer said:

It is working class women who have to take risks with backyard abortionists. And I plead with middle class women, especially middle class women with guts and money, to set up free abortion clinics and wait to be prosecuted because you could afford it.⁷⁷

Money became particularly important in New Zealand after December 1977, when women had to travel to Sydney and Melbourne for abortions. Poorer women were at a disadvantage, especially if they already had children, and had no one to look after them while they were away.

Another area of conflict within the movement was between Maori and Pakeha women, as Maori women accused Pakeha feminists of making demands for white women and ignoring the needs of others. As far as abortion is concerned, there was no one Maori opinion on abortion, and so it is necessary to piece together information to create a picture of Maori views on abortion during the 1970s. Andree Levesque in *Broadsheet* wrote:

In pre-European New Zealand Maoris seldom had recourse to abortion. It was believed that atua kahukahu, a human spirit that had almost lived but failed, would come and take revenge on the living. Such belief probably acted as a powerful deterrent against inducing abortion. There are, nevertheless, some references to abortion in Maori culture.⁷⁸

Other claims were made that contemporary Maori and Pacific Island society did not tolerate abortions:

Members of the Pacific Island and Maori communities declared that abortion is repugnant to their peoples and that a child born outside marriage is accepted by the extended family. But the Social Workers' Association spoke of European and Maori families becoming increasingly reluctant to take responsibility for the children of their unmarried sons and daughters; and suggested it would be only a matter of time before Island families were the same.⁷⁹

⁷⁷ Julia Freebury, 'Germaine Greer Debates', *Australian Humanist*, no. 23 (1972), p.27.

⁷⁸ Andree Levesque, 'Grandmother took Ergot (Part 2)', *Broadsheet*, no. 44 (1976), p.29.

⁷⁹ Pat McCarthy, 'Life on Trial', *New Zealand Listener*, 81, 1894 (1976), p.16.

While there was no consensus of opinion on abortion in Maori and Pacific Island society, it is clear that members of those groups faced more difficulties than those of the Pakeha New Zealand population. One woman explained:

Many Polynesians do not understand the white culture. They are suspicious and can't communicate. Many Polynesian girls who get pregnant are too shy to even go to a doctor. Polynesian women don't have much independence as women – they rely on their men to tell them what to do and to think for them.⁸⁰

Other women claimed that there was a problem with Maori migration to the cities because, 'large families in the rural society functioned successfully, were feasible and appreciable. In the urban situation, prolific breeding is unrealistic, uneconomic and a dangerous affliction on the mental and emotional security of any woman...particularly Maori.'⁸¹ Thus there seemed to be no one reason why Maori would oppose abortion, however it does seem that Maori were more likely to oppose abortion than Pakeha New Zealanders.

A major concern among many Maori had been that abortion would eventuate in 'race suicide' for them. However, Pakeha New Zealanders were equally concerned that this would happen to the Pakeha population. One woman stated in *Broadsheet*, 'contraception and abortion are seen as interfering with the kinship line.'⁸² A contrasting opinion was presented by Donna Awatere who claimed that Maori opposition to abortion was due more to a 'Christian cultural overlay' than 'true' Maori values.⁸³ Overall, Maori were concerned that abortion would be forced upon them as a way of limiting their race, while Pakeha were concerned that the European

⁸⁰ Pip Priestly, 'Talking to Polynesian Women, Part One: Tekura O'Connor', *Broadsheet*, no. 12, (1973), p.11.

⁸¹ Sharon Alston, 'Talking to Polynesian Women, Part One: Ngahuia Volkerling', *Broadsheet*, no. 12, (1973), p.9.

⁸² Barbara Morris, 'Talking to Polynesian Women, Part One: Mere Penfold', *Broadsheet*, no. 12, (1973), p.10.

⁸³ Christine Dann, 'Maori Women on the Move', *Broadsheet*, no. 44 (1976), p.9.

population would lower its already low birthrate with abortion, and that the Maori and Pacific Island birthrate would continue to be higher than that of the Pakeha rate.

Of the four Maori members of parliament who voted on the Contraception, Sterilisation and Abortion Bill in December 1977, three supported the bill. The sole Maori woman MP, Whetu Tirikatene-Sullivan opposed the bill. The three men were criticised by Ranginui Walker, then chairman of the Auckland Maori Council. One of the MPs, Matiu Rata stated, 'I refuse to accept that by a mere stroke of a surgeon's knife the problems of Maori women can be so alleviated.'⁸⁴ How the problems of Maori women were to be solved, he did not say.

The other issue as far as race was concerned was that some Pacific Island women who could not understand English very well were being sterilised without their informed consent in New Zealand hospitals. The Catholic Women's Welfare League made a complaint about this based on a letter written by a male nurse at Wellington Public Hospital. Individual doctors were making these decisions rather than the state, so that it is difficult to generalise how common it was for Pacific Island women to be forcibly sterilised. However, one doctor was quoted as saying after he had performed a tubal ligation, 'this is the only answer: otherwise they are polluting our country.'⁸⁵ While there was clearly concern about the impact of abortion, sterilisation and contraception on different racial groups in New Zealand, the concerns were political and did not take into consideration the fate of individual women.

⁸⁴ 'Maori attitude to abortion', *Evening Post*, 10 March 1978, 91-123-2/2, ATL.

⁸⁵ 'Polynesian "sterilised without real consent"', *Christchurch Star*, 3 March 1976, Item 6, Folder 6, Box 2, ARC 1993.4, CM.

The plight of Aboriginal women in Australia did not get as much attention as that of Maori women in New Zealand. Aboriginal women had a history of forced sterilisation, and having their children forcibly removed from them. While there appeared to be no reason for Aboriginal women to be any more opposed to abortion than white Australians, it is clear that abortion was not a major concern for them as a group. Their concern was with their right to have children and raise those children. In an article in *Abortion is a Woman's Right to Choose*, one writer comments:

Some militant aborigines believe a policy of genocide is being practised by some doctors in Australia. When you look at the number of tubal ligations being done on aboriginal women, and consider the difficulty many white women have had trying to get similar operations, it is not difficult to believe them.⁸⁶

It is now debatable whether these women were militant in their demands. WAAC did attempt to acknowledge Aboriginal women's history by including in their list of demands, no forced sterilisation. Also, the reasoning behind feminist thinking that women should be able to have an abortion was that women had to have autonomy over their own bodies, and so demands for an end to forced sterilisation and to removal of children from their mothers, could easily be incorporated into that thinking.

Australian-New Zealand Connections

While it is difficult to determine the full impact that New Zealand and NSW had on each other on the topic of abortion, it is clear that feminists on both sides of the Tasman were taking notice of what was happening on the other side, and that they were prepared to support one another. Furthermore, the women of New Zealand had a vested interest in preventing the laws in NSW from being restricted, as many of them

⁸⁶ Janet Bacon, 'Aboriginal Women', *Abortion is a Woman's Right to Choose*, no.5 (1974), p.3.

had to travel to Sydney to have abortions, a trip that would have been pointless had NSW had a restrictive law.

New Zealand groups had to rely upon their Australian counterparts to inform them of good doctors to send women to when they went to Sydney. They also relied on individual doctors to inform them on what women would need to bring with them to make the operation go as smoothly as possible. Julia Freebury, on behalf of ALRA was often able to inform ALRANZ about doctors. For instance on 27 July 1974, she wrote:

A Dr Huntly (never met him) has given his name to some doctors or groups in NZ. I know that he is a very bad operator – made a terrible mess of a young girl who had to spend the week in hospital, he would not help her when she went back to see him after the op.⁸⁷

Other doctors were quick to inform New Zealanders of price increases, and changes in schedules.⁸⁸ One Sydney doctor, George Smart, informed other doctors in New Zealand that he was willing to perform abortions. However, his sending this information to all New Zealand doctors was considered to be advertising by the New Zealand Medical Association who laid a complaint against the doctor. He was suspended from practising for a year by the NSW Medical Disciplinary Tribunal.

An additional way in which groups in both states kept in contact with one another was by the exchange of publications. WAAC sent their publication, *Abortion is a Woman's Right to Choose*, to WONAAC in Wellington, who in return sent them a copy of their newsletters.⁸⁹ Normally they were happy to swap copies rather than

⁸⁷ Julia Freebury to Wayne Facer, 27 July 1974, 79-016-2/03, ATL.

⁸⁸ Jim Woolnough to ALRANZ, 2 April 1973, 79-016-2/14, ATL.

⁸⁹ Margaret McHugh (WAAC) to WONAAC, 3 September 1973, 91-123-1/1, ATL.

receive a payment of money from each other.⁹⁰ They also sent each other newspaper articles on related activities. Often the groups encouraged each other to borrow stories from their publications so that members in each state were informed of what was occurring in the other state.⁹¹

A number of Australians came to New Zealand to speak about the abortion scene in Australia, and also about the trans-Tasman abortion traffic. For example, Dr Bertram Wainer and his wife Jo Wainer came to New Zealand to speak about the abortion clinic that they ran in Melbourne.⁹² This had a two-fold effect. It informed women on the abortion scene in Victoria, so that they knew what to expect if they ever had to travel there for an abortion; and it informed activists on what was happening in other states, so that they could make an informed decision on a course of action for New Zealand. Activists also came to New Zealand. Freebury came in March 1978 to speak at the AGM of ALRANZ, held on 11 March 1978, at Victoria University, Wellington. At that time, Freebury was the president of ALRA, NSW. She was described as ‘a long time abortion activist and well-informed on the trans-Tasman traffic past and present and the abortion scene in NSW’ (emphasis in the original text).⁹³ She also addressed groups in Christchurch.⁹⁴

New Zealand and Australian groups were also keen to bring speakers from other parts of the world to both of their countries, so that they could share the cost of

⁹⁰ Kay Goodger (National Co-ordinator of WONAAC) to WAAC Sydney, 19 April 1974, 91-123-1/2, ATL.

⁹¹ Tina Harsanyi (for WAAC Sydney) to WONAAC, Wellington, no date, 91-123-1/2, ATL. See also Diane Oatham (WONAAC) to WAAC, 15 September 1976, Correspondence 1976, Box 1, ML 172/03, ML; and Sarah Calvert, NZ Women’s Health Network to WAAC, 12 August 1981, Correspondence 1981, Box 1, ML 172/03, ML.

⁹² Notice: Private Meeting for ALRANZ Members and Supporters, 13 July [year unknown], Item 6, Folder 6, Box 2, ARC 1993.4, CM.

⁹³ ALRANZ to Branch Secretaries, 21 January 1978, Item 7, Folder 7, Box 2, ARC 1993.4, CM.

⁹⁴ ‘Aust. Campaigner’, *Press*, 29 March 1978, 80-386-2, ATL.

this expensive task. In 1974, Jessica Star from the United States and a member of WONAAC there, travelled to both countries to speak about her experiences. WONAAC (NZ) and WAAC were in constant contact over this visit to ensure that both groups received as much benefit from it as possible.⁹⁵

Solidarity between the women of New Zealand and NSW was shown in the letters that they wrote to one another. After the passing of the Contraception, Sterilisation and Abortion Act 1977, the NSW ALRA wrote an open letter to the women of New Zealand:

We are dumbfounded at the turn of events in New Zealand and the disgraceful, downright denying of women's rights. How DARE those weak-kneed politicians vote AGAINST women...many of them giving in to the unrelenting pressures of the church leaders...they have been called the pitiless stormtroopers of religion...!⁹⁶

Clearly, ALRA were well informed on what was occurring in New Zealand, and were just as angry about it as they were about the events at home. This unity is also seen in many of the letters the women wrote where they referred to each other as 'sister' or 'sisters'.

As has already been explained, 19 September, Suffrage Day was often a day of protest for New Zealand feminists during the 1970s. Women in NSW also used this as a time of protest to support New Zealand women, and criticise the actions of the New Zealand parliament in passing a restrictive law. *Abortion is a Woman's Right to Choose* advertised a protest which was to take place, to show their support of New Zealand women:

⁹⁵ Kay Goodger (National Co-ordinator of WONAAC) to Women's Abortion Action Campaign Australia, 20 June 1974, 91-123-1/2, ATL.

⁹⁶ Open letter to the women of New Zealand from ALRA (NSW), Item 7, Folder 7, Box 2, ARC 1993.4, CM.

September 19, is Women's Suffrage Day in New Zealand, the day women there celebrate winning the right to vote. This September 19, women in Australia protested against the denial of another women's right in New Zealand, namely the right to safe abortion.⁹⁷

Prior to this event, there had been a rally in Martin Place, in central Sydney, where women handed out leaflets to workers going home, and the Women's Action Theatre entertained them with street theatre.⁹⁸

Founding of Abortion Clinics

The founding of abortion clinics was an important step in both Australia and New Zealand because it meant that women did have access to abortion, and it forced the courts or parliament to make a decision on what the abortion law was to be. By the 1970s, abortion was a safe operation when carried out in a clean hospital environment by a trained doctor. When carried out in this hygienic environment, the proportion of deaths from an abortion was lower than that from a tonsillectomy.⁹⁹ In New Zealand, the only clinic that was founded during the 1970s was AMAC, which was originally known as the Remuera Clinic and later became the Aotea Hospital. This was an important step because it made the anti-abortion forces even more active in their cause, and ultimately resulted in the passing of the restrictive 1977 Act. Before the Remuera Clinic opened in 1974, there had been a number of calls for the government to establish clinics throughout New Zealand for women, and that these clinics be free of charge.¹⁰⁰ While AMAC clinic was not set up by the government, and while there was a fee, it did become a model for many who felt that similar clinics should be set up all over New Zealand. However, others wanted clinics to be 'feminist-run', but still financed by the state.

⁹⁷ 'Solidarity with NZ Women', *Abortion is a Woman's Right to Choose*, no. 17 (1978), p.3.

⁹⁸ 'Solidarity with NZ Women', *Abortion is a Woman's Right to Choose*, no. 17 (1978), p.3.

⁹⁹ Paul Wilson, *The Sexual Dilemma: Abortion, Homosexuality, Prostitution and the Criminal Threshold*, St Lucia, 1971, p.24.

¹⁰⁰ 'Govt clinics wanted', Item 39, Folder 47, Box 12, ARC 1993.4, CM.

The setting up of abortion clinics was vital in both Sydney and Auckland because as Lovenduski and Outshoorn explain:

The most important variable in the availability of abortion to a particular population of women is not the law, but the independent existence of a network of good medical facilities organized either by the state or the private sector. Sweden and the United States supply a useful contrast on this point. Both countries have liberal policies. In Sweden the scrupulous provision of adequate facilities makes access to abortion a reality for women. In the United States, on the other hand, access to abortion is often severely restricted. There free access to abortion is merely an abstract principle for many women.¹⁰¹

AMAC was able to open in New Zealand because it was decided that the abortion law was to be found in the Bourne decision of 1939 in England, and that the clinic would operate on this basis until it was shown otherwise. Many of its counselling staff were provided by the women's liberation movement, and Toni Church, the convenor of the first United Women's Convention was the manager.

AMAC opened in Remuera, Auckland, on 17 May 1974. It was run by the Auckland Medical Aid Trust. On 8 September 1975 it shifted to the Aotea Private Hospital in Epsom after the passing of the Hospital Amendment Act 1975. The intention of the clinic was to reduce the number of New Zealand women going to Australia for abortions, and also to reduce the number of women using backstreet abortionists in New Zealand. In its submission to the royal commission on contraception, sterilisation and abortion in 1975, AMAC stated:

the clinic has reduced the passage of women to Australia for abortions, it has allowed women to overcome the variability of standards applied in public and private hospitals, and has reduced the number of women having illegal abortions.¹⁰²

Despite many members of parliament and other members of the community disapproving of the actions of AMAC, the clinic was able to receive almost \$60,000

¹⁰¹ Joni Lovenduski & Joyce Outshoorn, 'Introduction', in Lovenduski & Outshoorn, *The New Politics of Abortion*, London, 1986, p.4.

¹⁰² p.1, no. 16, box 1, Com 26, ANZ.

in health subsidies in seven months of operation. This provoked one Dunedin solicitor and member of SPUC to withhold a part of his tax contribution, as he did not approve of that spending.¹⁰³ AMAC was forced to close down after the passing of the Contraception, Sterilisation and Abortion Act in December 1977, but it provided New Zealand women with safe abortions, in a supportive environment during the mid-1970s, and it eventually reopened in 1979.

Table 3: Residential Origins of Patients of the Auckland Medical Aid Clinic.¹⁰⁴

| | 1974/5 | | 1975/6 | |
|-----------------------|--------|------|--------|------|
| | No. | % | No. | % |
| Auckland | 1274 | 55.6 | 1893 | 47.3 |
| Wellington | 312 | 13.6 | 405 | 10.1 |
| Christchurch | 105 | 4.5 | 247 | 6.1 |
| Dunedin | 48 | 2.0 | 76 | 1.8 |
| Other | 549 | 23.9 | 1384 | 34.5 |
| North of North Island | - | | 723 | 18.0 |
| South of North Island | - | | 504 | 12.5 |
| North of South Island | - | | 61 | 1.5 |
| South of South Island | - | | 87 | 2.1 |
| Unknown | - | | 9 | 0.2 |
| Total | 2288 | 99.6 | 4005 | 99.6 |

AMAC was the only private abortion clinic in New Zealand. Despite being located in Auckland, many of its patients were from outside the area. This is one indication that women were prepared to go to tremendous effort to get an abortion. The residential origins of patients can be seen in Table 3, below. After free abortions were no longer available on Medicare in Australia for New Zealand women, the number of patients to AMAC increased, especially from the South Island.¹⁰⁵

¹⁰³ 'Subsidies for abortions total almost \$60,000', *Dominion*, 25 May 1976, 91-123-1/3, ATL.

¹⁰⁴ Auckland Medical Aid Trust Hospital, 77-132-01/07, ATL.

¹⁰⁵ 'Abortion Clinic Booms After Australian Clamp', *Evening Post*, 2 December 1976, 91-123-1/3, ATL.

On 16 September 1974, AMAC was raided by police. They removed about 500 patient files from the clinic.¹⁰⁶ While the files were later returned to the clinic, the police first made photocopies of many of them. This action caused outrage among many in the medical profession as they had been under the impression that patient notes were protected by patient-doctor confidentiality. The police contacted some of the women who had had abortions, and questioned them in front of family members, some of whom had no knowledge of the abortion. While no woman was prosecuted for her role in the abortion, the police would not guarantee this to them when they were being questioned. The *Sunday News* described the raid as ‘one of the worst police state actions that has occurred in recent years in this country.’¹⁰⁷

As a result of the police raid, and subsequent questioning of women involved in the abortions, an Australian doctor, Jim Woolnough was charged on twelve counts of procuring miscarriage. He had formerly worked in Sydney as a GP and sometimes as an abortion provider. He had only worked at AMAC for three months before returning to Sydney, where he was arrested.¹⁰⁸ He chose to return to New Zealand voluntarily, rather than being extradited. WONAAC held a national meeting in March 1975 to plan a response to Woolnough’s prosecution.¹⁰⁹ About 70 people picketed the Auckland Magistrates Court on 28 April 1975, when the lower court hearing of charges against Woolnough was held.¹¹⁰ After two trials, Woolnough was eventually acquitted.¹¹¹

¹⁰⁶ ALRANZ newsletter September 1974, vol. III, no. 2, 79-016-1/17, ATL.

¹⁰⁷ ‘Sorry ladies, the police may come knocking’, *Sunday News*, 22 September 1974, 79-016-1/06, ATL.

¹⁰⁸ Pamphlet, ‘Defend Dr Woolnough – drop the Charges!’, 91-123-1/2, ATL.

¹⁰⁹ WONAAC Press Statement, 16 March 1975, 91-123-1/2, ATL.

¹¹⁰ ‘Woolnough Picket’, *Broadsheet*, no. 30 (1975), p.6.

¹¹¹ Woolnough appears to have remained in New Zealand. In 1978, he stood for the Values Party in Tamaki. (Dr Jim Woolnough to WONAAC, 24 July 1978, 91-123-2/2, ATL). After this he appears to have disappeared from public.

Not surprisingly, Jim Woolnough was seen as a hero by the abortion law reformers in New Zealand. However, it seems that those in Sydney viewed him quite differently. ALRANZ were often in contact with their equivalent group in Sydney, ALRA. In June 1974, ALRANZ received a letter from the secretary of ALRA stating that Woolnough had been asked to leave ALRA in Sydney for unethical practice. This involved a clinic which he opened in February 1973, and was closed in June of that same year. It seems that one of his staff members had been stealing medical equipment from a hospital.¹¹²

A major reason why feminists wanted abortion to become legal, was so that women would not have to suffer at the hands of illegal abortionists or doctors providing inadequate services. Feminists were often particularly concerned by the way women were treated by members of the medical profession. Elizabeth Sewell and Diane Roberts in their submission to the royal commission on contraception, sterilisation and abortion claimed, 'women who have had abortions at Christchurch Women's Hospital have found the procedure harrowing, degrading, secretive and unsupportive.'¹¹³ There were similar complaints about the treatment of women by the National Women's Hospital in Auckland. Women frequently had to wait one month for an initial appointment, and then often they had to wait several more weeks to have the operation.¹¹⁴

It was not only procedural issues which feminists had a problem with. Doctors attitudes to women were often condescending. Some doctors refused to perform

¹¹² Julia Freebury to Wayne Facer, 14 June 1974, 79-016-2/03, ATL.

¹¹³ 'A "harrowing" procedure', *Christchurch Star*, 10 March 1976, 89-326-1/20, ATL.

¹¹⁴ Submission to the Parliamentary select committee on Discrimination Against Women, p.7, 98-162-1/01, ATL.

terminations on women unless they consented to having a tubal ligation at the same time. One Sydney doctor wrote:

I saw this patient of yours today. She is at present 15 weeks advanced in her pregnancy and has had two previous pregnancies, three and a half and one and a half years ago. I have told this patient that unless she is agreeable to tubal ligation, I would not be willing to arrange termination of pregnancy.¹¹⁵

Other doctors showed complete disrespect for their female patients, with one Sydney doctor writing:

Thank you for asking me to see this rather stupid 28 year old lass who has 5 children and two abortions performed by yourself. On examination I could find no abnormality and have booked her for a D and C and Laparoscopic sterilisation. I have told her that she must either keep her knees crossed or make her husband use another contraceptive for the next four weeks.¹¹⁶

Obviously, just because a doctor was willing to perform abortions, it did not necessarily follow that he was supportive of females having control of their bodies, or of the feminist cause. Many doctors, particularly those in Sydney, performed abortions because there was a lot of money to be made.¹¹⁷ The NSW police, like the police in Victoria, were prepared to turn a blind eye to doctors' activities, providing they received a share of the profits.¹¹⁸ In many ways these doctors had a lot to lose with the introduction of legal abortion because they could no longer charge exorbitant prices.

Conclusion

Abortion was the central issue for women's liberationists, and those who did not support the liberalisation of the law either were forced or chose to leave the movement. It was felt that the movement could not succeed when it was divided on its most crucial issue. However, abortion was not limited to the feminist movement; it

¹¹⁵ Dr Andrew Child to Dr Smoling, 1 March 1974, MLMSS 7012/2, ML.

¹¹⁶ P C M Wilson to Dr Leslie F Smoling, 25 July 1975, MLMSS 7012/2, ML.

¹¹⁷ Julia Freebury, interview, 25 August 2003.

¹¹⁸ Julia Freebury, interview, 25 August 2003.

was an issue which was widely debated by society as a whole in both New Zealand and NSW during the 1970s. The protests of the second wave feminists helped to publicise the issue, and they were able to utilise their connections with the first wave feminists to provide the movement with a certain amount of respectability as well as invoking a tradition and heritage. Feminists had to counter arguments that stated that it was promiscuous 'girls' who needed abortions, rather than married women or women in long term relationships. Others argued that New Zealand and Australia needed more people and stopping abortion would assist with population growth. Some of these arguments were used when the abortion debate became even more public in the mid-1970s, particularly in New Zealand where a royal commission was appointed to investigate contraception, sterilisation and abortion. Because an abortion law change was never promoted by the NSW government the controversy and the need for feminists to defend women's rights were not the same there as in New Zealand. The setting up of abortion clinics was an important step taken by those supporting the reform of abortion laws in the 1970s as it made it possible for women to have safe abortions. However the opening of AMAC in Auckland was the catalyst for much of the abortion debate in the New Zealand parliament during the 1970s and the royal commission that followed.

Chapter Three:

The Royal Commissions

The turning point for the abortion debate in New Zealand was the setting up of a royal commission to inquire into contraception, sterilisation and abortion in 1975. This showed that abortion was no longer an issue which only preoccupied certain pressure groups. It had become a subject matter that concerned politicians, medical staff and the general public. The report of the commission that was presented to parliament in April 1977 caused much controversy, particularly as it formed the basis for the Contraception, Sterilisation and Abortion Act, passed in December 1977. This chapter examines the commission, with a particular focus on the submissions made by feminist organisations, and the act that followed. The Hospital Amendment Act 1975 is briefly discussed because it was the first attempt by a New Zealand parliament to limit access to abortion in the 1970s. Across the Tasman in August 1974 the federal government of Australia appointed a royal commission on human relationships. It had a wider scope than the royal commission in New Zealand, but one area it was to consider was abortion.¹ The differences between the two commissions are examined in order to explain why the commission in New Zealand had so much more of an impact than the Australian commission on abortion laws.

¹ Stefania Siedlecky & Diana Wyndham, *Populate and Perish: Australian's Women's Fight for Birth Control*, North Sydney, 1990, p.94.

Law Making and Implementation

How feminist advocates of abortion law reform interacted with the state was vital to the outcome of their campaign. However, as Melanie Nolan notes, ‘the state is not a single entity: it is a set of institutions, a complex ensemble of disparate parts that can and do conflict with each other.’² Therefore actions by one part of the state could be seen as being supportive of abortion law reform, while another part of the state could be trying to tighten abortion laws. Ultimately, parliament had the final say in what the abortion law would be. In order for reform to succeed, it was necessary to win the support of a majority of members of parliament. However, parliamentarians in general did not want to address the issue of abortion as it was divisive within political parties and it would always alienate some MPs from some members of their electorate, no matter which way they voted. Raewyn Stone claimed that abortion law reform became prominent in the first half of the 1970s because there was a ‘growing discrepancy between the existing law on abortion and medical as well as public opinion and practice on abortion.’³ While Stone is partially correct, the climate of the 1970s with new attitudes to sexuality and a high proportion of women using the contraceptive pill also contributed to the abortion issue being discussed by parliament. These underlying forces combined with the catalyst of the founding of the Auckland Medical Aid Clinic in 1974 to create a heated debate that was never completely resolved.

The attitudes of influential MPs must be kept in mind when discussing the feminist campaign, because it was those attitudes that determined the extent to which a campaign was successful. Christine Dann wrote in *Broadsheet* that:

² Melanie Nolan, *Breadwinning. New Zealand Woman and the State*. Christchurch, 2000, p.37.

³ Raewyn Stone, ‘Group Struggle in a Value Field: The Comparative Performance of New Zealand Pressure Groups on the Question of Abortion, 1970 - 75’, *Political Science*, 29:2 (1977), p.139.

These two different attitudes to life and abortion are irreconcilable. Therefore what the abortion debate is about in the political arena is not which attitude is morally correct, but who shall have the right to decide which attitude is morally correct, and compel their fellow citizens to act accordingly.⁴

With only four women in parliament, it was clear that men were going to have the final decision about a law that was of central concern to women, and would only affect men indirectly.

Feminists faced added difficulties in trying persuade parliament on the abortion issue because Robert Muldoon, who was a powerful figure as Prime Minister of a conservative National government, was anti-abortion. The National government was in power when the Contraception, Sterilisation and Abortion Act was passed in 1977. Muldoon had stated in a letter, 'my concern is for the right of the unborn child to live, and having regard to the fact that the stigma of illegitimacy is today disappearing, I find myself much more concerned for the child than for the mother.'⁵ Many of the MPs in Muldoon's government shared his views. However, there were notable exceptions to this, in particular George Gair and Marilyn Waring. Gustafson argues,

The abortion debate of the mid-1970s would bitterly divide not only the country but also the National Party, and was to become particularly divisive in the East Coast Bays electorate of the staunchly anti-abortion MP, Frank Gill. It also drove a wedge between Muldoon and his former ally Gair, who became the most prominent pro-choice advocate in the National caucus.⁶

Feminists also had the problem that Catholics, and anti-abortionists in general, were over-represented in parliament. Both Dr Gerard Wall and Frank Gill were Catholics and members of SPUC, and were responsible for introducing two of the most

⁴ Christine Dann, 'Right to life or rights for life? The Morality of Abortion', *Broadsheet*, no. 33 (1975), p.16.

⁵ Robert Muldoon (Leader of the Opposition) to Mrs D E Roberts, 11 September 1974, Item 5, Folder 5, Box 1, ARC 1993.4, CM.

⁶ Barry Gustafson, *His Way: A Biography of Robert Muldoon*, Auckland, 2000, pp. 162 – 3.

prominent anti-abortion bills into parliament in the 1970s.⁷ In 1974 it was alleged that 22 of the 87 members of parliament were members of SPUC. Pro-abortion groups had no parliamentary members, although Cath Tizard, the then wife of the Deputy Prime Minister, in the Labour government was a public supporter of abortion law reform and had spoken at a rally as ‘an individual and a feminist’.⁸

Feminists realised that the members of parliament were able to influence the abortion laws far more than anybody else was. Therefore, they spent much time urging women to find out the views of their MP on abortion, and if they opposed abortion law reform to vote for someone else.⁹ After the 1978 election, women’s groups claimed a victory after the former Minister of Social Welfare, Bert Walker lost his seat in Papanui.¹⁰ However, he was replaced by the Labour MP Mike Moore, who was also an anti-abortionist, but not as extreme as Bert Walker who had also attempted to reduce the number of women receiving the DPB in a number of ways that the Women’s Movement considered unacceptable.

Between 1975 and 1978, there were only four members of parliament who were women. The most important female MP as far as abortion law reform was concerned was Marilyn Waring, a young National MP and member for Raglan (later Waipa). She strongly opposed the 1977 Act and later on in a speech in the House encouraged women to learn how to perform menstrual extractions on themselves.¹¹ Waring was supported in this statement by the national president of the NOW, a

⁷ Sandra Coney, ‘The Abortion Protagonists’, *Broadsheet*, no. 45 (1976), p.26.

⁸ ‘Nearly third of MPS are behind SPUC’ *Dominion*, 26 September 1974, 79-016-1/06, ATL.

⁹ For example the National Organisation of Women encouraged women to do this. See ‘Now Urges Liberal Support’, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

¹⁰ ‘Women’s Win?’, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

¹¹ ‘MP exhorts women: Do your own abortion’, 28 April 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

normally liberal rather than radical group.¹² While Waring's comments provoked much initial controversy, something that was intended, the comments had no long term impact.

There were also some problems with placing much weight on the number of women in parliament. When eight women were elected to parliament in 1981 – twice the number that had been elected in 1978 – some women thought that something would be able to be done about the abortion laws.¹³ However, much to their disappointment, there was no change.

In contrast to New Zealand, it was the courts rather than parliament which were influential in changing the abortion laws in NSW. In 1971, a group of doctors and the female owner of the Heatherbrae Clinic in Bondi, Sydney were put on trial for performing illegal abortions. The owner of the clinic, Daphne Colbourne and her husband Robert were charged along with Drs George Morris, Louis Wald and Thomas Wall.¹⁴ The clinic had been raided by police officers while operations were being performed. Officers went into operating theatres to remove women under anaesthetic despite being told not to by the operating doctors.¹⁵ Several patients were made to testify at the trial or otherwise face prosecution. The jury, which consisted of eleven men and one woman were instructed by Judge Levine that

for the operation to have been lawful the accused must have had an honest belief on reasonable grounds, economic, social, or medical, that the operation in each case was necessary to preserve the woman from serious danger to her life or physical and mental health. The danger should go beyond the normal dangers of pregnancy and childbirth and

¹² 'NOW Adds Support to MP on Abortion', *Christchurch Star*, 30 April 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

¹³ ALRANZ, National President's Annual Report, 1982, Item 27, Folder 29, Box 7, ARC 1993.4, CM.

¹⁴ 'Abortion trial jury told to follow law', *Daily Telegraph*, 22 September 1971, Scrapbook IX, MLMSS 7012/5, ML.

¹⁵ 'Detective says doctor ordered him out', *Australian* 25 September 1971, Scrapbook IX, MLMSS 7012/5, ML.

that, in the circumstances, the danger of the operation should not be out of proportion to the danger intended to be averted.¹⁶

The jury found all five defendants not guilty, and this case became the basis for which legal abortions could be performed in NSW. It has been suggested that one reason why the jury found the defendants not guilty is because the three doctors on trial were members of the Returned Servicemen's League (RSL), as were many of the men on the jury, and this persuaded them to select a not guilty verdict.¹⁷

Due to the fact that the law on abortion in NSW was changed by case law rather than by parliament, there was less controversy over the issue than in New Zealand, although in other areas, particularly policing, there was more controversy. As in New Zealand there was no parliamentary party that either outright supported abortion or outright opposed it. The Labor party was divided because of its strong Catholic support and membership, particularly in NSW. There was an attempt by George Peterson, MLA, in June 1971, to bind MPs to party policy on the abortion issue, but this move was defeated by the NSW Labor party congress by 2426 votes to 210.¹⁸ Peterson saw abortion as a class issue. He said, 'it is the capitalist-class women who can go to Japan to have legal abortions, but it is the working-class women who go into the Port Kembla hospital after being butchered by back-ward abortionists.'¹⁹

Women members of the NSW Legislative Council could not be relied upon to support abortion law reform either.²⁰ In 1971, six women representing all the major

¹⁶ 'NSW courts and the law on abortion', *Sydney Morning Herald*, 30 October 1971, Scrapbook IX, MLMSS 7012/5, ML.

¹⁷ Julia Freebury, interview, 25 August 2003.

¹⁸ 'ALP allows free vote on abortion', *Australian*, 14 June 1971, Scrapbook VIII, MLMSS 7012/5, ML.

¹⁹ "ALP allows free vote on abortion" *Australian*, 14 June 1971, Scrapbook VIII, MLMSS 7012/5, ML.

²⁰ 'Women MLCs divided on abortion law', *Sydney Morning Herald*, 14 August 1971, MLMSS 7012/5, ML.

parties belonged to the Legislative Council. Two of them, both Labor members,²¹ publicly stated that they would not support making abortions available on request. One, Edna Roper stated her concern was ‘that Australia is faced with an inflow of migrants culturally used to producing large families. If we Australians liberalise abortions, we could, perhaps, ruin our national identity.’²²

While abortion was legal in NSW, the state parliament did not actively support it. However, abortion clinics were still able to receive state funding from the federal government. In 1975, the federal government gave \$80,000 to the Preterm Foundation to reopen their clinic in Surry Hills after it was burnt down by an arsonist.²³

A major concern of abortion law reformers in Sydney was the existence of an ‘abortion squad.’ This squad had thirty one members, and in 1971 charged more than 24 doctors.²⁴ On 25 November 1971 a public meeting was held at the Sydney Town Hall to protest against the existence of the squad. The poster advertising the event read:

There are 31 detectives in the abortion squad. In the armed hold up squad there are 23.
Where are our priorities?
Public Meeting 7:30pm/Thursday/Nov25/'71
Lower Town Hall/Sydney²⁵

The abortion squad was later disbanded.

²¹ Eileen Furley and Edna Roper.

²² ‘Women MLCs divided on abortion law’, *Sydney Morning Herald*, 14 August 1971, MLMSS 7012/5, ML.

²³ ‘\$80,000 Federal grant to clinic’, *Daily Telegraph*, 16 June 1975, Scrapbook IXX, MLMSS 7012/6, ML.

²⁴ ‘Abortion: secret squad charges 24 doctors’, *South Australian*, 18 July 1971, Scrapbook VIII, MLMSS 7012/5, ML.

²⁵ Julia Freebury, ‘Outdated Abortion Laws Must Go’, Scrapbook X, MLMSS 7012/5, ML.

There were several major protests by abortion law reformers in the NSW state parliament during the early 1970s. In April 1971, George Peterson, the member of the legislative assembly for Illawarra presented a petition with 9,000 signatures demanding abortion on request and free birth control. This was rejected by the Lower House. ALRA and the women's liberation group went to parliament to protest against this action. Only five people were allowed into the public gallery, and two of the women held banners reading 'ASKIN BABIES – LIBERAL DISGRACE' and shouted 'WHEN ARE WE GOING TO LEGALISE ABORTION?'²⁶ Later in the year, in November, Julia Freebury shouted criticisms of the abortion squad from the public gallery.²⁷ Then in May 1973, after a Liberal MP, suggested in the House that women who could have children should bear them for those who could not, Freebury again in the public gallery shouted, 'what are we, machines?' She was later ejected from the gallery.²⁸

The Hospital Amendment Act 1975

On 30 August 1974, after the opening of the Auckland Medical Aid Centre, the Labour member of parliament for Porirua, and doctor, Gerard Wall, introduced a bill into parliament to prevent stand-alone clinics from providing abortions. At this time AMAC was the only such clinic to fall into this category. Of the four female members of parliament during this period, Mary Batchelor was the only member to raise a dissenting voice when the bill was introduced. She pointed out that 83 men and four women would be voting on the bill and added that the men would never have to

²⁶ No title, *Mejane: A Women's Liberation Newspaper*, no.2 (May 1971), p.1.

²⁷ 'Abortion reformers disrupt Parl', *Sydney Morning Herald*, 26 November 1971, Scrapbook X, MLMSS 7012/5, ML.

²⁸ 'A Woman Raises a lone voice', *Daily Telegraph*, 11 May 1973, MLMSS 7012/5, ML.

carry anything heavier in their bellies than a good meal.²⁹ She would later critique the bill in May 1975 because she believed that its main objective was to close AMAC, yet this was not mentioned in the bill.³⁰

The 'Wall Bill', as Gerard Wall's bill was commonly known, provoked a strong reaction from the pro-choice groups in the community. The Committee to Oppose the Hospitals Amendment Bill (COHAB) was formed to unite all the different groups in the community who opposed Wall's Bill. On 19 November 1974, COHAB made a submission to the Social Services Committee, in support of a petition against the Bill. There were three main criticisms of the Bill. First, it infringed on the rights of the doctor and patient to decide where the patient could be best treated. Second, AMAC was providing a higher level of care than any of the public or private hospitals that performed abortions. Finally, the bill would only further confuse the law on abortion.³¹ Many feminist groups belonged to COHAB including WONAAC.³² WONAAC also helped organise a large number of women to be present during the debate of the Hospital Amendment Bill in parliament in April 1975. The co-ordinator of WONAAC, Di Cleary said, 'the presence of large numbers of women should serve to remind the MPs that they are debating a Bill which will never affect the 80-odd men in parliament.'³³

Public Opinion towards Abortion in the 1970s

Both those who believed that women should have the right to choose when it came to abortion, and those who opposed abortion, claimed that they had the support

²⁹ 'Woman MP alone against abortion bill', *Dominion*, 31 August 1974.

³⁰ *New Zealand Parliamentary Debates* (NZPD), 1975, 397, p.1268.

³¹ ALRANZ newsletter, January 1975, vol. IV, No.1, p.2, 79-016-1/19A, ATL.

³² WONAAC Press Statement, 31 August 1974, 91-123-1/2, ATL.

³³ 'Women To Pack House For Abortion Debate', *Evening Post*, 22 April 1975, 80-386-1, ATL.

of the majority of people. While it was certainly true that anti-abortion groups had larger membership than pro-choice groups, it did not necessarily follow that they had the support of the majority. There were many letters written on abortion to newspapers during this period. As well, several opinion polls were conducted. The letters help explain how people justified their views, while the opinion poll give an indication of the views of the population as a whole.

Those who wrote letters in support of abortion law reform were often critical of SPUC for wanting to ‘tell others how they should live their lives from the outside’, especially when it appeared that they were not willing to bring up all the babies that they wanted to ‘save’.³⁴ Some women wrote to newspapers anonymously about their abortion experiences. One 75 year old woman, writing to the *Evening Post* in June 1975, said:

I went to university and was made pregnant by a man who had a wife and family. I was quite alone and very frightened but a friend sent me to an old woman in a dirty back lane and she did an abortion on me. I was very ill and never married or had anything to do with men afterwards and I wish that I had been able to go to a clinic for help. I pray that help can be given to unhappy frightened girls and that the men will not let the clinic in Auckland close as I remember my own pain and shame.³⁵

Another woman wrote to the *New Zealand Herald* stating:

I am no clench-fisted liberationist, or ‘hot-panted dollybird’ either. I am a mum, one of those grey-haired people you pass every day in the supermarket, and never see. I read that this is ‘Abortion Week’. All I want to say is that I should be serving 14 years in gaol because, according to New Zealand law, I have committed the crime of abortion. Five years ago I aborted myself (almost totally) because the added burden of a child at that time was just unbearable. If I was guilty of a crime I served my sentence then and there, living in one grubby room in Christchurch. Any woman who has ever endured an illegal abortion will know and understand the pain and aloneness I am writing about; the panic and despair that man-made laws can sometimes force upon women like me.³⁶

Clearly, many members of the community supported the feminist fight for abortion, even if they did not identify themselves as feminists, but because they knew what it

³⁴ Letters to the Editor, *Dominion*, 3 October 1974, 79-016-1/06, ATL.

³⁵ Letters to the Editor, *Evening Post*, 7 June 1975, 80-386-1, ATL.

³⁶ Letters to the Editor, *New Zealand Herald*, 3 May ?, 98-162-1/12, ATL.

was like to have an illegal abortion. This also shows that abortion was not a ‘new’ problem created by a ‘permissive society’ as anti-abortionists often claimed, but an ongoing issue that received more publicity in the 1970s because of the feminist movement as well as other factors.

There were many more letters to the editor from anti-abortionists, and they often continued to write about abortion long after other sectors of society had decided to let the issue be. Often their letters were emotive, with one writer ordering all ‘pro-abortionists’ to ‘go to your mother and say “thank you.”’³⁷ Others put forward the view that women had ‘the freedom to have or not to have intercourse, freedom to use contraceptives.’ However, once they had had intercourse they had no right to abort their ‘unborn baby’.³⁸ This writer did not mention those women who became pregnant as a result of rape or incest, nor those women whose doctors refused to prescribe contraceptives for them. Others felt that an increased abortion rate would affect the development of New Zealand, and asked, ‘without life where would be the economy?’³⁹

Opinion polls are the other indicator of public opinion. They are more reliable than letters to the editor, which tend to represent the extreme views held by a minority. A survey conducted by Stephen Levine, in 1975 showed that the majority of New Zealand voters wanted a more liberal abortion law. When asked the question, ‘would you agree with the view that a woman should have the right to an abortion if

³⁷ Letters to the Editor, *Dominion*, 2 October 1974, 79-016-1/06, ATL.

³⁸ *Ibid.*

³⁹ Letters to the Editor, *Dominion*, 11 January 1978, 80-386-2, ATL.

she wants one in the first 12 weeks of pregnancy?’⁴⁰ the majority of those questioned agreed. The responses are shown below in Table 4.

Table 4: Attitudes Towards Liberalised Abortion.⁴¹

| | | |
|------------|-----|-------|
| Disagree | 482 | 30.0% |
| Agree | 915 | 57.1% |
| Other | 160 | 10.0% |
| Don't Know | 40 | 2.5% |
| No Answer | 7 | 0.4% |

Information was also recorded based on the party the respondent had voted for in the 1975 general election. This is shown in Table 5. Interestingly, there was no significant difference on abortion views across political parties, with the exception of the Values party. However, considering the small proportion of voters who supported Values, this difference is not as considerable as it first might appear.

Table 5: Results Distributed According to the way in which the Respondents Voted in the 1975 General Election.⁴²

| | National | Labour | Social Credit | Values |
|----------|----------|--------|---------------|--------|
| Disagree | 31.1 | 34.6 | 35.7 | 15.8 |
| Agree | 58.1 | 54.9 | 55.4 | 76.3 |
| Other | 10.8 | 10.5 | 8.9 | 7.9 |

A Heylen Poll was also conducted in May 1975, and respondents were asked, ‘In your opinion, should abortion to terminate any unwanted pregnancy be made legal, or should it remain illegal?’⁴³ It was found that 56% of New Zealanders wanted abortion available to terminate any unwanted pregnancy, and only 34% wanted legal restrictions on abortion, while 10% had no firm opinion on the issue.⁴⁴ The poll also found that the highest support for unrestricted abortion was among those of

⁴⁰ Stephen Levine & Alan Robinson, *The New Zealand Voter: a survey of public opinion and electoral behaviour*, Wellington, 1976, p.39.

⁴¹ Levine & Robinson, p.40

⁴² Levine & Robinson, p.40

⁴³ Philippa Wiggins (Heylen Research Centre) to Di Cleary (WONAAC), enclosed a copy of the findings of a Heylen Poll, p.1, 91-123-1/3, ATL.

⁴⁴ Ibid.

childbearing age. Females under 40 scored 61% in favour, those over 40 only 48% in favour. Men under 40 scored 60% and those over 40 scored 54%.⁴⁵ The change in opinion over a five-year period is shown in Table 6. Clearly during the 1970s the New Zealand public views on abortion were changing, and by 1975 most supported the liberalisation of the abortion laws.

Table 6: The Results of Three Heylen Polls Conducted on Attitudes Towards Abortion.⁴⁶

| | Sept 1970 | Nov 1973 | May 1975 |
|-------------------------|-----------|----------|----------|
| Made Legal | 46.8 | 50.9 | 55.9 |
| Remain illegal | 47.7 | 41.8 | 34.3 |
| Don't know / no opinion | 8.6 | 10.0 | 11.5 |

In this context, in 1975 the third Labour government set up a royal commission to inquire into contraception, sterilisation and abortion in New Zealand. Many feminist groups made submissions to the commission, but not without reservation.

Broadsheet made the following point:

The Royal Commission raises all the usual questions for feminists faced with male power structures. Do we make submissions to it and go through the ordeal of presenting them, or do we ignore its existence (especially since it is so powerful) and spend our energies elsewhere for better return?⁴⁷

Other organisations such as WONAAC felt that the setting up of a royal commission was unnecessary, and was only a delaying tactic on the part of the government.⁴⁸

Six members were appointed to the royal commission. The chairman was Duncan Wallace McMullin, who was a Supreme Court judge and was known to have conservative views. The only doctor appointed was Maurice Matich, who was a

⁴⁵ Ibid.

⁴⁶ Ibid.

⁴⁷ Julie Thompson, 'Editorial: The Royal Commission', *Broadsheet*, no. 36 (1976), p.10.

⁴⁸ WONAAC Press Statement, 26 June 1975, 91-123-1/2, ATL.

Roman Catholic with seven children.⁴⁹ It was generally acknowledged that these two positions were the most powerful. The third male member, Maurice McGregor was a social worker. Of the three female members, one, Denise Henare, was a recent university graduate, and practising solicitor. Barbara Thomson was a teacher and Dorothy Winstone was a member of the Auckland University Council. It was felt by some feminist groups that the women were chosen because they were unlikely to challenge the authority of the chairman and doctor.⁵⁰ WEL criticised the government for not appointing a female as the chair of the commission. The organisation believed that because subjects that the commission had to deal with concerned women more than they did men, that the majority of those on the commission should be women.⁵¹

Submissions of Women's Groups to the New Zealand Commission

Many feminist groups made submissions to the royal commission. The variety of groups making submissions shows how important the issue was to society, as well as to feminist groups. The two most important submissions were from WONAAC and ALRANZ.

WONAAC explained in its submission that their 'point of view on abortion and birth control is far from new. In practice abortion and infanticide have been the chief forms of fertility control for thousands of years, sometimes with social sanction but often despite religious teaching and laws.'⁵² It highlighted the problems that many women had in obtaining contraceptives, due to their cost, and because doctors were

⁴⁹ Jocelyn Brooks et al. *Ill Conceived: Law and Abortion Practice in New Zealand*, Dunedin, 1981, p.60.

⁵⁰ Brooks et al., p. 60.

⁵¹ 'Woman "should chair inquiry"', *Dominion*, 28 April 1975, 80-386-1, ATL.

⁵² Submission 214: WONAAC, p. 2, Box 30, Com 26, Archives New Zealand (ANZ).

not always willing to prescribe them.⁵³ WONAAC demonstrated that it was a pro-choice group rather than a pro-abortion group by asking that more services be available to women with children, such as maternity leave, accessible child care, and increasing financial support for solo parents.⁵⁴

The organisation went on to make clear that it believed there was a difference between ‘human life’ and ‘human being’. It believed that it was at birth that humans begin their lives as social entities, and it was from that point that society regards the person as a human being.⁵⁵ It also claimed that the psychological effects of abortion on healthy women were small. It stated only 2 per cent suffer clinical depression, while 10 – 15 per cent of women suffered depression after childbirth.⁵⁶ WONAAC criticised the anti-abortionists describing them as ‘self-appointed guardians of public morality’ and suggested that they ‘try to discourage extra-marital sex with punishment on the assumption that all unwanted pregnancies occur outside marriage. The idea of sex as being sinful, particularly for women, unless it is purified by forced motherhood, still bubbles beneath the surface.’⁵⁷ The group felt that using population considerations to refuse women the right not to have children, was just as abhorrent as using the excuse to refuse women the right to have children, and stated they would protest just as strongly if an attempt was made to prevent women from having children.⁵⁸

⁵³ Ibid, p.4.

⁵⁴ Ibid, p.6.

⁵⁵ Ibid, p.7.

⁵⁶ Ibid, p.8.

⁵⁷ Ibid, p.10.

⁵⁸ Ibid, p.11.

The ultimate recommendation of WONAAC was that all laws restricting access to abortion should be repealed; sections 182 to 187 of the Crimes Act and the Hospitals Amendment Act 1975. The group stated, ‘no woman wanting an abortion should be refused. This may require the setting up of special clinics and training programmes for providing the qualified staff for them. Such clinics should be part of the free medical service.’⁵⁹

ALRANZ made a submission on behalf of its nine branches in New Zealand. It also had three affiliated organisations; the Rationalist Society, the Humanist Society and the New Zealand University Students’ Association. While it was not a feminist organisation, ALRANZ accepted that a number of women’s organisations had similar objectives to its own, although they differed in their approach.⁶⁰ Like WONAAC, ALRANZ made the point that abortion was not a new phenomenon, it was a practice that had existed for at least five thousand years.⁶¹

ALRANZ made clear in its submission that it supported the work of AMAC, which was not surprising as many ALRANZ members were involved in setting up AMAC. It saw AMAC as an establishment where women were assured of high quality medical care, at an affordable price.⁶² In contrast, it criticised the fact that large numbers of women were forced to go to Australia to receive abortions, and considered this to be a ‘public health problem.’⁶³ The final recommendation from ALRANZ was that women should have access to abortion until the twelfth week of pregnancy, providing her medical adviser consented; after the twelfth week until the

⁵⁹ Ibid, p.19.

⁶⁰ Submission 455: ALRANZ, section 1.9, Box 32, Com 26, ANZ.

⁶¹ Ibid, section 4.3.

⁶² Ibid, section 7.27.

⁶³ Ibid, section 18.

stage of viability, between 20 and 24 weeks, it recommended that regulations be imposed. Once the stage of viability had been reached, abortion should only be permissible to save the life of the mother.⁶⁴

Broadsheet magazine collective in its submission to the royal commission stated that it supported the policy of ALRANZ, but not that of WONAAC which would appear to be more similar in outlook to *Broadsheet*,⁶⁵ as it was a feminist magazine, just as WONAAC was a feminist organisation. The decision to support ALRANZ may have been because it was felt that ALRANZ had a better chance of success with a moderate proposal than WONAAC had with a radical proposal. The *Broadsheet* collective saw that access to abortion was important for women because of the problems associated with contraception. In particular, the collective noted the difficulty that single women sometimes had in obtaining contraception.⁶⁶ The collective claimed that in the six months between November 1974 and May 1975, 'failed oral contraception was the reason for pregnancy in 12 per cent of the terminations at the Auckland Medical Aid Centre,'⁶⁷ showing that some women who decided to have abortions had been using contraceptives. *Broadsheet* recommended that 'abortion should be legal when performed by a registered medical practitioner with the consent of the woman. There should be no further considerations involved other than the consent of the abortion practitioner and the woman concerned.'⁶⁸ This was despite stating early in their submission that they supported the policy of ALRANZ.

⁶⁴ Ibid, section 18.

⁶⁵ Submission 127: *Broadsheet Magazine Collective*, p.1, Box 28, Com 26, ANZ.

⁶⁶ Ibid, p.1.

⁶⁷ Ibid, p.3.

⁶⁸ Ibid, p.2.

The Auckland branch of NOW also made a submission stating: we hold that it is a fundamental right of a woman to follow the dictates of her own conscience in making a decision regarding the termination of her own pregnancy.⁶⁹ However, they were careful to point out that efforts should be made to enable women to raise children more easily and in particular, financial support should be available to those who needed it.⁷⁰ The group felt that abortion was a choice of conscience, and outlined certain situations where they felt that abortion should always be available. These included when contraception had failed, when the girl had been made pregnant by rape or incest, and when there were indications that the baby was subnormal or there was danger to the life of the mother.⁷¹

Two women, Diane Roberts and Elizabeth Sewell who belonged to ALRANZ in Christchurch made their own submission to the commission. Again they reiterated the view that, ‘the abortion decision should be made by the woman and her doctor with sympathetic independent counselling available.’⁷² They went on to explain that because their names were associated with ALRANZ they, along with other members of the organisation were often contacted by women who required help with their unwanted pregnancies. Roberts and Sewell wrote, ‘this situation is an indictment of society when desperate women are forced to ring anonymous people in their search for help.’⁷³ They also explained that before AMAC opened most Christchurch women had to travel to Australia for abortions.⁷⁴

⁶⁹ Submission 238: NOW Auckland, p.7, Box 30, Com 26, ANZ.

⁷⁰ Ibid, p.8.

⁷¹ Ibid, p.8.

⁷² Submission 471: Mrs D Roberts and Ms E Sewell, p.1, Box 33, Com 26, ANZ.

⁷³ Ibid, p.1.

⁷⁴ Ibid, p.4.

KNOWHOW, an organisation from Dunedin, provided a free information and referral service on contraception, pregnancy and abortion.⁷⁵ The group stated that their goal was for every child to be a wanted child, in order to maximise the quality of life for society as a whole.⁷⁶ The organisation recommended that the law relating to abortion be repealed and that clinics similar to AMAC be established in all main centres and be funded by the state.⁷⁷

Not all the women's groups that made submissions to the commission were the product of second wave feminism. The National Council of Women (NCW) was one such group. The organisation made it clear that its submission was not a statement of its policy.⁷⁸ The group did not have a policy on abortion because it believed that it would be impossible to come to a consensus view on abortion because the organisation represented such a wide variety of people.⁷⁹ Table 7 shows on what grounds the 666 members of the NCW who replied to the survey thought abortion should be legally permitted.

Table 7: Grounds on which Abortion should be Permitted According to NCW Members.⁸⁰

| | |
|---|-------------|
| a) In no circumstances | 105 (15.8%) |
| b) If there is a serious threat to the health of the pregnant woman (eg heart disease, asthma, kidney disease, high blood pressure) | 555 (83.3%) |
| c) If there is a serious threat to the psychological health of the pregnant woman | 481 (72.2%) |
| d) In the case of a mentally retarded woman | 509 (76.4%) |
| e) In the case of an insane pregnant woman | 507 (76.1%) |
| f) If there is a serious threat to the health of the foetus (eg Downs Syndrome, German Measles, use of drugs) | 499 (74.9%) |
| g) If the pregnancy is the result of rape | 515 (77.3%) |
| h) If the pregnancy is the result of incest | 500 (75.1%) |

⁷⁵ Submission 141: Knowhow, p.1, Box 28, Com 26, ANZ.

⁷⁶ Ibid, p.4.

⁷⁷ Ibid, p.6.

⁷⁸ Submission 116: National Council of Women, p.3, Box 28, Com 26, ANZ.

⁷⁹ Ibid, p.14.

⁸⁰ Ibid, pp. 14 - 15.

Another group that claimed to be a feminist organisation, but did not support abortion law reform was Feminists for Life. Their Wellington branch made a submission which began with the statement:

The views held by Feminists for Life on the question of abortion are determined by the status of the unborn child. Our group holds that it is an indisputable fact that the unborn child is a human being from the moment of conception.⁸¹

The organisation felt that readily available abortion would make it easier for men to exploit women sexually. They gave the example of the Playboy Corporation in the United States funding abortion clinics. Finally the group felt that feminism was based on the idea that women have independence and inner strength and therefore should be able to deal with an unplanned pregnancy and childbirth, rather than 'resorting' to abortion.⁸² Connie Purdue, the most prominent member of Feminists for Life stated that the change in public opinion towards abortion was encouraging women to have abortions. Purdue believed that the change had been recent, and stated:

Before this the depression, pregnancy sickness, and upset perhaps by the whole family at an unplanned pregnancy, would not have occasioned a pregnant mother to consider an abortion. Within a few weeks she would have accepted her conditions, as would the family, and begun to look forward with pride and pleasure to her baby's arrival.⁸³

Purdue felt that if feminists wanted control over their bodies, they also had to respect the bodies of others, and in her view this included 'unborn children' who she pointed out had a 50 per cent chance of being female.⁸⁴

The North Shore branch of Feminists for Life felt that because feminists were demanding that men become actively involved in raising children, it was contradictory to exclude them when it came to the decision whether or not to have an

⁸¹ Submission 248: Feminists for Life (Wellington), p.1, Box 30, Com 26, ANZ.

⁸² Ibid, p.1.

⁸³ Submission 432: Mrs Connie Purdue, p.2, Box 32, Com 26, ANZ.

⁸⁴ Ibid, p.2.

abortion.⁸⁵ They stated clearly that ‘we reject the contention that abortion is a women’s affair.’⁸⁶ They also asserted as many anti-abortion groups did (and still do) that New Zealand was different ‘in the good old days’ before there was abortion. However, this nostalgic past was fictional. Feminists for Life claimed:

New Zealand society was one our grandparents thought would be one where every child regardless of its capabilities or the circumstances of birth could be welcomed, cared for and loved.⁸⁷

This comment was particularly ironic given the early twentieth century practices of institutionalising the ‘defective’. Abortion has always existed in New Zealand, and there is no evidence to suggest that people in the early twentieth century were any more overjoyed at the arrival of an unplanned child than those in the later half of the century.

Release of the Report

The release of the report of royal commission in April 1977 provoked much controversy due to its conservative nature. Many feminists felt the report reflected the fact that SPUC had spent \$30,000 to \$40,000 presenting its submission and having lawyers cross-examine other groups. *Broadsheet* described the report:

The essence of the Royal Commission report is that women, be they ever so young or ever so old, must be forced to carry through all and every pregnancy regardless of their personal or family situation – unless of course they are mentally retarded in which case they may be aborted and should be forcibly sterilized. This was exactly the policy pursued in Nazi Germany under Adolf Hitler.⁸⁸

Women were also aware that the government had spent over \$250,000 on the commission, and so would be unlikely to ignore its findings, particularly when the majority of members of parliament held conservative views, similar to those in the report. Helen Mulrennan at the United Women’s Convention’s workshop on abortion

⁸⁵ Submission 314: Feminists for Life (North Shore), p.1, Box 30, Com 26, ANZ.

⁸⁶ Ibid, p.2.

⁸⁷ Ibid, p.14.

⁸⁸ ‘Stop Press’, *Broadsheet*, no. 49 (May 1977), p.9.

stated that, ‘the report was biased, constituted a major assault on woman’s rights to control their own reproduction, and was part of the campaign against the women’s liberation movement.’⁸⁹ Feminists criticised the ways in which the hearings had been conducted. They considered them too formal. For instance, the public had to stand when the commission members entered the room, and then they sat in a row on a level raised above the public. This they believed was a difficult setting for women to give personal information, such as their experiences of having an abortion.⁹⁰

The commission recommended that abortion only be available when the life, physical or mental health of the woman was at risk, and could not be averted by any other means. It also recommended that abortion be available when the pregnancy was the result of incest, when the mother was subnormal or when tests showed that the child was going to be severely subnormal. Rape was not an immediate ground for an abortion, although it could be taken into consideration when evaluating mental health. The commission also recommended the formation of abortion panels to decide whether a woman should have an abortion or not.

The commission’s report made many claims that do not seem to fit with its overall recommendations, showing an inconsistency between the body of its report and the recommendations it made to parliament. Despite providing limited grounds on which abortions could be performed, as well as designing a system that made it difficult for women to have an abortion even where they were legally entitled to one, the commission acknowledged that ‘a woman who is determined to obtain an abortion will pursue her purpose, particularly where she is unmarried or not living in a stable

⁸⁹ ‘Abortion report “rotten”’, 89-326-1/03, ATL.

⁹⁰ Brooks et al., p.61.

relationship.’⁹¹ After acknowledging this, it would seem irresponsible of the commission to try and restrict access to safe legal abortion, because as it acknowledged the law would not stop a woman from having an abortion.

In other sections of their report, the commission undermined women, and suggested that they could be unreasonable, particularly when pregnant. The commission explains:

It is well accepted medically that in the first trimester of pregnancy women undergo biological changes as a result of which some suffer from anxiety, insomnia, and emotional outbursts. Others may not be affected in this way. It would be wrong, on the view which we have taken of the status of the unborn child, to terminate a pregnancy because of some psychological stress which was relatively short in duration or of relatively mild intensity.⁹²

The commission also refused to take seriously the complaints that women made about the medical profession, stating that it ‘fully appreciates that women who have suffered stress may not be objective in giving details of their personal experiences and that some complaints of this nature may have little foundation in fact.’⁹³ This shows a privileging of the medical profession over women. It made no acknowledgement of the claims that did have foundation in fact.

Perhaps the most revealing part of the report, as far as the commission’s attitude to women was concerned, is that relating to abortion in the case of rape, incest and where the woman was subnormal. The commission believed that rape should not be a grounds for abortion, although it could be taken into account when evaluating mental health, because women would lie and say that they had been raped when they had not in order to obtain an abortion. Instead the commission offered the following solution:

⁹¹ Royal Commission on Contraception, Sterilisation and Abortion, *Contraception, Sterilisation and Abortion in New Zealand: Report of the Royal Commission of Inquiry*, Wellington, 1977, p.260.

⁹² *Ibid*, p.270.

⁹³ *Ibid*, p.316.

The plight of women who are fearful of pregnancy following on rape can be better met by ensuring that either the "Morning-after Pill" or some form of intra-uterine device, such as the "Copper-7", is made available to women and girls who complain of recent rape.⁹⁴

However, when it came to incest the situation was very different according to the commission who felt that '[no] sanctity can be attached to a pregnancy which has resulted from a father taking advantage of his daughter.'⁹⁵ They were also concerned about the increased risk of genetic disorder. Again when it came to women who were subnormal, it was felt that no status could be attached to their pregnancies.⁹⁶ No explanation was given as to why status could be attached to a pregnancy which resulted from rape, but not from incest, or where the mother was subnormal. This decision shows how eugenic thought had continued throughout the twentieth century, as well as the domination of population policy over women's rights. Because there was an increased chance of genetic disorders occurring in pregnancies resulting from incestuous relationships, abortion was allowed; whereas there was no similar concern with pregnancies resulting from rape.

The commission also recommended that women's control over their bodies be further restricted by allowing married women's husbands the right to be consulted when their wives were pregnant. It believed that the father had an interest and a responsibility in the life of the 'unborn child.'⁹⁷ It made no mention of the rights and responsibilities of men who were not married.

Perhaps the most controversial recommendation of the commission was that which supported panel systems. The commission asked, 'what system will best ensure

⁹⁴ Ibid, p.213.

⁹⁵ Ibid, p.214.

⁹⁶ Ibid, p.215.

⁹⁷ Ibid, p.276.

uniform, objective, and efficient working of the abortion laws in which counselling is given a proper place?’⁹⁸ They did not ask what would be the least stressful and humiliating for the woman. The panel system was problematic. Panels were unlikely to have anyone on them that the woman would know, or who would know the woman, and without this knowledge, it would have been difficult to evaluate the impact that a continued pregnancy would have on her mental health.



Figure 1: ‘Women Beware – Babies by Force’, depicts a man dominating the royal commission, shown as a woman. EPH-C-ABORTION-1970s, ATL.

⁹⁸ Ibid, p.290.

The women's studies literature discusses the period when the report of the commission was released. Molloy states:

There was a conflict between a representation of women as rational human beings choosing to control their lives (made by those favouring liberalisation of abortion law), and that of women as irrational, emotional and unable to make informed judgments.⁹⁹

This view was supported by a number of other writers. It was thought that the right of the foetus was given too much emphasis, and the rights of women were given too little. Molloy goes on to explain, 'the fetus [sic] becomes the fully-formed human being, while the woman is demeaned to the status of temporary accommodation or appropriate environment. The fetus [sic] is anthropomorphised while the woman is dehumanised.'¹⁰⁰ Molloy sees that rights of the foetus as being over-emphasised because she does not think that the foetus is a human being, whereas the mother is a full human and so her rights should dominate.

The Australian Royal Commission

The royal commission into human relationships was set up by the Australian federal government in May 1973, as a response to the debate surrounding a bill that would have legalised abortion in the Australian Capital Territory (ACT). The House passed a proposal to set up a royal commission into human relationships sponsored by two opposition members, J M Fraser (Liberal) and A F Andermann (Country Party). A free vote was allowed and the proposal passed by 85 votes to 11.¹⁰¹

The royal commission began its hearings in Sydney on 6 November 1974. Three commissioners were appointed; Justice Elizabeth Evatt was the chairperson,

⁹⁹ Maureen Molloy, 'Rights, Facts, Humans and Women: An Archaeology of the Royal Commission on Contraception, Sterilisation and Abortion in New Zealand', *Women's Studies Journal*, 12:1 (1996), p.73.

¹⁰⁰ Molloy, p.78.

¹⁰¹ 'Inquiry to look at sexual relationships', *Australian*, 14 September 1973, Scrapbook XVI, MLMSS 7012/6, ML.

and the other two commissioners were Dr Felix Arnott, an Anglican bishop who worked in the 'slums' of Sydney and Anne Deveson, a journalist who had often spoken about women's rights.¹⁰² Its terms of reference were:

To inquire into and report upon the family, social, educational, legal and sexual aspects of male and female relationships; so far as those matters are relevant to the powers and functions of the Australian Parliament and Government, including powers and functions in relation to the Territories.¹⁰³

However, Justice Evatt complained that the commission did not have enough staff to carry out the necessary research.¹⁰⁴ Deveson, who later wrote a book about the commission, also complained of inadequate funding and a deficient administration system.¹⁰⁵ The final report was presented on 22 November 1977, in the middle of the federal election campaign.¹⁰⁶

The commission received 1264 written submissions,¹⁰⁷ from which they produced a five volume report. Abortion was only one of many topics addressed, but it received a substantial amount of attention because it was the issue which provoked the founding of the commission in the first place. The commission acknowledged that the best people to decide whether a woman should have an abortion or not were the woman and her doctor. The commission also recognized that, 'the life and health of the foetus are totally dependent on her and her decision is not taken lightly. The reasons given by women for seeking abortions are not irresponsible but suggest a genuine concern for the future.'¹⁰⁸ The commission recommended that all terminations take place in the first trimester, but at the same time commented, 'in an

¹⁰² Janna Thompson, 'Human Relationships Commission Report', *Scarlet Woman*, no .7 (1978), p.7.

¹⁰³ Royal Commission on Human Relationships, *Final Report*, Canberra, 1978, vol. 1, p.ix.

¹⁰⁴ 'Call or help on human relations inquiry' *Australian*, 26 August 1975, Scrapbook IXX, MLMSS 7012/6, ML.

¹⁰⁵ Anne Deveson, *Australians at Risk*, Stanmore, 1978, p.12.

¹⁰⁶ Deveson, p.1.

¹⁰⁷ Royal Commission on Human Relationships, vol. 1, p.17.

¹⁰⁸ Royal Commission on Human Relationships, vol. 3, p.155.

ideal situation there would be no need to set limits on abortion, as it would always be done early except where a risk to the mother arose or diagnosis of fetal defect occurred later.¹⁰⁹

Not only did the commission recommend liberal grounds for abortion in Australia, but it also suggested changes to the system of providing abortion services to women. The commission recommended free-standing abortion clinics rather than providing abortion services in hospitals for a number of reasons. First, an abortion clinic would not employ staff who were opposed to abortion and so staff attitudes would be supportive. Second, staff were given the opportunity to develop specialist skills in one area, making the operations more safe. Finally, counsellors with special training would be available to help women.¹¹⁰ The commission also noted that cities were provided with better services than country areas. In a country of Australia's size this was a particularly important factor to consider. The commission stated:

In our view country hospitals have an obligation to provide adequate abortion services by organising staff training and providing facilities, counselling and contraceptive services. We consider that guidelines should be established for these services and areas of need identified, particularly among remote and rural communities.¹¹¹

This area of emphasis is interesting because feminist organisations did not often pay attention to women living outside of Sydney. They acknowledged the women flying to Sydney from Queensland to have abortions, but not those who had to travel within the state.

Feminist groups displayed mixed reactions to the human relationships report. No indication had been given by either the federal government or the NSW state

¹⁰⁹ Ibid, p.162.

¹¹⁰ Ibid, p.176.

¹¹¹ Ibid, p.190.

government that recommendations from the report would be put into practice, and so the report was not accorded the status that the royal commission report in New Zealand was. *Scarlet Woman*, a feminist magazine dismissed the report accordingly:

most people in Australia, especially women, would undoubtedly be better off if their recommendations were implemented. But they won't be. Not if the governments and institutions which the Commission addresses are left to themselves. Government ministers have already stated that they intend to ignore the report. Before the election, Fraser dismissed it as "Whitlam's Report."¹¹²

Despite the fact that the recommendations of the report would not be enacted, those in the feminist movement found the recommendations to be a step forward. Again, *Scarlet Woman* commented, 'the chief value of the report to people in the women's movement is that it provides a certain amount of legitimacy to ideas that are still being dismissed as 'extremist'. Added to this, it is a humane and sensible, and sometimes inspiring document.'¹¹³ Due to the lack of impact the report had on the government of NSW, it does not occupy an important place in the fight for abortion law change in that state.

Comparison Between the Two Commissions

There were a number of important differences between the royal commission in New Zealand and its Australian counterpart. Ultimately, the commission in New Zealand had more of an impact because politicians were willing to implement its recommendations in legislation, whereas in Australia the federal government was not. Also, it is debatable as to how many of the recommendations the federal government could have implemented, and how many state governments would have had to implement. This was because the Australian Constitution granted each state responsibility for its health policy.

¹¹² Janna Thompson, 'Human Relationships Commission Report' *Scarlet Woman*, no. 7 (1978), p.8.

¹¹³ *Ibid*, p.10.

One major difference between the commissions was their flexibility and accessibility to the public. The commission in Australia travelled to all the capital cities, as well as many country towns to hear submissions. They also travelled all over Western Australia and the Northern Territory to hear evidence, and this involved flying through remote inland settlements. In addition, they went to schools, abortion clinics and Aboriginal settlements.¹¹⁴ Despite this, the commissioners did acknowledge that they did not contact enough Aboriginal people or migrants.¹¹⁵ Likewise, the New Zealand commission, who also travelled but not as widely, acknowledged that it did not receive enough submissions from Maori and Pacific Islanders. However, the difference between the two was that no attempt was made by the New Zealand commission to have any contact with any of those groups.¹¹⁶ Moreover, the New Zealand commission was criticised for being too formal in its approach, and thereby reducing the number of people willing to make submissions to it.

The other major difference between the two commissions lay in their recommendations for changes to the abortion law. The Australian commission recommended a liberalisation of the law, while the New Zealand commission recommended restricting the law. In addition, the New Zealand commission recommended implementing a panel system to decide whether women should have abortions or not. In contrast, the Australian commission criticised panel or referee

¹¹⁴ Deveson, p.5.

¹¹⁵ Janna Thompson, 'Human Relationships Commission Report' *Scarlet Woman*, no. 7 (1978), p.8.

¹¹⁶ ALRANZ, *Critique of the Report of the Royal Commission of Inquiry into Contraception, Sterilisation and Abortion in New Zealand*, Wellington, 1977, p.4.

systems, and even went so far as to state that it was unnecessary for a second medical opinion to be obtained.¹¹⁷

The Change in the New Zealand Law

The next attempt to change the abortion law after the Hospital Amendment Act 1975 was made by National MP, Frank Gill in 1976. His Health Amendment Bill was designed to restrict access to abortions. However, he introduced it into parliament before the royal commission had completed its report. Originally the bill was set aside until the commission submitted its report. Then in September 1976, parliament voted 41 to 33 to delay the bill for a year.¹¹⁸ WONAAC was happy that the bill did not pass a second reading in parliament, but it was unhappy about the deferment of the bill, and felt that it should have been thrown out, rather than having a ‘messy compromise.’ It was also critical of AMAC and ALRANZ for offering to discourage the establishment of any more abortion clinics in New Zealand until the law had been clarified. WONAAC saw this as a betrayal.¹¹⁹

The Contraception, Sterilisation and Abortion Bill was introduced into parliament by the Minister of Justice, David Thomson in August 1977. It was based on the recommendations of the royal commission. Feminist and liberal abortion groups reacted strongly. WONAAC stated that, ‘it is inconceivable ... that legislation giving effect to the recommendations of the royal commission on contraception, sterilisation and abortion has been introduced to parliament when criticism of those

¹¹⁷ Royal Commission on Human Relationships, p.158.

¹¹⁸ ‘Gair active in move to sink Gill bill’, *Dominion*, 3 September 1976, 91-123-1/3. In Gustafson’s biography of Muldoon he claims that it was the bill drafted by Gill that was passed. This is not the case. The CSA bill was drafted by David Thomson in his role as Minister of Justice. (Gustafson, p.197).

¹¹⁹ WONAAC Press Statement, 2 September 1976, p.2, 91-123-1/3, ATL.

recommendations has been so widespread and so strong.’¹²⁰ A national meeting of abortion activists was held on 21 August 1977 in Wellington to design a plan for the feminist campaign against the legislation. It was decided that the royal commission’s report had confused many people and that it was important to educate people about the recommendations and the impact that they would have.¹²¹ The New Zealand Maori Council also criticised the bill, as it saw it as a threat to the standard of health care for Maori. It recommended that extremes of age, rape and socio-economic factors should be recognised as criteria for abortion.¹²²

The views of parliamentarians became widely known, due to the fact that they all had the opportunity to express their point of view during the extensive debates that were held on the bill. Two of the most well known supporters of the restrictive abortion bill were Robert Muldoon and Gerald Wall. Muldoon made the following contradictory statement:

I suppose the activities of the Auckland abortion clinic have brought home to us the fact that those who are prepared to put an extremely liberal interpretation on the law will find, in the event of a prosecution being brought, that no jury will convict them. At that point we have a law that is effectively far more liberal than many New Zealanders either believe it should be or are prepared to tolerate – and I am one of those many New Zealanders.¹²³

He did not explain why, if many New Zealanders thought that the abortion laws should be less liberal, no jury would convict someone for performing an abortion.


¹²⁰ WONAAC Press Statement, 19 August 1977, 91-123-2/1, ATL.

¹²¹ WONAAC Press Statement, 21 August 1977, 91-123-2/1, ATL.

¹²² ‘Maoris Condemn “Restrictive Abortion Criteria”’, *Evening Post*, 19 September 1977, 91-123-2/1, ATL.

¹²³ NZPD, 1977, 414, p.3525.

**WANTED
FOR WOMEN!**



THIS MAN'S VOTE!

This man is one of your elected representatives.

He can vote for State Control of abortions through the Statutory Committee and its appointed panels or he can vote for a woman's right to decide for herself whether she needs an abortion.

Tell your M. P. you do not want the Statutory Committee or the panel system.

★ Write to him at the address below or c/o Parliament Buildings, Wellington.
★ Ring him today!

Lange 863-309

A WOMAN'S WOMB IS PRIVATE PROPERTY!

This poster was conceived by C.O.R.A.L. / Produced by CoAction Box 68598 Auckland

Figure 2: 'Wanted for Women. This Man's Vote!', shows David Lange being targeted as an MP who had the power to vote on the Contraception, Sterilisation and Abortion Bill. Similar posters of other MPs were distributed. EPH-C-ABORTION-1977, ATL.

Gerard Wall used his position as a doctor to make emotive statements, which might have carried more weight with the public because of his medical authority. For example:

We are here to decide whether that little boy – and it is a little boy – should be sucked out through a sucker. That is not emotion; it is the hard cold fact of what we are discussing – whether that little boy, or a little girl, should be sucked out through a sucker.¹²⁴

These were the sorts of arguments feminists had to deal with when they were explaining why abortion laws should be liberalised. Rational debate was impossible given that the question of abortion engendered such responses.

Other parliamentarians took a much more liberal approach. George Gair, a senior National MP, and someone considered to be the leader of the liberal MPs on the abortion matter, advanced the following argument:

I would urge upon the House a realisation that any move which destroys or ends the Aotea Hospital will not solve the problem of abortions; it will not solve the problem of unwanted or rejected pregnancies. The problem of handling abortions is much easier when we face reality, are prepared to bring the problem out into the light, and tackle it in the light of day.¹²⁵

This argument was common among those whom supported a liberalisation of the abortion laws, rather than their repeal. These people were concerned with limiting the need for abortions, rather than limiting access to abortion. Another liberal, Robert Tizard, a senior Labour MP, suggested a limitation that would have been opposed very strongly by feminists had it become law. He stated:

I would place a limitation on [abortion] and discriminate between the rights of a single woman and the rights of a married woman to have an absolute choice in what she does. I accept that any single woman, whether she is widowed, divorced, separated, or has never married, should have an absolute choice. A married woman, however, has entered into a contract with her husband, and I do not think I am being a chauvinist when I say that the two have equal rights.¹²⁶

¹²⁴ NZPD, 1977, 414, p.3546.

¹²⁵ NZPD, 1977, 414, p.3529.

¹²⁶ NZPD, 1977, 414, p.3543.

This shows that even liberal MPs could have much more conservative views than feminists, and that these women had few ‘true’ representatives in parliament. Perhaps the two most feminist minded MPs were Whetu Tirikatene-Sullivan and Marilyn Waring. Tirikatene-Sullivan criticised parliament for being so concerned about unborn children, when so little support was offered to children who already existed.¹²⁷

She also made the following statement:

The Bill has clauses that contravene a woman’s personal liberty, because freedom from unwanted reproduction is the very essence of women’s equality. The Bill does not acknowledge a woman’s right to determine her own maternity – that is, to control her reproduction potential. The oppression of woman is derived from her womanness. Her biological difference has been used to build social structures and a supportive ideology of female submission – an ideology so entrenched that woman herself has come to believe it.¹²⁸

Marilyn Waring was allocated less speaking time to discuss the bill, and she also chose a different approach. She tried arguing on a factual basis. She announced to parliament that ‘since 1947 there have been 35 royal commissions in New Zealand, and no legislative action has directly emanated from any one of them until this time.’¹²⁹ However, her point was ignored. Parliament had to deal with the abortion laws, and the Contraception, Sterilisation and Abortion Bill seemed to have more support than any other proposed legislation.

While the bill that Thomson introduced was based on the royal commission’s report, there were several amendments made to that bill, and the result was something quite different from what the commission had recommended; so much so that three of the six commissioners publicly denounced the legislation. The social worker, Maurice McGregor, had criticised the report, in particular the recommendation to establish

¹²⁷ NZPD, 1977, 414, p.3550.

¹²⁸ NZPD, 1977, 412, p.2367.

¹²⁹ NZPD, 1977, 414, p.3580.

panel systems even before the legislation was drawn up.¹³⁰ He continued his criticism of the legislation once it had been passed into law. Dorothy Winstone criticised parliament for not looking at the intent of the commission's recommendations, while Barbara Thomson was concerned that fetal abnormality had been removed as a ground for termination.¹³¹

Other amendments to the act were suggested, but were not taken up. Richard Prebble, the Labour MP for Auckland Central, suggested a delay on implementing the Act until a referendum was held. WONAAC felt that this was just a further delaying tactic, designed to draw attention away from parliament while they were debating the bill.¹³²

While the amendment introduced by Bill Birch, a National minister and influential member of Muldoon's inner circle, known as the 'Birch amendment', removed the much disliked 'panel system', it was met with strong criticism from feminists. WONAAC commented, 'the passing of the Birch Amendment is an outrage. The future for New Zealand women is grim. For the few women who can obtain abortions under the proposed law, there are thousands who will have to resort to backstreet abortions, or if they can afford it, a trip to Australia.'¹³³ Birch replaced the panel system with certifying consultants who were no better according to the feminist groups. Any woman wanting an abortion would have to seek the approval of two certifying consultants before the abortion could take place. It was also felt that the panel system had been changed because of strong opposition from doctors rather than

¹³⁰ 'Royal Commission Member's Vote Surprises', *Evening Post*, 6 June 1977, 91-123-2/1, ATL.

¹³¹ 'New Abortion law distressing to royal commission members', *Evening Post*, 19 December 1977, 80-386-2, ATL.

¹³² WONAAC Press Statement, 8 December 1977, 91-123-2/1, ATL.

¹³³ WONAAC Press Statement, 14 December 1977, 91-123-2/1, ATL.

because of the impact that it would have on women: the New Zealand Medical Association had announced its opposition to the panel system.¹³⁴

The entire passage of the bill through parliament had been surrounded in controversy and strong emotions, and its passing was no different. On 13 December 1977, Muldoon announced to parliament that the CSA Bill would be promoted to the top from number 23 on the order paper. Parliament had been told previously that the bill would not be considered again until the new year. Some felt that this was a trick by the conservatives as 11 liberal MPs were away, and could not return until after the third reading, while only three conservative MPs were absent.¹³⁵ Gustafson claims that Muldoon wanted the bill dealt with quickly, and before the end of 1977, as 1978 was an election year and he did not want his party divided in an election year.¹³⁶ Yet this justification does not explain why the abortion bill was ever placed at number 23 on the order paper to begin with. Moreover, the House sat continually for over thirty hours during the passage of the bill, and not surprisingly many MPs fell asleep. Others were in a state of exhaustion. Members of the public were concerned by the fact MPs were not in a fit state when they were voting on such important legislation.¹³⁷ Many MPs were unable to remember how they had voted on certain amendments. For example, Robert Muldoon stated to the press that he was unhappy about an amendment that prevented women having a termination when the foetus had serious abnormalities, and another which removed the immediate right of women who had

¹³⁴ 'Medical Association slams panel abortion proposal', *Dominion*, 18 August 1977, 80-386-1, ATL.

¹³⁵ 'Bill's Promotion floors House', *Press*, 14 December 1977, 89-326-1/20, ATL.

¹³⁶ Gustafson, pp. 197 - 198.

¹³⁷ Letters to the Editor, *Dominion*, 9 January 1978, 89-326-1/20, ATL.

been raped from having abortions. Despite this, Muldoon was absent from the House when the two issues were being voted on.¹³⁸

The new law made the procedure for obtaining an abortion far more complicated than it had been previously. First, a woman had to acquire a referral from her general practitioner. Then two certifying consultants had to approve of her termination. If this were done, a certificate would be issued. Doctors had to apply to become certifying consultants, and doctors with extreme views, either conservative or radical, were not supposed to be consultants. One of the consultants had to be an obstetrician or a gynaecologist. The woman then had to find someone who was willing to perform the operation, in either a public or a private hospital. Clearly, women in rural areas were at a disadvantage as there would not be as many certifying consultants, and in many cases districts had no consultants, so travel was required to obtain the certificate.

The passing of the Contraception, Sterilisation and Abortion Act had an immediate impact on AMAC. It was closed, and the 100 women who had appointments at the clinic in the week before Christmas and in January 1978 had few alternatives. A trustee of the clinic, Reg Clough stated that the clinic had to close because it had always operated within the law, and it would be acting illegally if it stayed open.¹³⁹

¹³⁸ 'PM missed key votes on abortion', *Christchurch Star*, 20 December 1977, 89-326-1/20, ATL.

¹³⁹ 'Final-day rush as abortion clinic closes', *Press*, 17 December 1977, 89-326-1/20, ATL.

Reaction to the Contraception, Sterilisation and Abortion Act

Many groups in society were horrified when the abortion law was passed. Opposition was varied and did not just include those who wanted the abortion law reformed. It also included medical professionals who believed that women would obtain abortions regardless; the only difference would be the way in which the abortions were performed. In addition, legal experts felt that the law was unclear. Many were concerned about the fact that parliament had sat for thirty hours straight to pass the law.

A campaign was organised to lead the opposition to the new abortion laws. It was named REPEAL, and sought to petition parliament to have to have the abortion laws repealed. No alternatives to the law were suggested in order to avoid factionalism.¹⁴⁰ Several MPs were involved in the REPEAL campaign, including Marilyn Waring, Jim McLay, George Gair, Martyn Finlay and Warren Freer. The Mayoresses of Auckland and Christchurch supported the campaign for repeal of the 1977 Act, and Judith Hay, the Mayoress of Christchurch, encouraged women to rally round government minister George Gair, who had led the opposition to the law.¹⁴¹ Feminists supported the repeal campaign, and collected signatures for the petition in shopping malls and other public areas.¹⁴² While the petition gathered almost 320,000 signatures, the petition committee in parliament recommended that it be referred 'for consideration'. This was the second lowest rating a petition could be given, and usually resulted in no government action.¹⁴³ This was a big blow for the repeal

¹⁴⁰ Warwick Roger, 'Repeal: "Real womanpower in politics"', *Christchurch Star*, 3 June 1978, 9-326-1/20, ATL.

¹⁴¹ 'Mayoress urges women to "get behind Mr Gair"', December 1977, Item 39, Folder 47, Box 12, ARC 1993.4, CM.

¹⁴² 'Repeal', Item 39, Folder 47, Box 12, ARC 1993.4, CM.

¹⁴³ 'No action on huge Repeal call', *Hawkes Bay Herald Tribune*, 24 August 1978, MSX-2795, ATL.

campaign, especially when they had such a wide base of support. Groups such as the National Council of Women, a generally conservative group, the Labour Party Women's Conference, the National Party Women's Representatives and the General Practitioners' Society supported the repeal campaign.¹⁴⁴

There were other forms of protest made by feminists, wanting to show their views on the new legislation. In April 1978, at the National Party Annual General Meeting in Huntly, women picketed the local candidate, William Birch. They held signs that read, 'democracy is dead,' and 'a vote for Birch is a vote for the abortion bill'. Some National Party members argued with the women that the legislation was workable and reflected the views of the majority of New Zealanders.¹⁴⁵

Problems continued with the implementation of the new law. The Abortion Supervisory Committee (ASC) was set up to oversee the implementation of the law and to issue certificates to certifying consultants. In February 1978, the Committee wrote to about 5000 doctors asking them if they would be willing to act as certifying consultants. Only 200 doctors replied, and of these 50 refused. This meant only three per cent of doctors were willing to act as certifying consultants, and Wellington and Christchurch were the only cities with enough suitable doctors willing to act in this capacity.¹⁴⁶ The ASC was to report to parliament each year. In April 1979, ten consultants received letters from the chair of the committee, Augusta Wallace, which stated that they had a high rate of abortion approvals and that they must be interpreting the law too liberally. Three doctors resigned because of this letter.¹⁴⁷

¹⁴⁴ 'NCW finds change on abortion issue', Item 39, Folder 47, Box 12, ARC 1993.4, CM.

¹⁴⁵ 'Picketers Greet Mr Birch at National Party Meeting', *Huntly Press*, 5 April 1978, 91-123-2/2, ATL.

¹⁴⁶ 'Doctors snub abortion consultant call', *Dominion*, 23 February 1978, 91-123-2/1, ATL.

¹⁴⁷ 'Abortion quota system feared', 28 April 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

Doctors with a low rate of approval did not receive a letter. However, despite this concern with the abortion rate of individual doctors, abortions for the year 1 April 1978 to 31 March 1979 had dropped 45 per cent compared with the previous year.¹⁴⁸ This was a significant decrease. In reality many women were travelling to Sydney and Melbourne for abortions, so the law was only decreasing the number of abortions performed in New Zealand, rather than the number of abortions performed on New Zealand women.

Conclusion

The royal commissions in both Australia and New Zealand provided an opportunity for groups wanting to liberalise the abortion laws to express their opinions. However, in Australia the recommendations of the commission were ignored, and in New Zealand the recommendations were followed, but they were conservative recommendations. The difference between the two states was that this public debate was carried into parliament much more in New Zealand than it was in NSW, and it was this fact that explains why two similar states with initially similar laws on abortion ended up with very different abortion laws. By appointing a conservative royal commission and then committing itself to enacting its recommendations, the government in New Zealand created a scenario where the end result would be a restrictive abortion law. The New Zealand legislation which followed the commission's report was responded to with loud protests from feminist groups. However, no change was made to the legislation, and although there have been small amendments since 1977, the essence of the legislation remains the same. While the law change in New Zealand temporarily decreased the number of abortions

¹⁴⁸ 'Abortion fall after changes to law', *Press*, 19 May 1979, Item 40, Folder 47, Box 12, ARC 1993.4, CM.

being performed in New Zealand, it did not have such a significant impact on the number of abortions being performed on New Zealand women who were travelling to Australia for abortions. It would be fair to blame the problems resulting from this travel for the women involved on the 1977 Act, especially because politicians were aware that women needing abortions would go to Australia to have them if necessary.

Chapter Four:

The Trans-Tasman Abortion Service

During the 1970s New Zealand women had to travel to Australia for abortions. This was because either abortion was illegal, or appropriate services were not available. This trans-Tasman abortion service falls into two periods; before and after the passing of the 1977 Contraception, Sterilisation and Abortion Act. Groups in New Zealand who worked hard to help women go to Australia were supported by feminist groups in Australia, particularly those in Sydney who were able to offer advice and support to New Zealand women. New Zealand women had a variety of experiences in Sydney, and the diversity of experience was due in a large part to the range of abortion services provided in that city.

Women had been travelling from New Zealand to Australia to have abortions ever since South Australia legalised abortion in 1969, despite there being a two-month residency clause.¹ Soon afterwards the law was clarified in Victoria by the Menhennit Ruling 1969. Thereafter, New Zealand women began to travel to Melbourne. Following the 1971 Levine Ruling in NSW women began to go to Sydney, although some continued to travel to Melbourne. With the opening of the AMAC in 1974, the trans-Tasman abortion travel slowed down, but then increased rapidly after the passing of the 1977 Act. Despite this, the traffic has largely been ignored in the feminist literature.

¹ 'Doctors Turning Away NZ Women Seeking Abortions', *Dominion*, 18 October 1971, 79-016-1/05, ATL.

It is difficult to be certain about the number of women who went to Australia for abortions prior to the law change in December 1977, as estimates vary. In 1974, it was estimated by Julia Freebury of ALRA NSW that 4000 New Zealand women flew to Australia for abortions each year, mostly to Sydney and Melbourne.² In 1975, a Melbourne doctor admitted that he had performed at least a dozen abortions on New Zealand women in the previous three months.³ While this is not a large number, it is only from one doctor, and there would have been several other doctors doing likewise in Melbourne and Sydney. Also in 1975, Jacqueline Steincamp carried out a study of the numbers of women going to Melbourne and Sydney for abortions, so that she could submit her findings to the New Zealand royal commission. She contacted all the clinics, hospitals and individual doctors in Sydney that were known to her organisation, ALRANZ Christchurch. They were asked to give the number of New Zealand women seen in the period July 1974 to June 1975.⁴ Some organisations kept no records and so were unable to provide the necessary information. The details provided from clinics are shown in Table 8. Steincamp estimated that approximately 770 New Zealand women had abortions in Sydney in the twelve month period, while a further 195 abortions were carried out in Melbourne, giving a total of 965.⁵

Table 8: The Number of Abortions Performed on New Zealand Women, July 1974 – June 1975.

| | |
|--|----------------------|
| Population Services International, Potts Point | 147 |
| Populations Services International, Arncliffe | 52 (from 3 Sep 1974) |
| The Women's Hospital, Crown Street | 1 |
| Dr Leslie Smoling | 130 - 140 |
| Dr N Marinko | 234 |
| Dr George Smart | 83 |
| Preterm Clinic | 30 |

² 'NZ women fly for abortions,' *Auckland Star*, 7 June 1974, Scrapbook XVII, MLMSS 7012/6, ML.

³ 'Abortion doctor tells of NZ Girls', *Christchurch Star*, 3 April 1975, Item 6, Folder 6, Box 2, ARC 1993.4, CM.

⁴ Submission 28: Mrs J Steincamp, p.1, Box 27, Com 26, ANZ.

⁵ Submission 28: Mrs J Steincamp, pp. 4 - 5, Box 27, Com 26, ANZ. The approximation was before Preterm altered their number from 100 to 30.

Between 1971 and 1974, Dr Rex Hunton saw 223 women who went to Australia for abortions. They comprised 48 per cent of women he saw during this time for problems associated with unwanted pregnancies.⁶ The founding of AMAC greatly reduced the need for women to travel to Australia, although it did not stop the trans-Tasman traffic. The effect AMAC had on women's choices about where to go for an abortion, particularly for those living in the Auckland area, is clear from Table 9. After the opening of AMAC, the proportion of women going to Australia for abortions dropped dramatically. Table 10 gives the estimates of the number of New Zealand women having abortions in 1974. Furthermore, the table shows the number of abortions performed on New Zealand women in 1974, again displaying the high proportion of women having abortions in Australia.

Table 9: Referrals from a City Clinic of the Auckland Medical Branch of the Family Planning Association.⁷

| Months | Patients Requesting an abortion | Referred to Australia | Ref. privately | Ref. to NWH | Ref. to AMAC | Not Referred |
|------------------|---------------------------------|-----------------------|----------------|-------------|--------------|--------------|
| June/July/Aug 73 | 18 | 8 (45%) | 4 (22%) | 4 (22%) | - | 2 (11%) |
| Feb/Mar/Apr 74 | 69 | 39 (57%) | 21 (30%) | 2 (3%) | - | 7 (10%) |
| June/July/Aug 74 | 76 | 10 (13%) | 19 (25%) | 1 (1%) | 39 (52%) | 7 (9%) |
| Feb/Mar/Apr 75 | 95 | 8 (8%) | 9 (5%) | 4 (5%) | 61 (63%) | 13 (14%) |

Table 10: Minimum and Maximum Estimates of Abortions on New Zealand Women in 1974.⁸

| Where | Minimum | Maximum |
|------------------|--------------|--------------|
| Public Hospital | 919 | 1,000 |
| Private Hospital | 1,000 | 2,000 |
| Australia | 3,000 | 6,000 |
| Total | 4,919 | 9,000 |

⁶ Submission 440: AMAC, p.23, Box 32, Com 26, ANZ.

⁷ Ibid, p.9.

⁸ Ibid, p.9.

In addition, the *New Zealand Truth* in 1974 estimated that at least 4,000 women were going to Australia for abortions annually, but suggested that the number could be higher than that.⁹

New Zealand women who travelled to Australia for abortions had the choice of three states in which abortions were legally available: South Australia, Victoria and NSW. Because the law in South Australia changed first, New Zealand women originally travelled there to have abortions, although some were turned away because they did not meet the two-month residency clause. In an article in the *New Zealand Herald* in November 1971, it was claimed that of the 2354 women legally aborted in South Australia since the law change, New Zealand women would have been among the 5 per cent in the unclassified category, as well as among the 14 per cent of British-born women.¹⁰ New Zealand women were prepared to take the risk of going to South Australia for an abortion that they might be denied. Once it became possible to go to Melbourne, this option was preferred, because Melbourne was closer than Adelaide.

In 1975 in an article in the *New Zealand Medical Journal* it was claimed that 63 New Zealand teenagers had flown to Melbourne for abortions in the previous two years. This number only reflected patients at one Melbourne abortion clinic, where New Zealanders made up ten per cent of all patients. The average age of the New Zealand women known to have gone to Melbourne for an abortion was 21. Like others the authors estimated that 4000 New Zealand women were going to Australia

⁹ 'Abortion Traffic Easy – if you can afford the trip', *NZ Truth*, 28 May 1974, 79-016-2/11, ATL.

¹⁰ 'New Zealanders May Be Getting Abortions', *New Zealand Herald*, 1 November 1971, 79-016-1/05, ATL.

each year for abortions, and that the abortion traffic was ‘a manifestation of a deplorable medical and social situation.’¹¹

Once abortions became available in Sydney, New Zealand women were more likely to go there for abortions rather than Melbourne. One reason for this was suggested by Julia Freebury of ALRA who said that abortions in Sydney cost \$80, whereas the operation was more expensive in Melbourne.¹² The trans-Tasman abortion traffic was also becoming much more public in New Zealand and in 1974 *New Zealand Truth* published a list of eight doctors’ names, addresses and phone numbers who could perform abortions in Australia. Four of the doctors were in Sydney and four were in Melbourne.¹³

By May 1977, when AMAC was in full operation the abortion traffic across the Tasman was continuing. Geoffrey Davis, the director of Population Services International (PSI), an organisation which had two abortion clinics in Sydney, stated that of the 10,000 patients seen at the clinics each year, 15 per cent were from New Zealand, New Guinea and Noumea. There was also a large number of women from Queensland.¹⁴

There was a number of problems with women travelling to Australia to have abortions rather than being able to access safe, legal abortions in New Zealand. These problems were often publicised by feminists or medical professionals who supported abortion law reform. AMAC in its submission to the royal commission highlighted

¹¹ ‘New Zealand Teenagers Flew to Melbourne for Abortions’, *Evening Post*, 2 April 1975, 77-132-01/01, ATL.

¹² ‘NZ women fly for abortions’, *Auckland Star*, 7 June 1974, Scrapbook XVII, MLMSS 7012/6, ATL.

¹³ ‘The docs who are “suitable”’, *NZ Truth*, 28 May 1974, 79-016-2/11, ATL.

¹⁴ ‘Canberra Investigates abortion clinics’, *Dominion*, 14 May 1977, 91-123-1/3, ATL.

the problems women often had when they travelled to Australia for abortions. The single biggest problem for such women having abortions in Australia was the financial cost. Rex Hunton, the director of AMAC, announced at the ALRANZ annual meeting on 8 April 1975 that New Zealand women spent about \$2,000,000 a year on abortions in Australia.¹⁵ Most of this was spent on airline tickets, although a considerable portion was also spent on medical fees in Australia. However from 1 July 1975 New Zealand women were able to have free abortions in Australia under the Medibank scheme, whereby a patient only paid 15 per cent of the doctor's fee, unless the doctor believed that the patient could not pay at all, in which case the government covered the entire cost. This change was beneficial to New Zealand women, particularly those who lived in the South Island and had to fly to Auckland to have an abortion. Once this change occurred, there was little difference in trans-Tasman prices because the medical fees in New Zealand were not covered by the government.¹⁶

Some doctors, particularly in Sydney, were prepared to offer discounts to New Zealand women because they were aware of the expense the women had already encountered. However, other clinics felt that this was unprofessional and that medical fees should not be offered at a discounted rate. In 1975 a Sydney doctor, George Smart, announced that he charged New Zealand women only \$A60 for abortions because they had to pay their airfares and also were not covered by medical insurance as were most Australians.¹⁷ He publicized that he was going to ask the Australian government to organise cheap airfares for New Zealand women going to Australia for abortions, as normally women could not get discount airfares because they did not

¹⁵ '\$(NZ)2m For Abortions in Australia', *Evening Post*, 9 April 1975, 80-386-1, ATL.

¹⁶ 'Aust. Abortion free for NZ women', *Press*, 3 July 1975, 80-386-1, ATL.

¹⁷ 'Sydney medic admits abortion traffic', *Dominion*, 3 April 1975, 80-386-1, ATL.

purchase their tickets far enough in advance.¹⁸ This statement does not seem to have been followed up.¹⁹

The second concern that AMAC had in its submission about women travelling to Australia was that the service was not available to all; in particular Pacific Island women were excluded.²⁰ At this time New Zealand citizens did not need a passport to enter Australia, although Pacific Islanders needed a passport and a visa. This combined with the fact that Pacific Island women were also less likely to have the money to pay for a trip to Australia, and the fact that their culture was even more intolerant of abortion than Pakeha New Zealand culture, made very slim, the likelihood of a Pacific Island woman wanting an abortion and being able to have one.

According to AMAC very few women had difficulty obtaining abortions in Australia although some were too advanced in their pregnancies, which meant normally they were over 18 weeks.²¹ Many women going to Sydney or Melbourne were in their second trimester because of the delay in organising such a trip. This limited the number of doctors who could perform an abortion, it made the operation more dangerous, and it meant women needed more time to recover before they could fly safely again. In 1972, ALRA in Melbourne wrote to ALRANZ about its concerns with New Zealand women going to Melbourne for an abortion when they were in their second trimester. At that time there was only one doctor in the city who would

¹⁸ 'Girls fly for weekend abortions', *Sunday Telegraph*, 25 August 1974, Scrapbook XVII, MLMSS 7012/6, ML.

¹⁹ George Smart was later suspended from practising medicine by the AMA because he advertised to most New Zealand doctors, and some Australian doctors that he performed abortions.

²⁰ Submission 440: AMAC, p.29, Box 32, Com 26, ANZ.

²¹ *Ibid*, p.30.

perform second trimester abortions.²² AMAC also claimed that the standard of care provided in Australian clinics varied considerably, and while attempts were made to contact women when they returned, it was difficult to be sure of the standard of care provided by the Australian doctors.

AMAC's third concern with women travelling to Australia was about the feelings of the women involved.²³ The trust felt that, 'there is no doubt that women who bear the weight of the unwanted pregnancy often feel suppressed anger, guilt and fear as they travel to another country to terminate their pregnancies.'²⁴ Many women had to make the trip alone because of financial constraints, and this would have made them feel isolated, particularly in a country that they were not used to.

There were two major medical issues which AMAC highlighted to the New Zealand commission. The first was the lack of follow-up provided for New Zealand women, especially those who went to Australia without a referral.²⁵ The other issue was the medical dangers involved in having an operation followed by a three hour or more flight. This was particularly a problem for women who had had a termination in the second trimester.²⁶

There were other problems with women going to Australia, besides the ones highlighted by AMAC. Sometimes the clinics in Melbourne and Sydney were overloaded with Australian patients, and were unable to help those from New Zealand. This was particularly a problem in the early 1970s when abortion clinics

²² Beatrice Faust to the Secretary ALRANZ, 5 September 1972, 79-016-1/02, ATL.

²³ Ibid, p.32.

²⁴ Ibid, p.9.

²⁵ Submission 440: AMAC, p.31, Box 32, Com 26, ANZ.

²⁶ Ibid, p.32.

were only beginning to open. On 13 September 1972, ALRA in Melbourne wrote to ALRANZ and asked that they stop referring patients to them as they were ‘inundated’ with their own problems.²⁷ Others, including Margaret Sparrow²⁸ felt that the fact that women had to travel to have abortions indicated a public health problem, and that those women should be receiving treatment in New Zealand.²⁹ No one would have tolerated New Zealanders travelling to Australia for other basic medical procedures.

The Situation in New Zealand after the Passing of the CSA Act

After the passing of the Contraception, Sterilisation and Abortion Act in 1977, feminists around New Zealand almost immediately set up an organisation called the Sisters Overseas Service (SOS). SOS’s purpose was to help women who needed an abortion. They informed women of the law in New Zealand, and then gave them the option of either trying to get an abortion in New Zealand or travelling to Sydney. SOS received many referrals from doctors whose patients were ineligible for an abortion in New Zealand.³⁰ The organisation was active in New Zealand in the late 1970s and early 1980s until its services were no longer needed. The Otago University Right-to-Life group asked the Minister of Justice to outlaw SOS, as it believed that its activities were illegal.³¹ Nothing eventuated from this, although the anti-abortion movement continued to oppose the actions of SOS.

It is impossible to know exactly how many women went to Sydney and Melbourne for abortions in the late 1970s, after the passing of the Contraception, Sterilisation and Abortion Act. Estimates vary widely depending on what

²⁷ Patricia Martin (ALRA Victoria) to the Secretary ALRANZ, 13 September 1972, 79-016-1/02, ATL.

²⁸ A doctor, who was and still is involved with FPA and is the president of ALRANZ.

²⁹ ‘Abortions Done in Australia Point to a Big Public Health Problem Here,’ 80-386-1, ATL.

³⁰ ‘Seekers of Aust. Abortions almost doubled’, Item 39, Folder 47, Box 12, ARC 1993.4, CM.

³¹ ‘Plea to outlaw SOS’, Item 39, Folder 47, Box 12, ARC 1993.4, CM.

organisations were consulted. In August 1978, eight months after the CSA Act had been passed, SOS in Auckland claimed that it had sent 1078 women to Australia for abortions, at a cost of at least \$500,000. Clinic fees were \$100,000, New Zealand travel tax \$32,000, airport tax was \$2,000 and airline tickets were \$352,000.³² The problem with these figures is that they are only for women from Auckland who contacted SOS. Many women flew to Australia without contacting that organisation, but because there is no record, it is difficult to know how many. In *Abortion is a Woman's Right to Choose*, a Sydney publication, in 1978 it was estimated that 125 New Zealand women travelled to Sydney each week for abortions. This suggests that 6,500 women went to Sydney in a year, a particularly high number considering some women would have also gone to Melbourne.³³ The Auckland Medical Aid Trust estimated that between 3 January and 27 January 1978, 247 New Zealand women went to the four main abortion clinics in Sydney, with another 55 women going to Melbourne.³⁴ Over a year, assuming such numbers were maintained, 5,200 went to Australia for abortions. Clearly it is difficult to arrive at a final number, although it would seem that estimates of between 3,000 and 4,000 are quite conservative for 1978. Unlike the early 1970s when the abortion traffic remained constant, with slight differences after the opening of AMAC, the high abortion traffic in the late 1970s did not persist for long. In February 1979, it was reported in the *Journal of the Nurses Society* that for every woman having an abortion in New Zealand, two were travelling to Australia. It was suggested that 3,337 women travelled to Australia for abortions in 1978.³⁵ Janet Sceats in a study on abortion claimed:

³² 'Abortions cost \$.5m', *Dominion*, 21 August 1978, 91-123-2/2, ATL.

³³ Emmi Snyder, 'Control Expands Service', *Abortion is a Woman's Right to Choose*, no. 15 (1978), p.2.

³⁴ "'Staggering" number of women get abortions', *Evening Post*, 8 February 1978, 91-123-2/1, ATL.

³⁵ 'Abortions pattern changed', 20 February 1979, 91-123-2/3, ATL.

The numbers of women travelling to Australia showed major increases at the beginning of 1978, and in the same quarter the number of abortions performed in New Zealand fell dramatically. Numbers in the migration category declined steadily from this high point in early 1978 until mid 1980, since which time there has been little change.³⁶

While an exact figure cannot be arrived at, the pattern at least seems clear. The trans-Tasman traffic increased dramatically at the beginning of 1978 and then declined until the early 1980s when it levelled out again.

SOS was involved in sending women to Sydney who had certificates for an abortion, but were unable to find a local surgeon willing to perform the operation. The organisation claimed that in June, July and August 1978, 18 women had to go to Sydney, although they were legally entitled to an abortion in New Zealand.³⁷ This was one reason women were reluctant to attempt to get a certificate for an abortion in New Zealand, because if they were unable to find an operating surgeon then they would be more advanced in their pregnancy and this could have involved a more complicated and expensive procedure than if they had gone to Sydney straight away. Data for the Christchurch branch of the organisation shows that in 1978 the group dealt with 1305 women: 743 went to Australia to have an abortion (approximately 57 per cent of the women), 163 had a legal abortion in New Zealand (approximately 12 per cent) and the remaining 399 (approximately 31 per cent) either discovered that they were not pregnant or continued with their pregnancies.³⁸

The drop in the number of women going to Australia from Wellington can be seen in Table 11.³⁹ After the AMAC clinic was reopened in Auckland in September

³⁶ Janet Sceats, *Induced Abortion in New Zealand, 1976 – 1983*, Wellington, 1985, p.19.

³⁷ 'Abortions still at Women's Hospital', *Press*, 1 May 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

³⁸ 'Pregnancies after "rape"', *Christchurch Star*, 8 March 1979, Item 40, Folder 48, Box 12, ARC 1993.4, CM.

³⁹ Helen Paske, 'Abortion: either here or there', *New Zealand Listener*, 95, 2105 (1980), p.14.

1979, the number of women going to Australia dropped from Auckland and Wellington. However, few Christchurch women attended the clinic because of the two-week waiting list, and instead paid the extra \$200 to go to Australia.

Table 11: Women Sent to Sydney via Wellington Abortion Trust .⁴⁰

| | |
|-------------|----|
| 1979 | |
| April | 50 |
| May | 82 |
| June | 30 |
| July | 45 |
| August | 57 |
| September | 19 |
| October | 16 |
| November | 15 |
| December | 3 |
| | |
| 1980 | |
| January | 25 |
| February | 14 |
| March | 14 |

Another problem for women going to Australia was the decision of the Australian government that all New Zealanders entering Australia had to have a passport from 1 July 1981. By this time, only women needing a second trimester abortion were having to travel to Australia, but because it took about four weeks to obtain a passport, it would have delayed some women's travel, or in fact prevented them from going altogether because their pregnancy would have been too far advanced by the time they acquired their passport.⁴¹

Some groups felt that women were being encouraged to go to Australia to have an abortion, rather than attempt to have one in New Zealand. Bill Birch, one of the prominent supporters of the CSA Act stated, 'women are suffering the cost and anguish of going to Australia for abortions because of Auckland doctors' emotional

⁴⁰ Helen Paske, 'Abortion: either here or there', *New Zealand Listener*, 95, 2105 (1980), p.15.

⁴¹ Sandra Coney, no title, *Broadsheet*, no. 90 (1981), p.8.

reaction to the new law. I am quite concerned about the climate in Auckland. Women are possibly being persuaded to go to Australia when it is not in their best interests to do so.’⁴² The ASC made similar allegations. The committee felt that women were being encouraged to go to Australia so that the situation appeared worse than it actually was. In response the Wellington branch of SOS claimed that between April 1978 and March 1979 they referred 110 cases to local practitioners as well as dealing with many women on the phone who also visited local doctors. Over half of the women it assisted in going to Australia were over 10 weeks pregnant when they first contacted the organisation. A decision had been made in the Wellington region not to consider cases advanced more than 12 weeks, despite the legislation making no such provision, and because the procedure to obtain an abortion involved visiting several doctors, none of those women would have been able to have an abortion in New Zealand.⁴³

In August 1979 the Aotea Clinic, formerly AMAC, was granted a licence to perform abortions by ASC. It was estimated by a clinic trustee, Rex Hunton, that about 5,000 women a year were flying to Australia for abortions, and that the clinic would be able to cover those women, although the clinic would not perform as many abortions as it had done prior to its closure in December 1977.⁴⁴ In January 1980, the Aotea Clinic was forced to stop making appointments for a month because of such high demand. The SOS in Auckland anticipated that this would increase the number of women needing to travel for their abortions in the short term.⁴⁵ Another day clinic had opened in Auckland in 1978, known as the Epsom Day Hospital. It performed a

⁴² ‘Abortion law felt in Sydney’, *Dominion*, 12 January 1978, 91-123-2/1, ATL.

⁴³ ‘Principal abortion agencies clash’, *Dominion*, 24 May 1979, 91-123-2/3, ATL.

⁴⁴ ‘Aotea set for influx’, *Dominion*, 9 August 1979, 91-123-2/3, ATL.

⁴⁵ ‘Pressure on Abortion Clinic Grows’, *New Zealand Herald*, 15 January 1980, 91-123-2/3, ATL.

large number of abortions, although not enough to prevent women from flying to Australia. Feminists felt that this was because the terms of the act were such that many women were not legally entitled to an abortion in New Zealand.⁴⁶

One woman from the Nelson branch of SOS told the WEL conference in 1981 that New Zealand women could claim a 'staggering political victory' in the abortion issue, because they had managed to get abortions in spite of the Contraception, Sterilisation and Abortion Act.⁴⁷ In 1984 WONAAC contacted some abortion clinics in Sydney to see if New Zealand women were still making the trans-Tasman journey for an abortion. The Bessie Smyth Clinic reported that nobody could remember any New Zealand patients after 1979.⁴⁸ Geoffrey Davis from PSI stated that the monthly average from early 1980 to mid 1982 was 24, and from that date until the time of his letter (September 1984) the monthly average was about eight. He stated that most referrals to the clinic for New Zealand women were late second trimester operations because the service was not provided adequately in New Zealand.⁴⁹

Just as the cost of going to Australia for an abortion had been a problem prior to the passing of the Contraception, Sterilisation and Abortion Act, it remained the major problem for women travelling in 1978 and 1979. In late 1977 the return fares were as follows: Christchurch to Melbourne, \$354; Christchurch to Sydney, \$320; Auckland to Melbourne, \$372; and Auckland to Sydney, \$320.⁵⁰ On top of this women had to pay for the operation, accommodation and transport costs. It was

⁴⁶ "'Wait and See" on Abortions', *New Zealand Herald*, 26 October 1978, 80-386-2, ATL.

⁴⁷ 'Staggering "win" over abortion law claimed', *Evening Post*, 22 June 1981, 91-123-3/2, ATL.

⁴⁸ Bessie Smyth Foundation to WONAAC, 3 September 1984, 91-123-4/1, ATL.

⁴⁹ Dr Geoffrey Davis (Project Director PSI) to Sue Clement (WONAAC), 25 September 1984, 91-123-4/1, ATL.

⁵⁰ 'Australian await an abortion upsurge', *Christchurch Star*, 17 December 1977, 89-326-1/20, ATL.

estimated that a woman would need at least \$500 to cover her expenses. Many women were able to obtain this money from a variety of sources, although some could not. Donna Awatere and Rebecca Evans, two Maori women activists, highlighted the difficulties many Maori women had:

Abortions are inaccessible to any woman in NZ now, inaccessible of course to those who haven't \$500. Despite the existence of SOS and any similar service, it is still no answer to a Maori or Polynesian woman living in a rented house in Ponsonby, with six kids and a sexist husband who amongst [sic] other things works in a factory and helps the state control what his wife does with her womb – if she doesn't listen to what he says when he is asserting his ego and mana by telling her to have more babies – she gets a hiding.⁵¹

Most women had to borrow the money from family members, their partner or his family, while some obtained bank loans or were able to use savings. The majority of this money went towards paying for the airfare. SOS were unhappy with using Air New Zealand for two reasons. The first was that a prominent anti-abortionist and president of SPUC, Des Dalgety, was on the board of Air New Zealand, a presence many women found insulting. The second reason was it was felt that the government should not profit from its own bad legislation, as the government was the major shareholder in Air New Zealand at the time.⁵² However, because Qantas and Air New Zealand had an arrangement that they shared trans-Tasman air travel, only women in Auckland were able to use another airline, Pan American World Airways, which flew through Auckland.⁵³

It was not only women who were not entitled to an abortion under the 1977 legislation who had to travel to Australia. Due to the way that the act was interpreted by some doctors and the delays that were often involved in the process, many women who were legally entitled to abortions in New Zealand had to travel to Sydney or

⁵¹ Donna Awatere & Rebecca Evans, 'Maori Women', p.8, 89-326-2/03, ATL.

⁵² Sandra Coney, 'The Tasman Traffic', *Broadsheet*, no. 58 (1978), p.10.

⁵³ 'No boycott in Chch', *Press*, 4 March 1978, 80-326-2, ATL.

Melbourne. The primary reason for this was that there were not enough certifying consultants in New Zealand to approve abortions in the first place. Even by 1985 women were still having to travel overseas because of the shortage. However, by this time the ASC had agreed to cover the cost of travel, as other patients who had to go overseas for medical treatment were also entitled to be reimbursed.⁵⁴ Moreover, some general practitioners refused to refer women to a certifying consultant. When the ASC was asked by SOS whether women had a legal right to be referred to a certifying consultant, the ASC said it was only an administrative body and could not interpret the legislation.⁵⁵ Therefore, if a woman was able to find a general practitioner who was willing to refer her to two consultants, and there were two consultants in her area, she would have fared better than many other women.

In July 1979, Marilyn Waring told the Abortion Supervisory Committee that three quarters of women wanting an abortion from Hawkes Bay and Auckland had gone to Australia for abortions in the previous 12 months because they could not have abortions in their region. In comparison, only 56 per cent of women from Christchurch wanting an abortion had been compelled to go to Australia. This shows that the law was not being interpreted in the same way throughout the country.⁵⁶ On average 61 per cent of New Zealand women who had abortions went to Australia, according to Waring. She estimated that for the year ending 31 March 1979, 3857 women had travelled to Australia for an abortion.⁵⁷ Waring was able to obtain these statistics from the SOS so while they seem very precise, Waring had assumed that the

⁵⁴ 'Abortion "lack" concerns', *Dominion*, 18 March 1985, 91-123-4/1, ATL.

⁵⁵ 'Abortion complaint', *Dominion*, 28 April 1975, 80-386-1, ATL.

⁵⁶ 'Abortion talks "waste of time"', *Hawkes Bay Herald Tribune*, 12 July 1979, MSX-2794, ATL.

⁵⁷ 'Most Abortions still done in Australia?', *Evening Post*, 12 July 1979, 91-123-2/3, ATL.

proportion of women going to Australia rather than having abortions in New Zealand was the same for women who had contacted the SOS as it was for those who had not.

Sisters Overseas Service (SOS) which had branches throughout New Zealand, was constantly trying to obtain funding to enable it to help as many women as possible. In March 1978, SOS publicly announced that they were running out of money, because two to three women each week needed their travel costs to Australia subsidised by the organisation.⁵⁸ On 8 April 1978 WONAAC organised a door-to-door collection to raise money for Wellington SOS.⁵⁹

SOS was not just involved in making the bookings for women going to Australia, and providing funding where necessary; it also attempted to make the experience as tolerable as possible. Elizabeth Sewell, who ran the Christchurch branch of SOS, would ask the women if they wanted to travel with others going to Australia for a termination as well. This was particularly important because the high cost meant that most women could not take a family member or friend with them. Sewell explained, 'we try to arrange compatible groups, mixing older, married women who are more composed about it all with any nervous teenagers. Comforting them takes the older women's minds off their problems, and it helps the young ones a lot.'⁶⁰

⁵⁸ 'SOS running out of money', *Press*, 24 March 1978, 80-386-2, ATL.

⁵⁹ WONAAC Newsletter, 'WONAAC Activities', April 1978, 91-123-2/2, ATL.

⁶⁰ '28 a week for abortion', *Press*, no date, 89-326-1/20, ATL.

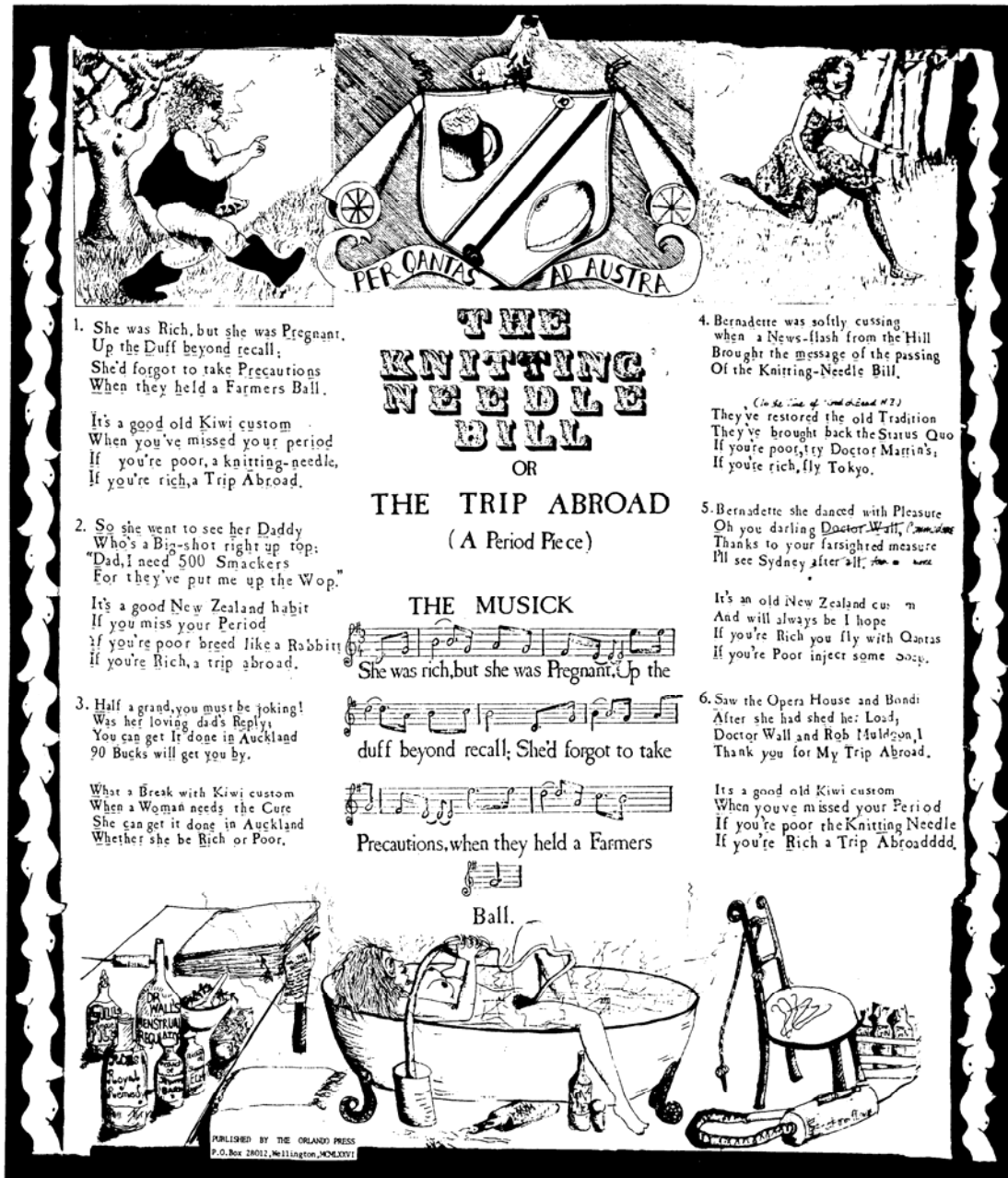


Figure 3: 'The Knitting Needle Bill', shows a song written about the trans-Tasman abortion service in the mid 1970s after the passing of the Wall Bill. It has been modified to accommodate the passing of the Contraception, Sterilisation and Abortion Act in 1977. EPH-C-ROTH-ABORTION-1976, ATL.

SOS organisers in Christchurch, as well as in other parts of the country, were prepared to billet women who had to travel to a city before they could fly to Australia for an abortion. One supporter explained, ‘during 1978 I billeted about twenty women for SOS on their way to Sydney and safely home again to Wyndam, or deepest darkest Southland.’⁶¹ SOS continued its service until October 1980 when it changed its name to The Health Alternative for Women (THAW) and expanded its role to include contraceptive advice, assistance with nutrition, self defence, and drug abuse.⁶²

There were also disputes between SOS and hospitals as to whether school-aged females were automatically entitled to have an abortion. The superintendent of Christchurch Women’s Hospital stated that only under the ‘most unusual circumstances’ would a school-aged female be refused an abortion. However, SOS had helped five school girls go to Australia for abortions, all of whom had been assessed by doctors in Christchurch. It was believed that those who could afford to go to Australia did so because the environment there was more supportive, their privacy would be preserved and they would be guaranteed an abortion.⁶³

Australian Women’s Support

Australian women were happy to offer their support for New Zealand women after the passing of the Contraception, Sterilisation and Abortion Act. It was felt that if a repressive law could be passed in New Zealand, then it was possible that such a law could also be passed in any of the Australian states.⁶⁴ Although most of the support came from groups in Sydney, other groups around Australia also offered

⁶¹ Tribute to Elizabeth Sewell, 88-159, ATL.

⁶² ‘New name, new role for SOS’, *Evening Post*, 8 October 1980, 91-123-3/2, ATL.

⁶³ ‘Girls’ abortions “could have been done here”’, 89-326-1/20, ATL.

⁶⁴ WAAC Adelaide to Sisters in New Zealand, no date, 91-123-2/2, ATL.

encouragement. For example the Adelaide branch of WAAC suggested that an Australian and New Zealand Abortion Action Campaign (ANZAAC) be launched on International Woman's Day.⁶⁵ However, groups in New Zealand felt that the public was already too confused with so many groups being involved in the abortion campaign; for example, ALRANZ, WONAAC, Repeal, SOS, Coaction and Cohab among others.⁶⁶ The New Zealand groups were happy for Australian groups to use the name ANZAAC, and they did. Groups in Australia believed that an anti-abortion backlash had been launched in Australia following the passing of the laws in New Zealand, and this backlash had to be countered.⁶⁷

Sydney women's groups were also involved in protesting about New Zealand's abortion laws. On 6 February 1978 over 100 Sydney women protested outside the New Zealand Government offices in Sydney and also outside the New Zealand Tourist Bureau. Both were closed because of Waitangi Day.⁶⁸ The following week, Robert Muldoon, then Prime Minister, was in Sydney for the Commonwealth Heads of Government regional meeting. About 50 demonstrators, mostly from Control, waited for him outside the Hilton Hotel. One of the protestors held a sign asking Muldoon whether he, too, was in Sydney for an abortion.⁶⁹ Still, not all the protests were limited to Sydney. Just as the New Zealand Tourist Bureau had been a target for protestors in Sydney, so it again became a target in Brisbane. In September 1978 the offices were targeted by protestors and this resulted in one woman being

⁶⁵ Ibid.

⁶⁶ Fern Hickson (WONAAC Co-ordinator) to WAAC Adelaide, 6 April 1978, 91-123-2/2, ATL.

⁶⁷ National Co-ordinator of WONAAC to Auckland University Students' Association, 15 July 1978, 91-123-2/2, ATL.

⁶⁸ 'Sydney Protest at NZ Law', *New Zealand Herald*, 7 February 1978, 80-386-2, ATL. See also 'Abortion rally in Sydney', 91-123-2/1, ATL.

⁶⁹ 'Mr Muldoon Makes Backdoor Entry to Talks', *Evening Post*, 13 February 1978, 91-123-2/1, ATL.

arrested.⁷⁰ These acts combined demonstrated that Australian women shared the anger of many New Zealand women over the Contraception, Sterilisation and Abortion Act, and some of those women were prepared to act on their feelings, and show their support for New Zealand women.

New Zealand Women's Experiences in Sydney

While overall the service that SOS provided was of use to New Zealand women, not all of them received an acceptable service in Australia. The secondary literature provides some accounts of women's experiences there. Varnham quotes one woman:

My friends and I used to borrow each other's pills. I got pregnant when I was 23. You could not get an abortion in New Zealand so I went off to Sydney. I arrived with a list of doctors and I can remember standing in a phone booth ringing them up. The abortion itself was the most frightening experience I have ever had. The doctor said, 'If you don't stop shrieking I'll throw you into the street.' I remember later standing in a post office sending postcards to my friends in New Zealand with blood dripping on to the floor.⁷¹

However, SOS would communicate with women after their return from Australia, and if they received inadequate treatment from a doctor, SOS would no longer refer women to that doctor. SOS also worked closely with a Sydney feminist referral organisation known as Control. Control did not run its own abortion clinic; rather it monitored clinics in Sydney and provided a counselling service for women using clinics which did not have their own service. The counsellor would also accompany the women on their visits to the doctor.⁷² Its members helped make bookings for New Zealand women into Sydney clinics, arranged accommodation for them while they were in Sydney and provided them with transport to and from the airport.⁷³ Accommodation was normally at a cheap hotel, although Control had a list of people

⁷⁰ 'Abortion Rally Arrest in Brisbane', *New Zealand Herald*, 18 September 1978, 80-386-2, ATL.

⁷¹ quoted in Mary Varnham, 'Who'll Marry Her Now?' in eds, Sue Kedgley & Mary Varnham, *Heading Nowhere in a Navy Blue Suit*, Wellington, 1993, p.105.

⁷² Ibid, p.2.

⁷³ '28 a week for abortion', *Press*, no date, 89-326-1/20, ATL.

willing to billet women who did not want to stay in a hotel, or could not afford to do so.⁷⁴

Control was an organisation primarily designed to help women in NSW, although it was also willing to help women from New Zealand and Queensland. However, this willingness could have resulted in problems for the organisation because there was often a shortage of spaces available at abortion clinics, particularly those that Control preferred to use. What is interesting is that Control never complained about the impact that out of state women had on the services that were provided to NSW women. They made it clear that more clinics were needed, but were always supportive of all women requiring their assistance.⁷⁵

Control saw itself as a safeguard against doctors who had set up small clinics to perform abortions because it was profitable, but whose service was often inadequate. It also challenged the types of medication that were prescribed to women. For example, in 1978 some New Zealand women travelled to Australia with Depo Provera to be injected after their operation.⁷⁶ At the time, Depo Provera was commonly available in New Zealand and recommended to young women. However, Depo Provera had been very controversial, particularly so in NSW amongst the feminist organisations, and Control refused to allow the women to be injected with it. The Family Planning Association (FPA) in New Zealand refused to refer women through Control, and also put pressure on SOS to do the same. In spite of this SOS

⁷⁴ Emmi Snyder, 'Control Expands Service', *Abortion is a Woman's Right to Choose*, no. 15 (1978), p.2.

⁷⁵ 'Reactionary Laws Attack New Zealand Women', *Abortion is a Woman's Right to Choose*, no. 15 (1978), p.5.

⁷⁶ It was not uncommon for New Zealand women to take their own medication with them as it was cheaper than buying it in Australia.

continued its contact with Control, and in many ways the controversy brought them closer together.⁷⁷

As president of ALRA Julia Freebury indicated to New Zealand women that she was prepared to help:

WE CAN HELP NZ women to have an abortion in Sydney. You can ring 32 2244 (anytime) and I will be able to immediately book you into a first-class clinic for a termination of pregnancy. You can stay at the clinic overnight and there is no charge.

We can offer reduced fees for NZ women

- one stage operation (up to 12-14 weeks) \$80 (Aust)
- later one stage operation (up to 16 weeks) \$100 (Aust)
- two stage operation 1-2 nights (20 weeks) \$180 (Aust)
- one stage operation requires a stay of approximately 3 hours in the clinic.⁷⁸

Some women were able to return to New Zealand on the same day as their operation, while others stayed the night in cheap accommodation organised for them by Control.

Abortion Clinics in Sydney

There was some debate over the quality of medical care provided at a number of Sydney's abortion clinics. *Broadsheet* reported that several SOS branches were referring women to the Arncliffe Clinic, which was run by Population Services International (PSI), and that the clinic only performed the operations under general anaesthetic, whereas many other clinics gave women the choice of a local anaesthetic when the operation was being performed in the first trimester.⁷⁹ Sydney feminists later launched a campaign against the PSI clinics.⁸⁰ In December 1976, six women health workers resigned from PSI. These resignations included counsellors, a doctor and a telephonist.⁸¹ PSI was also accused of not taking into account women's needs

⁷⁷ Rebecca Albury, 'Women's Health – Man-made Medicine' *Scarlet Woman*, no. 13, (1981), p.10.

⁷⁸ Open letter to the women of New Zealand from ALRA (NSW), Item 7, Folder 7, Box 2, ARC 1993.4, CM.

⁷⁹ No title, *Broadsheet*, no. 57 (1978), p.19.

⁸⁰ Rosemary McLeod, 'The Sydney Procedure', *New Zealand Listener*, 88, 1997 (1978), p.22.

⁸¹ Control, *Abortion. Our Bodies Their Power*, Chippendale, 1977, p.1.

when supplying them with the birth control pill. PSI received sample packs from a variety of drug companies, which they sold to the women, instead of supplying them for free. Women had no choice as to what birth control pill they could take.⁸² The clinic also prescribed antibiotics to patients, at a cost greater than a pharmacy, because there were concerns that complications might arise from the treatment.⁸³ Sydney feminists felt that PSI offered New Zealand women discount rates to get their business. The clinic justified their actions by stating that New Zealand women organised their own blood tests and drugs, whereas Australian women received these from the clinic.⁸⁴ PSI also received business from Children by Choice, the Brisbane referral agency. However, because all the women from Queensland arrived together, the clinic was often overbooked. Women were block-booked, rather than having individual appointments, and this meant that many had to wait hours before seeing a doctor.⁸⁵

The other two main clinics in Sydney were Preterm and the Bessie Smyth Clinic.⁸⁶ Preterm did not have many New Zealand patients, and only performed abortions up to 10 weeks, with a local anaesthetic. This may explain why not many New Zealand women used the clinic, especially if they were unsure how advanced their pregnancy was.⁸⁷ Bessie Smyth was the only clinic that Sydney feminists would endorse. However, it was run on a small scale and only saw twelve women a day. Because of the traffic caused by the Christchurch flight, each Tuesday in the late

⁸² Control, p.2.

⁸³ Ibid, p.4.

⁸⁴ Rosemary McLeod, 'The Sydney Procedure', *New Zealand Listener*, 88, 1997 (1978), p.22.

⁸⁵ Control, p.3.

⁸⁶ Bessie Smyth had been a campaigner for birth control in Melbourne in the nineteenth century.

⁸⁷ Rosemary McLeod, 'The Sydney Procedure', *New Zealand Listener*, 88, 1997 (1978), p.23.

1970s was known as New Zealand day.⁸⁸ Preterm had originally received considerable support from the feminist movement, but during the 1970s the organisation of the clinic changed and became more conservative. *Mabel*, a Sydney feminist newspaper, believed that Preterm had developed 'into a flash-flow business venture with little regard for the needs of individual women.'⁸⁹ This change was particularly noticeable in 1977 when the three research and education assistants at the clinic were fired. The three women had been working for Preterm since the clinic had opened in 1974. *Mabel* wrote, 'the sackings seem to represent an attempt to remove almost the last survivors of the early feminist orientation from the organisation.'⁹⁰

Children By Choice

A comparable service to SOS was run by Queensland women, who also lived with a very restrictive abortion law. Children by Choice was formed in Queensland after the Levine Ruling, to help women go to Sydney for abortions. It operated in a similar way to SOS. Children by Choice was able to negotiate a deal with Ansett to fly women to Sydney on discounted fares, which helped make the process more affordable to women. They also negotiated deals with hotels in Sydney to provide cheap rates so that women were able to stay the night, and did not have to return on the same day, as most New Zealand women had to.⁹¹ By 1976, Queensland women were spending about \$940,000 per year to travel to Sydney and have legal abortions.⁹² The literature does not make any comparisons between these two similar

⁸⁸ Ibid, p.23.

⁸⁹ 'Preterm Sacks Workers', *Mabel: Australian Feminist Newspaper*, no.8 (1977), p.7.

⁹⁰ Ibid, p.7.

⁹¹ Karen Coleman, 'Discourses on Sexuality: The Modern Abortion Debate', PhD thesis, Macquarie University, 1991, p.308.

⁹² Children by Choice, *Children by Choice Association Official History*, Toowong, 1982, p.29.

organisations in New Zealand and Queensland, nor does the Australian literature discuss the flow of women into Sydney in any detail.

In June 1974, the president of Children by Choice announced that 1500 women had been sent to Sydney for abortions in the previous eighteen months, and claimed that the organisation was operating within the law by sending women to Sydney.⁹³ In September 1975, the organisation received its first federal grant of \$3000 to help with its work. It was estimated that between November 1972 and September 1975, 4224 women supported by Children by Choice had gone to Sydney for an abortion.⁹⁴ In 1987 it was announced that the organisation would close due to lack of funds. The president, Judy Petroeschovsky, said, 'the Queensland government ignores the plight of many thousands of women by continually refusing to fund Children by Choice. At the same time this government funds anti-choice groups to the tune of about half a million dollars.'⁹⁵ However, records show that the organisation did not cease at this point.⁹⁶

Conclusion

The trans-Tasman abortion traffic that existed during the 1970s was an indication that adequate abortion services were not being provided in New Zealand and that inadequate services did not stop women from having abortions; instead women had to go elsewhere to access the services. Prior to the 1970s this had been 'back-street' abortionists, but after the change in laws in some of the Australian states, particularly NSW and Victoria, women who could afford the travel went to Australia.

⁹³ 'Group beats abortion law', *Sunday-Telegraph*, 2 June 1974, Scrapbook XVII, MLMSS 7012/6, ML.

⁹⁴ 'Interstate abortion, 1975', *Australian*, 17 September 1975, Scrapbook IXX, MLMSS 7012/6, ML.

⁹⁵ Children By Choice Press Release, 25 March 1987, File 4, Box 4, ML 172/03, ML.

⁹⁶ Children by Choice newsletter, August 1991, File 4, Box 4, ML 172/03, ML.

The dramatic increase in traffic in 1978 after the change in law in New Zealand was able to be absorbed by the Australian clinics, although the quality of care was not always of the highest standard. The number of women travelling to Sydney during this period meant that feminist organisations in New Zealand and Sydney had to work together to ensure that women were able to access the services that they needed. Despite not being able to prevent a restrictive law change in New Zealand in 1977, many feminists groups saw it as a victory that they had been able to help so many women go to Australia for terminations. Nevertheless, by the early 1980s the trans-Tasman traffic had slowed and most women were able to access abortion services in New Zealand. This was not without opposition. Anti-abortion groups who had seen the 1977 act as an initial success were upset that the number of abortions in New Zealand were increasing and they made their objections public, predominantly by protesting outside abortion clinics. This meant that even though women were able to access abortion services in New Zealand they still had to fight to retain these services.

Chapter Five:

The Feminist Perspective of the Backlash

The backlash against abortion and other women's liberation issues that occurred in the 1980s and 1990s in New Zealand and NSW was led by the anti-abortion groups that had existed since the 1970s. It is clear that these groups were opposed to a lot more than abortion. Just as abortion had been the central issue for second wave feminism, so did it become the main target of those who opposed the achievements of women's liberation. These groups opposed abortion by a number of means. They protested outside abortion clinics, and some of these protests involved verbally abusing clients and staff of the clinics. Arson attacks were also common occurrences. Other groups tried to change the law by influencing politicians or having their own representatives elected to parliament. However, despite these attempts the backlash in New Zealand and NSW had little success, especially when compared to the situation in the United States.

The main opposition to the aims of the abortion law reformers in New Zealand was SPUC. SPUC had some major advantages over the reform groups. Firstly, it had a considerable amount of money to spend on its campaign. Secondly it had a large membership, despite opinion polls showing that the SPUC position on abortion was not supported by the majority of New Zealanders. The pro-choice groups attributed these advantages to SPUC's close relationship with the Catholic Church. SPUC countered these claims by stating that it was a completely separate organisation.

There are no exact figures on SPUC's membership in the 1970s. The only estimate given on the percentage of Catholic members was by the then president of SPUC, Des Dalgety, who said, 'two fifths of Spuc support came from Catholics,' and then added, 'it could be up to 50 per cent.'¹ At this time, the Catholic population in New Zealand was about 15 per cent. *Broadsheet* also argued that:

It is certainly true that much SPUC support is drummed up in Catholic churches and parishioners are urged not only to support the society's aims as being in line with the Church's teachings but also, in the last election directions were made to Catholics to examine carefully the views of parliamentary candidates before casting their votes.²

The magazine also raised the issue of SPUC's finances:

It seems unlikely that subscriptions alone account for SPUC's obvious wealth. Despite its denials of strong links with the Catholic Church, one needs a very vigorous imagination if one supposes that such a large amount of money appears freely, without being actively solicited.³

While it is true that SPUC's membership was not limited to Catholics, they were a major part of the organisation and without their support SPUC would have lost a lot of its funding and its membership would have decreased dramatically. For example, the Roman Catholic diocese of Christchurch donated \$4000 towards SPUC's submissions to the royal commission in 1975. Another \$3000 was used to finance Roman Catholic submissions.⁴ However, Erich Geiringer, a doctor and former president of the NZMA, argued that SPUC tended to elect 'non-Catholic or crypto-Catholic front men and women' in order to disguise the Catholic backing of the organisation.⁵ He also felt that SPUC was handicapped by the fact that the majority of its members did not believe, or were not allowed to believe in contraception.⁶ The only other church that was associated with SPUC was the Mormon Church, but due to its small size in New Zealand, most of the focus against SPUC was on the Catholic

¹ Warwick Roger, 'SPUC: a seven year success story', *New Zealand Listener*, 88, 1991 (1978), p.14.

² Sandra Coney, 'The abortion protagonists', *Broadsheet*, no. 45 (1976), p.25.

³ 'SPUC's Spending Spree', *Broadsheet*, no. 33 (1975), p.11.

⁴ 'R C Money for SPUC', *Press*, November 1975, 80-386-1, ATL.

⁵ Erich Geiringer, *SPUC 'Em All*, Martinborough, 1978, p.15.

⁶ *Ibid*, p.16.

Church.⁷ In contrast, the Baptist, Presbyterian and Methodist churches all adopted policies in favour of reform of the abortion law during the 1970s.⁸ On the other hand, individual members of these churches did not always agree with this stance, and some of those who disagreed joined SPUC.

One of the major strengths of SPUC was that it attracted high-profile members of society to endorse their campaign. The Women's Movement was outraged when the wife of the then Prime Minister, Ruth Kirk became the patron of SPUC:

You have betrayed our trust Mrs Kirk. By saying 'Abortion is murder' you have kicked in the teeth every woman who has ever had an abortion and all those who will. Where is your charity?⁹

The other place where SPUC found much support was among members of parliament. One National member, Bert Walker stated 'abortion was more than just the termination of pregnancy...its proliferation was a threat to the very basis of New Zealand society – strong family life.'¹⁰ Clearly, SPUC attempted to legitimise their cause by getting support from recognisable members of the community, and they had particular success with MPs. This indicates that Parliament tended to be more conservative than the population as a whole. Table 12 shows the members of parliament from 1972 to 1975 who were members of SPUC.

⁷ Sandra Coney, 'The Abortion Protagonists', *Broadsheet*, no. 45 (1976), p.26.

⁸ Jocelyn Brooks et al., *Ill Conceived: Law and Abortion Practice in New Zealand*, Dunedin, 1981, p.50.

⁹ 'Oh Dear, Mrs Kirk', *Broadsheet*, no. 19 (1974), p.8.

¹⁰ 'Repeal petition method "cause for concern"', Item 39, Folder 47, Box 12, ARC 1993.4, CM.

Table 12: Members of Parliament from 1972 to 1975 who were Members of SPUC. ¹¹

| Labour Members of SPUC: | National Members of SPUC: |
|--------------------------------|----------------------------------|
| Sir Basil Arthur | Keith Allen |
| Fraser Coleman | William Birch |
| Henry May | Jim Bolger |
| Colin Moyle | Kenneth Comber |
| Matiu Rata | Frank Gill |
| Joseph Walding | John Harrison |
| Stanley Whitehead | David Highet |
| Ronald Barclay | Henry Lapwood |
| Patrick Blanchfield | Logan Sloane |
| Ian Brooks | Robert Talbot |
| Norman Douglas | William Young |
| William Laney | |
| Brian MacDonell | |
| John O'Brien | |
| Francis O'Flynn | |
| Ian Quigley | |
| John Ridley | |
| Gerard A Wall | |
| John Williams | |
| Trevor Young | |

Those who opposed abortion often believed that if a woman did not or could not raise her child then adoption was the only alternative. One doctor making a submission to the New Zealand commission claimed, 'there was also no such thing as an unwanted baby – evidence of this was a two-year waiting list for babies for adoption in the South Canterbury district alone.' He also felt that the government should assist couples, 'who accept their responsibilities to their country of maintaining and increasing the population to develop New Zealand.' This was followed by a common criticism made by anti-abortionists that New Zealand had to fund an immigration programme because not enough children were being born in New Zealand.¹²

¹¹ 'Society Has Ministers as Members', 79-016-1/03, ATL.

¹² 'No unwanted babies – Doctor', *Christchurch Star*, 10 March 1976, 89-326-1/20, ATL.

SPUC was often condemned by others for opposing abortion so strongly, but providing little support for those women who did continue with unplanned pregnancies. One letter to the editor in the *Dominion* protested:

The Society for Protection of the Unborn Child outlines assistance offered to women and families distressed by unwelcome or unexpected pregnancy. I would be most interested to know what plans Spuc has to provide for the continuing support of the child throughout childhood and adolescence, the mother over that same period; and the rest of the family. Further, is Spuc able to offer a retrospective service to assist older children who are the products of unwanted pregnancies and are already feeling the effects of being unwanted?¹³

In 1976 Des Dalgety claimed that the benefits available to pregnant women and women with children ensured that no woman was destitute if she did not have the support of a husband.¹⁴ However, at this same time the National government was trying to reduce the number of women on the DPB, and this action was being led by the minister of Social Welfare, Bert Walker, who was also a SPUC supporter.

Abortion clinics in New Zealand and NSW often recorded the religion of their patients. These statistics are interesting when considering the Catholic Church's opposition to abortion. In its submission to the royal commission, AMAC included a breakdown of the religion of its patients. The findings are shown below in Table 13. The percentage of Catholic patients was slightly higher than the percentage of Catholics in the population of New Zealand as a whole.

Table 13: Religion of AMAC Patients¹⁵

| | Number | Percentage |
|--------------|--------------|------------|
| Protestants | 1,102 | 58.8 |
| Catholics | 291 | 15.5 |
| Other | 481 | 25.7 |
| Total | 1,874 | 100 |

¹³ Letters to the Editor, *Dominion*, 5 November 1974, 80-386-1, ATL.

¹⁴ 'Many Pregnant Women in Dire Straits Although Aid is Available', *Evening Post*, 10 May 1976, 91-123-1/3, ATL.

¹⁵ Submission 440: AMAC, p.80, Box 32, Com 26, ANZ.

Studies in Australia found similar patterns. In 1979, the Catholic Church in Australia commissioned a report on Catholic women and abortion. The report stated that 'at a most conservative estimate,' 10,000 to 15,000 Catholic women had abortions annually. This was about a quarter of all abortions in Australia, equivalent to the proportion of Catholics in the Australian population as a whole. The report also stated that four of every ten Catholic women seeking abortions were practising their faith.¹⁶ As with birth control, Catholics were no different to the rest of the population in their use of abortion.

The main opponent of abortion in NSW was the Right to Life Association. In 1978 the organisation claimed to have 12,000 members in NSW, although the organisation had branches across Australia.¹⁷ The organisation's views can best be seen in their pamphlet entitled, *Abortion a Woman's Right to Choose?*:

You haven't proved that the unborn child is inferior. You haven't shown why you can do things to him you can't do to a newly born infant.
You say he is merely part of his mother. This is biological nonsense. He is a distinct person. You don't say that his mother has 'lost' something when he's born do you? You say he's unwanted. But why does that give you the right to kill him? If it is permissible to kill the unwanted, most forms of murder, mass killing and genocide, cease to be wrong.¹⁸

In an interview with Anne Summers, an Australian feminist, Sue Russell the secretary of RTL in NSW said that the organisation wrote to schools to ask if they could speak to students. However, state schools did not invite them, although they were often invited to Catholic schools.¹⁹ Likewise, in New Zealand SPUC sent speakers to schools, and not only Catholic schools, but also prominent public secondary schools

¹⁶ 'Abortion rate no lower for Catholics', *Sydney Morning Herald*, 10 March 1979, Scrapbook XXII, MLMSS 7012/7, ML.

¹⁷ Anne Summers, 'The Coming Abortion Backlash', *National Times*, no. 385 (1978), p.24.

¹⁸ NSW RTL Association, 'Abortion a woman's right to choose?', File 10, Box 4, ML 172/03, ML.

¹⁹ Anne Summers, 'The Coming Abortion Backlash', *National Times*, no. 385 (1978), p.24.

for girls.²⁰ SPUC also conducted a poster and essay competition for school students in 1976, as part of a publicity and education campaign.²¹

Opposition to Abortion Law Reform During the 1970s

One action that began in the 1970s was the arson of buildings operating as abortion clinics or abortion referral services. About \$100,000 dollars worth of damage was done to the AMAC hospital after an arson attack in 1976.²² On 28 March 1978, the SOS offices in Ponsonby, Auckland were also set alight. However the group had suspected that this might happen and had removed all the files from its offices. *Broadsheet* located this attack in a wider plan by anti-abortionists. The magazine claimed:

...it is quite likely that the firing of SOS is not just the isolated act of a fringe element in the anti-abortion ranks but further evidence that arson is being used internationally as a strategy against institutions performing abortions or helping women to get them. Besides the New Zealand experience of the firing of AMAC and SOS, clinics all over the world have been burned down or damaged by fire. The Preterm clinic in Sydney was severely damaged by fire a couple of years ago and in the States there have been a number of similar occurrences.²³

As *Broadsheet* stated arson attacks were not limited to New Zealand, and in Sydney, there were a number of similar protests. Control, the abortion referral service and the Population Services International clinics were attacked. The fire at the PSI clinic at Potts Point was started on 9 April 1978, which had been proclaimed Right to Life Sunday. \$50,000 damage was done to the building.²⁴ The PSI clinic also had red paint splashed on its walls.²⁵ While the damage from these fires was repairable, some

²⁰ When my mother was at Christchurch Girls' High School in the mid 1970s, SPUC spoke to senior students. Groups supporting the liberalisation of the law did not speak to the students.

²¹ 'Spuc takes project into the schoolroom', *Dominion*, 11 May 1976, 91-123-1/3, ATL.

²² Sandra Coney, 'Arson at Abortion Clinic', *Broadsheet*, no. 39 (1976), p.13.

²³ Sandra Coney, 'Arson at SOS', *Broadsheet*, no. 59 (1978), pp. 6 -7.

²⁴ Anne Summers, 'The Coming Abortion Backlash', *National Times*, no. 385 (1978), p.24.

²⁵ *Ibid* p.24.

services had to be temporarily suspended, and also the fires would have been intimidating for the staff who worked in the clinics.

Arson was the most extreme form of opposition to abortion in both New Zealand and NSW, but there were many lesser, more common forms of opposition. SPUC often conducted public meetings in order to raise public awareness of their cause, and these meetings often included criticism of how the abortion laws were being interpreted. Des Dalgety told a public meeting in May 1978 that fewer than 100 abortions a year should be performed in New Zealand under the 1977 law.²⁶ SPUC was also able to use their financial strength to protest against decisions made by public organisations. In 1979, SPUC said it was going to consult its solicitors about the payment of Telethon funds to the Christchurch branch of SOS. The Mental Health Foundation received money from the 1977 Telethon and paid \$5000 to SOS for pregnancy advice counsellors.²⁷ It is unclear whether SPUC succeeded in its attempt to stop the funding.

The other most common form of opposition to abortion was to protest outside abortion clinics. Some groups limited this to holding signs and standing outside the building, while others shouted abuse at women entering the clinic, harassed staff, and followed women home afterwards to announce to their families where they had been. Some protestors were prepared to go to some lengths to voice their views. For example, Paul Finlay, a civil engineer from Greymouth travelled to Auckland for a week in 1974, so that he could protest outside AMAC.²⁸ Other than arson, this was the form of protest most abortion law reformers found unacceptable because of the

²⁶ 'Still too many abortions', *Press*, 4 May 1978, 80-386-2, ATL.

²⁷ "'Telethon aid for abortions" under siege', *Evening Post*, 14 August 1979, 91-123-2/3, ATL.

²⁸ 'Man begins 7-day anti-abortion vigil', 9 September 1974, 79-016-1/16, ATL.

way it affected women just about to have abortions, and those who had just had abortions.

In Sydney it was also common for anti-abortionists to protest outside abortion clinics. RTL NSW held a protest outside the PSI Arncliffe clinic on 16 April 1978.²⁹ They made phoney bookings at clinics, to make it difficult for women who did need an abortion to get an appointment.³⁰ They also made false bookings at Control, the Women's Liberation referral service.³¹ In addition, RTL held a large protest in Melbourne on Right to Life Sunday, 9 April 1978. Six thousand people attended the rally, which included an address from Marilyn Pryor, a member of SPUC in New Zealand.³² Rebecca Albury in *Scarlet Woman* acknowledged the strengthening backlash against abortion that was occurring by the end of the 1970s. She felt that while anti-abortionists attempted to justify their views that this was not the real reason for their actions. Instead Albury believed that:

Attitudes toward the availability of abortion do not rest on some superficial political cost-benefit analysis, but spring from largely unconscious assumptions about appropriate sex-role behaviour. Freely available abortion calls into question the basic identification of woman as mother. In a similar way unemployment calls into question the identification of man as worker.³³

Anti-abortionists were not just concerned about the number of abortions being performed; they were concerned about the changing role of women in society. This could be seen by the actions of members of the state parliament of NSW, especially by the end of the 1970s. In March 1976, the State Premier, Sir Eric Wills announced

²⁹ Anne Summers, 'The Coming Abortion Backlash', *National Times*, no. 385 (1978), p.24.

³⁰ Glenda Ballantyne, 'Who Decides? Perspectives on the Abortion Campaign', *Scarlet Woman*, no.8 (1979), p.23.

³¹ Anne Summers, 'The Coming Abortion Backlash', *National Times*, no. 385 (1978), p.24.

³² Glenda Ballantyne, 'Who Decides? Perspectives on the Abortion Campaign', *Scarlet Woman*, no.8 (1979), p.23.

³³ Rebecca Albury, 'Attacks on Abortion Rights: The Latest Round', *Scarlet Woman*, no.9 (1979), p.21.

that an investigation would be carried out on the rapid increase in abortion numbers during the 1970s. Sir Eric felt that 'the number of requests for abortions has got out of hand.'³⁴ RTL lobbied the federal parliament from 1977 to have abortion removed from the Medibank Medical Benefits Schedule. The organisation claimed that it was concerned that 'mothers were being paid to kill their babies.'³⁵ In total 46 petitions were received by the speaker of the House of Representatives from January 1978 to June 1978. In March 1979 the Lusher Motion was introduced to the federal parliament. It aimed to remove medical benefits for abortion. The motion was defeated by 62 votes to 52. However, health funds were given permission to stop refunding abortions. The Hibernian, a Catholic-owned fund announced soon after that it would no longer offer refunds on abortions.³⁶

Attempts to Amend the Law in the 1980s

During the 1980s, anti-abortionists continued to try and prevent women from having abortions, or if they were unable to do this, they made the experience as unpleasant as possible for the women involved. A number of different tactics were employed by anti-abortionists. One was to seek court injunctions to prevent women from having abortions which they believed were illegal. There were two prominent cases in New Zealand where this occurred. One involved a doctor, Melvyn Wall, attempting to prevent a girl from having an abortion. Wall had examined the girl and believed that she should not have an abortion. However, she had obtained a certificate from two other consultants entitling her to one.³⁷

³⁴ 'State Looks into Abortions', *Mirror*, 3 March 1976, Scrapbook XV, MLMSS 7012/6, ML.

³⁵ Glenda Ballantyne, 'Who Decides? Perspectives on the Abortion Campaign', *Scarlet Woman*, no.8 (1979), p.23.

³⁶ Abortion Information Sheet, File 3, Box 4, ML 172/03, ML.

³⁷ WONAAC Newsletter, no. 56, February/March 1982, Item 26, Folder 27, Box 7, ARC 1993.4, CM.



Figure 4: 'Women vs. Dr Wall'. This was a poster used by WONAAC to publicise the actions of Melvyn Wall. EPH-A-ABORTION-1982, ATL.

Wall's attempt failed, and WONAAC lodged a complaint against him with the Medical Council. He was brought before the Medical Disciplinary Committee for professional misconduct of which he was found guilty, and was ordered to pay \$1506.82.³⁸ Wall appealed to the High Court and then to the Court of Appeal which dismissed his appeal.³⁹

The other case involved the boyfriend of a teenage girl trying to prevent her from having an abortion. The boyfriend claimed that 'he sought the orders on behalf of the unborn child for the protection of its life, on his own behalf and his concern and love for the girl and her welfare.'⁴⁰ That case was heard in the Christchurch High Court by Justice Hardie Boys, who granted an interim injunction, preventing certifying consultants from issuing certificates for her abortion, and stopping a surgeon from operating. He also prohibited the teenager from going to Australia to have an abortion. However, the abortion had already been performed by the time the injunction was granted.⁴¹ Still, feminist groups were unhappy that the court was prepared to interfere in what they considered to be an already difficult process. WONAAC commented in a press statement: 'if the rights of the putative father are to override the rights of the mother to have an abortion in accordance with the law, it would appear that the male-dominated judiciary is creating a back-door means of subverting the present law.'⁴² Ultimately, the courts did acknowledge that other parties could not prevent a woman from having an abortion.

³⁸ Order of the Medical Council of New Zealand, 6 December 1982, 91-123-3/3, ATL. See also WONAAC Press Statement, 5 June 1982, 91-123-3/3, ATL.

³⁹ 'Court "sanctions abortion"', *Dominion*, 22 December 1982, 91-123-3/3, ATL.

⁴⁰ 'Father-to-be wins anti-abortion order, but loses his child', *Evening Post*, 12 June 1981, 91-123-5/2, ATL.

⁴¹ Sandra Coney, 'Compulsory Pregnancy', *Broadsheet*, no. 91 (1981), p.7.

⁴² WONAAC Press Statement, 91-123-3/2, ATL.

NSW experienced a similar backlash against abortion rights as in New Zealand. There were attempts by men to stop women from having abortions. One example was of a fifteen-year-old girl who was a state ward and was stopped from having an abortion by the Youth and Community Service Minister. The abortion had been recommended by several doctors and the mother of the girl had consented to the abortion taking place. However, the Supreme Court overruled the minister's decision and allowed the girl to have an abortion.⁴³ Had the decision not been overruled the state government would have found itself in a difficult situation because it had not attempted to change the abortion law, but one of its ministers was using his power to prevent some women from accessing abortion.

There was an attempt to amend the abortion law in New Zealand in October 1983 to make it even more difficult for a woman to obtain an abortion. The Status of the Unborn Child Bill, was introduced to parliament by Doug Kidd, the National MP for Marlborough. Kidd had not drafted the bill himself, but rather consulted with SPUC on it.⁴⁴ The bill granted unborn children the right to legal representation. However, Marilyn Waring, also a National MP, countered with another bill, the Contraception, Sterilisation and Abortion Repeal Bill.⁴⁵ Both bills failed to pass, Waring's bill by 57 votes to 20, and Kidd's bill by 48 votes to 30, and so the abortion law remained the same.⁴⁶ Waring later commented that she would have left parliament had Kidd's bill passed.⁴⁷ During this time, feminist groups in Wellington were informed that Doug Kidd had been having an extra-marital affair with a

⁴³ 'Ward, 15, Wins Abortion Fight' *Daily Telegraph*, 20 April 1982, Scrapbook XXV, MLMSS 7012/7, ML.

⁴⁴ 'Women Call Bill Appalling', *Evening Post*, 13 October 1983, 91-123-3/1, ATL.

⁴⁵ Elspeth Preddey, *The WEL Herstory: The Women's Electoral Lobby in New Zealand 1975 – 2002*, Wellington, 2003, p.103.

⁴⁶ 'Abortion bills', *Dominion*, 20 October 1983, 91-123-3/1, ATL.

⁴⁷ 'Marilyn would have quit', *Evening Post*, 20 October 1983, 91-123-5/2, ATL.

parliamentary secretary who worked for Kaimai MP Bruce Townshend.⁴⁸ This showed Kidd's double standard of morality, and so feminist groups put posters up all over Wellington which stated: 'Doug the SPUC Dance Kidd Hurdles Colleen'.⁴⁹ Later newspaper reports showed that Kidd's mistress was unimpressed with his bill. She apparently said to him 'how could you introduce this? What would you have done if I had been pregnant?' To which Kidd had no answer.⁵⁰ WONAAC released a press statement condemning Kidd's actions:

Moralist MPs who oppose women's rights to abortion cannot hide behind parliamentary rules which serve a double standard – protecting MPs while allowing them to make moral statements they do not live by themselves. Moreover, Mr Kidd is not the only moralist MP to have had a mistress.⁵¹

Although WONAAC did not name other MPs who were having extra-marital affairs, their identity was known in parliamentary circles.

The other major effort of anti-abortionists during the 1980s was to protest and harass women outside abortion clinics. When Lyndhurst Hospital opened on 20 January 1986 in Christchurch, an anti-abortion group decided to form a 'guard of honour' for twelve hours outside the hospital to make it difficult for women to enter the clinic.⁵² Bruce Joslen, a spokesperson for the anti-abortion protestors said that some protestors would wear white coats to represent doctors who performed abortions. He also said, 'there will also be a vacuum cleaner and bucket to represent abortion tools and we have new signs with all the doctors' names.'⁵³ Prior to the clinic opening a patient escort service had been set up so that women could be driven into the hospital, rather than having to walk past the protestors. On 5 September 1990, 20

⁴⁸ 'Secretary doing temporary work', 15 November 1983, 91-123-3/1, ATL.

⁴⁹ Preddey, p.104.

⁵⁰ Sandra Coney, 'Moraliser's Morals', *Broadsheet*, no. 115 (1983), p.8.

⁵¹ WONAAC Press Statement, 22 November 1983, 91-123-3/1, ATL.

⁵² 'Lyndhurst Opens, The Protests Go On...', *Broadsheet*, no. 137 (1986), p.7.

⁵³ 'Abortion escorts strategy', *Christchurch Star*, 17 January 1986, 91-123-4/2, ATL.

protestors were arrested at AMAC for trespassing at the clinic.⁵⁴ *Broadsheet*, in 1990, described some of the measures that anti-abortionists were prepared to take:

Tactics vary but the methods of the anti-abortion brigade include telling women at the clinic that their 'baby' wants to live, intruding on them with prayers and religious songs, throwing plastic fetuses at women going into the clinics, following them home or to work and telling their families/employers that they have had an abortion, physically blocking entry to the clinic and, ultimately, entering the clinics themselves and trying to shut them down.⁵⁵

Anti-abortionists disgusted one abortion consultant in Dunedin so much that he resigned in protest at the harassment of his patients.⁵⁶ In Christchurch another doctor was harassed by anti-abortionists who picketed her home and distributed pamphlets to her neighbours which included a personal attack on the doctor concerned.⁵⁷ Doctors were not the only people who were harassed at home. In 1989, anti-abortionists in Auckland followed women to their homes to inform their families where they had been. Pacific Island women in particular were threatened with this. One protestor also took a Catholic priest to a woman's home where they informed her family, who were members of the Catholic Church, of her abortion. Other women received abusive phone calls at home or had protestors appear on their doorsteps.⁵⁸

The most extreme case occurred at the Parkview abortion clinic in Wellington, where an Operation Rescue squad, based on similar groups in the United States, decided to block the entry to the clinic so that women were unable to enter. Feminist groups were notified of this and formed a group called CHOICE to defend abortion clinics, who arrived at the clinic before the Operation Rescue squad. The squad charged at the women surrounding the clinic, and there were several incidences of violence. As a result, 15 'rescue' members were arrested, as was one person from the

⁵⁴ '20 arrested at medical clinic', *New Zealand Herald*, 6 September 1990, MSX-2957, ATL.

⁵⁵ Cushla Managn, 'Auckland WONAAC Activates', *Broadsheet*, no. 180 (1990), p.7.

⁵⁶ 'Anti-abortion "harassment" angers doctor', 91-123-4/1, ATL.

⁵⁷ 'Militant Moralists', *Dominion*, 18 October 1985, 91-123-4/1, ATL.

⁵⁸ 'Activists confront patients at home', *Sunday Star*, 5 November 1989, MSX-2957, ATL.

feminist group.⁵⁹ This initial confrontation was not the end of Operation Rescue's actions. On 17 April 1990, six members were charged with wilful trespass after blockading the doors to the Wellington Parkview Clinic.⁶⁰ Operation Rescue's actions extended beyond Wellington. In September 1990, 21 members of the group were convicted of trespassing at an abortion clinic in Auckland. The group tried to argue that its actions were necessary to stop 'unborn children from being killed.'⁶¹ It was often seen as contradictory that groups who claimed to be 'pro-life' were prepared to take such aggressive action against others. It was believed that Operation Rescue had decided on this course of action as a response to Health minister, Helen Clark's attempt to change the abortion laws.

Arson attacks continued to be another means by which anti-abortionists made their feelings known during the 1980s. In 1987, Auckland's Epsom Day Hospital was closed for six weeks after an arson attack.⁶² On 25 October 1989, the Lyndhurst Hospital in Christchurch was attacked by arsonists for the third time in four years. Fire and smoke caused extensive damaged to the building and one room was gutted. Previously the clinic had been firebombed, and this resulted in a man being committed to Sunnyside Hospital.⁶³ Arson was the most aggressive form of opposing abortion, as it put people's lives at risk, and it normally resulted in clinics having to close for a period of time while repairs were carried out. This put the care of patients in jeopardy. Anti-abortion organisations took no responsibility for the arsons. However, they did not condemn these acts either.

⁵⁹ 'Hell's Angels', *Broadsheet*, no. 174 (1989/1990), p.5.

⁶⁰ 'More protests likely at clinic', *Dominion*, 18 April 1990, MSX-2957, ATL.

⁶¹ '21 guilty of trespass at abortion clinic', *Dominion*, 29 September 1990, MSX-2957, ATL.

⁶² Jenny Rankine, 'More Anti-Abortion Arson', *Broadsheet*, no. 150 (1987), p.9.

⁶³ 'Abortion clinic hit by arson again', *Dominion*, 26 October 1989, MSX-2957, ATL.

The most common way of opposing abortion in Sydney, as in New Zealand, was by protesting outside abortion clinics. In 1982 a Roman Catholic lay brother (a member of the Mother of God community) was charged with trespassing at the Preterm Clinic in Surry Hills.⁶⁴ Also in the early 1980s, an inner-city abortion clinic in Sydney had a small group called Aid Life protesting outside its premises every day. Women and staff were verbally abused as they entered and exited the clinic. Some women and staff were even followed, and one staff member was accused of being a 'murderess' at a bus stop in front of other people. Other staff received abusive phone calls at home and some were threatened with violence. A fire was lit in the building's foyer as well as being defaced with red paint on several occasions.⁶⁵ These actions suggest that not only did anti-abortionists have several tactics, these tactics were similar in New Zealand and in Sydney. While women's groups were concerned by the intimidating tactics used by anti-abortionists, they were also aware that anti-abortionists were not just concerned about abortion. According to *Right to Choose*, Australian anti-abortionists were similar to their counterparts in the United States: 'the overall mood of the [Moral Majority] movement is not just for motherhood and the family, but for the domination of women by men (who are known in the movement as "God's authority in the home").'⁶⁶ By the 1980s women were beginning to make visible advances in society due in part to the work of the feminist movement of the 1970s. Just as abortion had been the central issue for feminists in the 1970s, so it was the central issue for anti-feminist groups to oppose in the 1980s and beyond.

Women had problems accessing abortion when District Health Boards refused to provide abortion facilities. This happened on the West Coast, where in 1986 a one-

⁶⁴ 'Trespass Charge Denied', *SMH*, 3 April 1982, Scrapbook XXV, MLMSS 7012/7, ML.

⁶⁵ 'Attacks on Abortion Clinic Clients and Staff', *Right to Choose*, no.24 (Summer 1981/82), p.12.

⁶⁶ 'Women and the Moral Majority', *Right to Choose*, no. 24 (1981/82), p.20.

month-old abortion facility was closed, and although many women complained, the Health Minister, Dr Michael Bassett and the Minister of Women's Affairs, Ann Hercus, claimed that the government did not have the power to require health boards to provide these facilities.⁶⁷ WONAAC organised a protest at parliament against this decision, and the failure of the Labour government to honour its election promise of providing 'publicly-funded facilities for counselling and abortion on an equitable basis throughout the country'.⁶⁸ Women were forced to travel from the West Coast to Christchurch for abortions, but because they did not live in the Canterbury District Health Board area they were not strictly entitled to have abortions there. Consequently, they had to give false addresses. The West Coast was not the only area not adequately provided for in its abortion services. Even women who lived in the major cities of New Zealand often had trouble obtaining an abortion without delay in the 1980s. In the three main centres of Auckland, Wellington and Christchurch women often had to wait three to four weeks for an abortion due to inadequate facilities.⁶⁹ This was normally because of funding shortages.

During the 1980s WONAAC continued to promote the idea that the 1977 CSA Act should be repealed. In 1987, WONAAC drafted a private member's bill which would have decriminalised abortion, giving any woman the right to terminate her pregnancy. The organisation hoped that one of the nine Labour women MPs would support the bill, but they collectively declined to do so.⁷⁰ However, in 1989 Helen Clark as Minister of Health introduced a bill to change two aspects of the 1977 law. These changes had been recommended by the Abortion Supervisory Committee. The

⁶⁷ Alison McCulloch, 'Abortion Activist', *Broadsheet*, no. 144 (1986), p.35. See also, 'Abortion decision backlash', *Dominion* 30 May 1988, 91-123-4/2, ATL.

⁶⁸ WONAAC Press Statement, 5 May 1986, 91-123-4/2, ATL.

⁶⁹ Di Cleary (WONAAC) to David Caygill (Minister of Health), 13 October 1988, 91-123-4/3, ATL.

⁷⁰ 'Wonaac press on for abortion bill', *Dominion*, 9 June 1988, 91-123-4/3, ATL.

first change was that the ban on giving contraceptive advice to under-sixteen-year-olds should end; and the second was that women should no longer be required to see two certifying consultants to have an abortion approved.⁷¹ Instead any two doctors could approve an abortion. This was meant to make abortion more accessible for women in rural areas where there were not often two certifying consultants.⁷² However, the bill caused considerable debate in parliament and it seemed possible that anti-abortion amendments that had been introduced might be passed. As the debate was continuing through 1990 and with an election looming, Clark decided to split the bill into two: the provision allowing under-sixteen-year-olds contraceptive advice was passed, while the second part concerning certifying consultants was held over for future consideration.⁷³ In any case, WONAAC felt that the changes proposed by Clark about certifying consultants were inadequate, because District Health Boards could still refuse to provide abortion facilities, so many women would still have to travel to have their abortions.⁷⁴ Margaret Sparrow, the president of ALRANZ, also criticised Clark's bill for failing to deal with the problem of a lack of operating doctors.⁷⁵

There were attempts to change the law on abortion at the state level during the 1980s in Australia. Reverend Fred Nile, the national co-ordinator of the Festival of Light Movement, an anti-abortion group and a member of the legislative council, introduced a motion in November 1982 stating:

⁷¹ Helen Clark, 'Women and Health', in WEL, ed., *Walking Backwards into the Future*, Hamilton, 1993, p.58.

⁷² Clark, 'Women and Health', p.58.

⁷³ Clark, 'Women and Health', pp. 58 - 9. The contraceptive section was passed, in part because of the increased awareness of AIDS and the concern about young people not being able to protect themselves from it, or being informed on how to protect themselves from it. The second section of the bill was not debated again as the National Party won the 1990 election, and was not prepared to continue debates on the issue.

⁷⁴ WONAAC Press Release, 24 October 1989, 91-123-5/1, ATL.

⁷⁵ 'Pro-abortionists criticise amendment', *Dominion*, 28 October 1989, MSX-2957, ATL.

this House affirms that the paramount right to life is invested in each human being from the moment of fertilisation without regard to age, sex, health or conditions or dependency and that every human life is entitled to protection by both the State and society.⁷⁶

The motion was delayed by government business and there was never a full debate. However, this shows how abortion rights could be attacked, and why women's organisations were continually having to justify their position to the public, as anti-abortionists were not prepared to give up the fight to change the abortion laws. In 1988 members of the legislative council, Marie Bignold and Fred Nile, made further attempts to restrict access to abortion. In response WAAC and other pro-choice groups lobbied successfully against the proposed changes.⁷⁷

The 1990s and Beyond

Patterns of protest which emerged in the 1980s continued through into the 1990s in both New Zealand and NSW. Although a change of government occurred in New Zealand in 1990, there was no change in the abortion law, or any further attempts to change the abortion law. In Australia, however, there were attempts to change the abortion laws at both the federal level and the state level in NSW.

The National government which came to power in late 1990 in New Zealand was more conservative than its predecessor. As can be seen in Table 14 over half the cabinet held conservative views on abortion. Some members of that government, including the Prime Minister, had been in parliament in 1977 when the law was changed and were aware of the destructive impact that the abortion debate could have on a party. Therefore, despite protests from both sides during its nine years of office there was no attempt to change the abortion law by the fourth National government.

⁷⁶ Abortion Information Sheet, File 3, Box 4, ML 172/03, ML.

⁷⁷ 'Women's Abortion Action Campaign' file: Correspondence 1989, Box 2, ML 172/03, ML.

Table 14: The 1990 National Cabinet, Categorised According to Views on Abortion⁷⁸

| Liberals | Conservative/Liberal | Conservative |
|---|---|---|
| McKinnon Richardson Shipley Graham | East Burdon Upton Marshall Luxton | Bolger Birch Falloon Kidd Banks Cooper Smith McTigue Storey Peters Creech |

During this period ASC continued to recommend changes to the law. These recommendations were made to the Justice and Law Reform Committee, who in turn proposed in 1996 that the certifying consultant scheme be abolished and instead all general practitioners should be able to authorise abortions.⁷⁹ At this time there were fewer than two hundred certifying consultants in New Zealand, and every woman wanting to have an abortion had to receive approval from two consultants.⁸⁰ However, there were no moves to follow up on the recommendations.

When the Labour government came to power in 1999, Justice Minister Phil Goff promised a review of the abortion laws to make access to abortion more easy, including allowing abortion on socio-economic grounds, and allowing abortions after twenty weeks of gestation in cases of significant foetal abnormality.⁸¹ However the review was cancelled in 2001.

⁷⁸ The Composition of the National Government Cabinet, 5 November 1990, MSX-2957, ATL.

⁷⁹ *Evening Post* (EP), 28 August 1996.

⁸⁰ EP, 28 August 1996.

⁸¹ *Press*, 1 August 2001.

Because no abortion law changes have been proposed in New Zealand in the last decade or more, there has been little debate on abortion in parliament. Consequently, it is not always clear how MPs view abortion. However, each year the members of the ASC have to be confirmed in parliament, and some MPs take this opportunity to express their views on abortion. In August 2001 Sue Kedgley, a Green party member and a women's rights activist in the 1970s, talked of the problems that some New Zealand women still had in obtaining abortions:

At the moment there is already an extraordinary problem relating to the inequity of access to abortion in New Zealand. On the East Coast, for example, there is only one certifying consultant, based in Gisborne. In Northland, there is one in Rawene and one in Whangarei. We have areas such as Southland where there are none.⁸²

The problems of access to abortion, particularly in Southland, have continually been made public by doctors. However, as yet no solution to this problem has been implemented. Women in Southland are forced to travel to Christchurch if they need an abortion. As at January 2003 an average of six women a week were making the journey from Invercargill to the Lyndhurst Hospital in Christchurch. A Christchurch doctor, Pippa MacKay, suggested that a team from Lyndhurst travel to Invercargill to provide the service to women in the area, rather than making the women travel. There were doctors capable of performing abortions in Invercargill, but, they chose not to do so on moral grounds as they opposed abortion.⁸³ This reluctance is an increasing problem in New Zealand where medical staff are electing not to work at abortion clinics. In the 2003 ASC report it was noted that abortion providers in Wellington and Christchurch were recruiting overseas staff to be certifying consultants and nurses.⁸⁴

⁸² NZPD, 2001, 594, p.11217.

⁸³ *Southland Times*, 29 January 2003.

⁸⁴ AJHR, 2003, E28, pp.8 – 9.

The problem of access was not the only issue Sue Kedgley raised in the debates in parliament. She also challenged the right of male MPs to dominate the debate on abortion:

I say I do find it slightly galling when male MPs talk about the issue of abortion and the right of women to have abortions. I do believe that this is ultimately a women's issue and that women have to make that decision. It is women who have abortions, and therefore it is an issue that principally should be debated by women in New Zealand.⁸⁵

Kedgley, with her background in women's liberation politics, was voicing concerns not heard in parliament since the 1970s. By the 1990s the critique of restrictive abortion laws was coming from doctors and the ASC, in part because women's groups did not exist in the numbers they had earlier on. WONAAC folded in the 1990s, and while ALRANZ still exists, its branches have closed down, and total membership numbers are less than 100. In contrast, there has been a rising number of women in parliament, and also a new generation of male MPs have entered politics as well. Only two MPs remain who were in parliament in 1977: Jonathon Hunt and Richard Prebble. However, ALRANZ claimed in its November 2002 newsletter that conservative MPs are still in a majority, and this was also part of Phil Goff's reason for cancelling the review of the laws; he felt that there was not the necessary support in parliament.⁸⁶

During the 1990s and beyond, SPUC and other anti-abortion organisations have continued to advertise their views and protest, although on a lesser scale than in the 1980s. In 2002, SPUC placed an advertisement in a variety of newspapers claiming that abortions could increase the risk of breast cancer. A complaint was made to the Advertising Standards Authority which was upheld. The advertisement breached the advertising code of ethics by provoking fear and guilt in women who

⁸⁵ NZPD, 2001, 594, p.11218.

⁸⁶ Preddey, p.104.

had had an abortion, or were going to have an abortion.⁸⁷ Anti-abortionists continue to advertise their opinions in newspapers, cinemas and by protesting outside clinics.

The situation in Australia was similar concerning the actions of anti-abortionists. However, there were more attempts to alter the abortion law in NSW and Australia in the 1990s. In 1990 Alasdair Webster reintroduced his bill to eliminate Medicare rebates for abortion services into the federal parliament.⁸⁸ Women's groups protested against this action and argued that if abortion services were to lose their status because of the personal or religious views of some members of society then contraceptive services, blood transfusions and organ transplants could also be excluded on the same basis.⁸⁹ The Abortion Rights Coalition also criticised Webster for saying that abortion services were a waste of public money. The Coalition responded stating, 'parliamentarians need to be reminded that "public moneys" is women's money too. Women pay taxes and the Medicare levy. If women do not consider this expenditure a waste, then it is not.'⁹⁰ Webster failed in his attempt to have abortion exempt from Medicare rebates.

The other major attempt in the 1990s to restrict access to abortion was in 1991 in the state parliament of NSW. Fred Nile introduced the Procurement of Miscarriage Limitation Bill to outlaw the provision of abortions at private clinics and hospitals.⁹¹ Fred Nile claimed women had abortions for convenience or because of pressure from men or society more generally. The Abortion Rights Coalition condemned his actions because:

⁸⁷ *Dominion Post*, 28 April 2003.

⁸⁸ ARC newsletter, December 1990, File 3, Box 4, ML 172/03, ML

⁸⁹ *Ibid.*

⁹⁰ *Ibid.*

⁹¹ Untitled paper, file: Abortion Rights Coalition, File 3, Box 4, ML 172/03, ML.

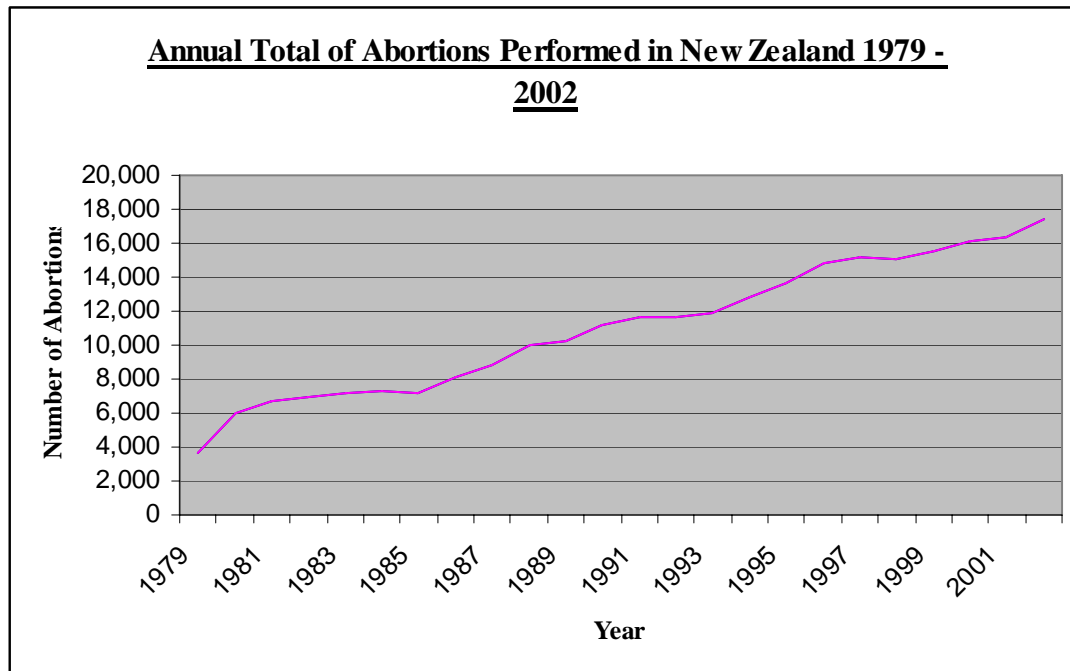
Nowhere does he deal with preventing unplanned pregnancies or addressing the social and economic problems which he himself acknowledges are factors in women's decisions. He is not really concerned about women at all. He does not see women as autonomous people, fully capable of making responsible decisions for themselves. Nor does he grant women the basic right of control over their own bodies.⁹²

Since this time there have been no attempts to restrict abortion access in NSW. Therefore, the abortion law in NSW is still based on case law determined in 1971 in a Magistrates' Court. This law has never been challenged in the courts, and attempts to change it in parliament have failed. Although abortion is still referred to in the Crimes Act in NSW it is easily available, and anyone who has access to the Yellow Pages will find a list of abortion services provided by private doctors and clinics.

While the backlash against access to abortion has been strong over the last twenty years in both New Zealand and NSW, anti-abortionists have had no success in changing the law. Nor have those who would like to see the law made more liberal. In both countries the number of women having abortions has increased each year, although accurate statistics for NSW are difficult to come by because there is no counterpart for the ASC in that state. This is because the law was not changed by parliament in NSW, and so there was not an opportunity for parliament to legislate for abortion statistics to be recorded. Figure 5 lists the number of abortions performed in New Zealand from 1979 to 2002.

⁹² Untitled paper, file: Abortion Rights Coalition, File 3, Box 4, ML 172/03, ML.

Figure 5: The Total Number of Abortions Performed in New Zealand 1979 - 2002⁹³



While all groups in society acknowledge that the number of abortions being performed needs to be reduced, no solution has been found as how to do this. However, the abortion rate is still lower than it was during the Depression of the 1930s. On the other hand, with the exception of the United States, New Zealand and Australia have two of the highest abortion rates in the world when compared to other low fertility countries.⁹⁴ While anti-abortion groups offer the solution of restricting access to abortion, it has been shown historically that all this would do is make women travel to Australia, or turn to backstreet abortionists. Rather the solution seems to lie with reducing the number of unwanted pregnancies. The 2003 ASC report disclosed that over half of all women having an abortion in New Zealand were using no form of contraception at the time they became pregnant.⁹⁵

⁹³ AJHR, 2003, E28, p.11.

⁹⁴ Ibid., p.14.

⁹⁵ AJHR, 2003, E28, p.20.

Conclusion

Due to the nature of the abortion debate it seems unlikely that the two sides will ever come to an agreement. Both see abortion as a crucial issue, and both see the abortion debate as considering something greater than abortion. The debate brings into play the issues of ethics, female sexuality, the role of women in society, and the treatment of mothers in society. Every year the abortion issue appears in newspaper articles, in letters to the editor and on internet pages. If it can be agreed that there are two opposing views on abortion that cannot be reconciled, then the question becomes who should determine whether women have access to freely available abortion or not? The debate is really over who has the power to decide, and after more than thirty years of public and political debate in New Zealand and NSW an answer is yet to be found. The answer New Zealand has so far come up with is that parliament decides. In western liberal thought this is supposedly representative, given that New Zealand is a democracy. From a feminist perspective this is not the case, as women are still underrepresented in parliament.

The different legal position of abortion in New Zealand and NSW is reflective of the structure of political parties in each place. Abortion was and still is an issue which has the potential to divide parties. Consequently, politicians have avoided dealing with the issue at all costs. In New Zealand abortion divided both the Labour and National parties, but certain members of those parties actively supported restricting the laws; this meant that parliament was forced to deal with the issue, and a restrictive law was introduced reflecting the conservative nature of the majority of New Zealand politicians. In NSW, the abortion issue had the potential to be far more divisive for the Labor Party than the Liberal Party, because the Labor Party had a

strong Catholic base as well as a strong socially-liberal base and the two were diametrically opposed on the abortion issue. While the Labor Party was in power for most of the 1970s in NSW, they were not prepared to risk introducing any legislation that would damage their party. Since the 1970s this also seems to be the reason for political parties in New Zealand and NSW not introducing abortion legislation. From a politician's point of view, the abortion laws are best left alone.

Conclusion:

During the 1970s abortion was the central issue for the second wave feminist movement in both New Zealand and NSW. Control over one's body was central to women's liberationists and access to abortion was a vital part of this control. Those members of women's liberationist groups who did not support abortion law reform left the organisations and formed their own groups known as Feminists for Life. No other issue divided second wave feminism as abortion did. Moreover, abortion was opposed by very strong lobby groups, who were able to influence political decisions, and this meant feminists had to support abortion law reform or repeal even more strongly than their other causes.

Many feminist groups supported the liberalisation of the abortion laws, but there were two main groups in each country whose sole purpose was either to reform or repeal the abortion laws. The liberal organisation in each state contacted each other, and the radical organisation in each state contacted each other. While the liberal organisations – ALRANZ and ALRA – did not label themselves feminist organisations, they had many feminist members, and also received support from other feminist groups. Although the approaches of the liberal and radical groups differed, it appears that there was no major animosity between the two groups in New Zealand. In NSW there were some differences, due to differing ideas on how to change the law, and this was based in part on a generation gap between the two organisations. However, because access to abortion was easier in NSW than in New Zealand, groups could afford to be less united. In New Zealand where SPUC was able to influence

politicians strongly, it was necessary for groups who supported the liberalisation of the laws to support one another.

Feminists were not just concerned about making abortion legal; they were also concerned with making it accessible to all women. Lower class women historically have had more difficulty accessing abortion, particularly in New Zealand where travel was normally required. Also, Maori and Pacific Island women were more restricted in their access to abortion, partly for financial reasons, but also because their cultures were less tolerant of abortion, in part because they believed that freely available abortion would result in a decrease in their populations. In NSW, women's groups included the demand for no forced sterilisation in their protests and writings as an acknowledgment of the forced sterilisation of Aboriginal women. It is difficult to determine to what extent Aboriginal women used abortion services; however after a generation of forced sterilisation and having their children forcibly taken from them it is clear that their main concerns lay elsewhere.

Women in both New Zealand and NSW kept in touch with one another so that they knew what their counterpart organisations were doing. Often they shared ideas, particularly by swapping articles published in newsletters and having speakers travel to each country to discuss what had been happening. When it became difficult for women to have abortions in New Zealand after the passing of the Contraception, Sterilisation and Abortion Act in 1977, Australian women, particularly in Sydney, protested outside New Zealand government buildings and when the New Zealand Prime Minister visited Australia.

While the focus of this thesis is on feminist support for abortion law reform, it is difficult to understand why the situation in New Zealand was so different from that in NSW unless the political situation in New Zealand at the time is understood. Abortion was an issue that divided parties in western political systems because those parties were based on economic views more than anything else. This is why parties in NSW were reluctant to debate the abortion law, particularly the Labor Party for whom it would have been particularly divisive because of the strong Catholic presence in the party. The royal commission that was held in Australia could be ignored by the NSW government because it was a federal commission, and abortion was a health issue, something that state government legislated on. In contrast, in New Zealand it had been agreed that the findings of the royal commission would result in legislation on abortion laws. This coupled with the fact that there were a number of MPs who were willing to introduce restrictive abortion bills, namely Gerard Wall and Frank Gill, meant that the issue would not go away.

Although some groups in society will always oppose liberal abortion laws, these laws, unlike restrictive laws, do not create further problems that governments need to deal with. However, if a restrictive law is passed, eventually it will be interpreted more and more liberally so that demands for abortion can be met. If this does not happen, then a health crisis can result, as in New Zealand during the late 1970s when women were having to travel to Australia for abortions. Even in 2004, there are reports in the New Zealand newspapers of the problems caused by having certifying consultants rather than allowing general practitioners to approve abortions.¹ It seems likely that the New Zealand parliament will eventually have to deal with the

¹ 'Abortion fees top \$3.5m', *Press*, 21 January 2004.

abortion issue again, because although an abortion on demand situation does exist in practice, there are still procedural problems due to the 1977 legislation. Whereas in NSW this will not have to happen, unless there is a strong campaign to remove abortion from the Crimes Act or if the Levine Ruling is overturned. This is unlikely because in that state an equilibrium has been found. If there was a push to remove abortion from the Crimes Act it could result in a backlash where the abortion laws are restricted.

Despite NSW having a more liberal abortion law in the 1970s than New Zealand, the abortion scene in Sydney had its own problems. Prior to the law being clarified, doctors had performed abortions for exorbitant fees, some of which were used to pay police officers to avoid prosecution. However, once abortion was found to be legal, then there was not the same opportunity for doctors to charge as much, resulting in some of them not being happy about the law change. These doctors were able to operate out of their own surgeries, both before and after the clarification of the law, rather than perform abortions in clinics, and so it was difficult to monitor the standard of care that they were providing. Counselling was often not offered, let alone provided. Other large clinics were set up that performed many abortions each day, and again women were not given high quality medical care. Many women, especially those from out of the state were block-booked and had to wait many hours before seeing anyone. Another common complaint was that some doctors did not give women the option of having a local anaesthetic; they were given general anaesthetics, which were only necessary for second trimester abortions. All of these problems led to the referral group Control being formed to monitor the situation in Sydney. Because doctors in New Zealand cannot perform abortions in private surgeries, and

because most of the clinics are run by the public health system, there have been few problems with the quality of care provided for women having abortion in New Zealand.

The trans-Tasman abortion service which operated throughout the 1970s, but received particular attention in the late 1970s after the passing of the Contraception, Sterilisation and Abortion Act in New Zealand in December 1977, ironically assisted politicians in New Zealand to pass a restrictive law. If New Zealand women had had nowhere to go, then many would have turned to backstreet abortionists, and earlier problems that New Zealand had experienced with abortions would have returned. If large numbers of women had been admitted to hospitals with septicaemia this would have made it difficult for parliament to justify the 1977 act, and changes would have been necessary. The survival of the law also owes much to doctors who were prepared to interpret the mental health provision more and more liberally.

The service that was provided to New Zealand women by feminist groups, in both New Zealand and Sydney, showed the degree of interaction that was possible between two groups with a similar outlook, even though they were in different countries, and how they were able to work together to solve a problem that had been created by the New Zealand parliament. In part, because the Sydney abortion scene was unregulated, it was able to absorb the large numbers of women coming from New Zealand, as well as Queensland, for abortions, although at times the services that were provided were less than adequate. In any case, by the early 1980s only women needing second trimester abortions were travelling to Sydney, while other women were able to have abortions in New Zealand.

While the law in New Zealand became more liberally interpreted by doctors in the 1980s, and abortion continued to be accessible in NSW, opposition to abortion continued to grow. Despite financing strong campaigns, SPUC and RTL had not been able to limit abortion as they had wished to. In Australia there were attempts to remove abortion from the national health scheme, which would have made it inaccessible for poor women. In New Zealand there was one endeavour to make the law more restrictive in 1983, but after this failed there were no further attempts. Both countries experienced protests outside abortion clinics, some of which involved abusing staff and clients as they entered and exited the clinics, others which involved following staff and patients home and harassing them at the time or at a later date. This form of protest reached its height in New Zealand in the late 1980s and early 1990s with the formation of Operation Rescue, a group based on an American organisation of the same name who tried to surround abortion clinics and forcibly prevent women from entering them. While protests continued throughout the 1990s in both New Zealand and NSW, the frequency and ferocity of those protests decreased. While the situation has never been as extreme as that in the United States, anti-abortion organisations in both New Zealand and Australia are aware of what is happening there, and keep in contact with those organisations.

Those who oppose abortion, often oppose much more than just abortion. They equate abortion with female autonomy, particularly in regards to sexuality, and they blame the women's rights movement of the 1970s for the downfall of the 'traditional family' and the creation of a permissive society. Just as abortion was the central issue for second wave feminists, so it was for those who opposed second wave feminism. The difference is that second wave feminist support for abortion was based on their

knowledge of what had happened previously to women who needed abortions, but did not have access to safe abortions. In contrast, anti-abortionists see abortion as something that has occurred only since it has become legal. They often cite rising abortion numbers, forgetting that prior to the 1970s there were many women having abortions that were not recorded. The debate on abortion will continue in western societies, as well as elsewhere. However, history has shown that women who need abortion are determined to have them. Society's role is in deciding whether or not they will have these abortions safely.

Second wave feminists supported abortion law reform whole-heartedly. Those women who claimed to be feminists, but did not support reform of the laws were criticised. Their right to identify as feminists was challenged and they had to leave the movement. Despite ongoing opposition from anti-abortionists, access to abortion in New Zealand and NSW has been maintained, although women living in rural areas have to travel to access abortions. 'A woman's right to choose' was the central concern of the women's liberationists of the 1970s. Even though abortion laws have not been repealed either in New Zealand or NSW, in practice women now have a much greater degree of choice in the issue than women living in the early 1970s. However, the basic feminist demand to have abortion removed from the Crimes Act is yet to be realised.

Appendix A:

Laws Relating to Abortion in New Zealand

The Crimes Act 1961, No. 43

Abortion

182. Killing unborn child – (1) Every one is liable to imprisonment for a term not exceeding fourteen years who causes the death of any child that has not become a human being in such a manner that he would have been guilty of murder if the child had become a human being.

(2) No one is guilty of any crime who before or during the birth of any child causes its death by means employed in good faith for the preservation of the life of the mother.

183. Procuring abortion by drug or instrument – (1) Every one is liable to imprisonment for a term not exceeding fourteen years who, with intent to procure the miscarriage of any woman or girl, whether she is with child or not, -

(a) Unlawfully administers to or causes to be taken by her any poison or any drug or any noxious thing;

or

(b) Unlawfully uses on her any instrument.

(2) The woman or girl shall not be charged as a party to an offence against this section.

184. Procuring abortion by other means – (1) Every one is liable to imprisonment for a term not exceeding ten years who, with intent to procure the miscarriage of any woman or girl, whether she is with child or not, unlawfully uses on her any means whatsoever, not being means to which section 183 of this Act applies.

(2) The woman or girl shall not be charged as a party to an offence against this section.

185. Female procuring her own miscarriage – Every woman or girl is liable to imprisonment for a term not exceeding seven years who with intent to procure miscarriage, whether she is with child or not, -

(a) Unlawfully administers to herself, or permits to be administered to her, any poison or any drug or any noxious thing; or

(b) Unlawfully uses on herself, or permits to be used on her, any instrument; or

(c) Unlawfully uses on herself, or permits to be used on her, any other means whatsoever.

186. Supplying means of procuring abortion – Every one is liable to imprisonment for a term not exceeding seven years who unlawfully supplies or procures any poison or any drug or any noxious thing, or any instrument or other thing, whether of a like

nature or not, believing that it is intended to be unlawfully used to procure miscarriage.

187. Effectiveness of means used immaterial – The provisions of sections 183 to 186 of this Act shall apply whether or not the poison, drug, thing, instrument, or means administered, taken, supplied, or procured was in fact capable of procuring miscarriage.

The Hospitals Amendment Act 1975, No.5

1. Short Title and commencement – (1) This Act may be cited as the Hospitals Amendment Act 1975, and shall be read together with and deemed part of the Hospitals Act 1957 (hereinafter referred to as the principal Act).

(2) This Act shall come into force on the 1st day of September 1975.

2. Therapeutic abortions to be carried out only in institutions under the control of a Hospital Board, or in approved licensed hospital – The principal Act is hereby amended by inserting, after section 140, the following section:

“140A. (1) Nothing in section 182 (2) of the Crimes Act 1961 (which relates to the causing of the death of a child in good faith for the preservation of the life of the mother) shall apply unless the operation is performed in an institution under the control of a Hospital Board under this Act or in any licensed hospital that may be approved for this purpose by the Director-General of Health upon his being satisfied that it maintains or uses adequate and independent counselling services and also procedures to ensure that all operations authorised are within the law and that the facilities for operation and after-care are satisfactory:

“Provided that nothing in this section shall apply in any case where by reason of the urgency of the case the life of the mother is likely to be prejudiced by the time occupied in conveying her to such an institution or licensed hospital.

“(2) Whenever any therapeutic abortion, or other operation that could lead to or effect an abortion or subsequent unnatural miscarriage, is performed, a record of that operation and the reason for it, but without the patient’s name, shall be made and forwarded within 1 month to the Director-General of Health.”

The Crimes Amendment Act 1977, No. 113

1. Short Title – This Act may be cited as the Crimes Amendment Act 1977, and shall be read together with and deemed part of the Crimes Act 1961 (hereinafter referred to as the principal Act).

2. Further provision relating to surgical operations – The principal Act is hereby amended by inserting, after section 61, the following section:

“61A. (1) Every one is protected from criminal responsibility for performing with reasonable care and skill any surgical operation upon any person if the operation is performed with the consent of that person, or of any person lawfully entitles to consent on his behalf to the operation, and for a lawful purpose.

“(2) Without limiting the term ‘lawful purpose’ in subsection (1) of this section, a surgical operation that is performed for the purpose of rendering the patient sterile is performed for a lawful purpose.”

3. Miscarriage defined – The principal Act is hereby amended by inserting, after section 182, the following section:

“182A. For the purposes of section 183 to 187 of this Act the term ‘miscarriage’ means –

“(a) The destruction or death of an embryo or fetus after implantation; or

“(b) The premature expulsion or removal of an embryo or fetus after implantation, otherwise than for the purpose of inducing the birth of a fetus believed to be viable or removing a fetus that has died.”

4. Procuring abortion by any means – The principal Act is hereby amended by repealing sections 183 and 184, and substituting the following section:

“183. (1) Everyone is liable to imprisonment for a term not exceeding 14 years who, with intent to procure the miscarriage of any woman or girl, whether she is pregnant or not, -

“(a) Unlawfully administers to or causes to be taken by her any poison or any drug or any noxious thing; or

“(b) Unlawfully uses on her any instrument; or

“(c) Unlawfully uses on her any means other than any means referred to in paragraph (a) or paragraph (b) of this subsection.

“(2) The woman or girl shall not be charged as a party to an offence against this section.”

5. Female procuring her own miscarriage – Section 185 of the principal Act is hereby repealed.

6. Meaning of “unlawfully” – The principal Act is hereby amended by inserting, after section 187, the following section:

“187A. (1) For the purposes of sections 183 to 186 of this Act, any act specified in either of those sections is done unlawfully unless, in the case of a pregnancy of not more than 20 weeks’ gestation, the person doing the act believes –

“(a) That the continuance of the pregnancy would result in serious danger (not being danger normally attendant upon childbirth) to the life, or to the physical or mental health, of the woman or girl, and that the danger cannot be averted by any other means; or

(b) That the pregnancy is the result of sexual intercourse between –

“(i) A parent and child; or

“(ii) A brother and sister; whether of the whole blood or of the half blood; or

“(iii) A grandparent and grandchild; or

“(c) That the pregnancy is the result of sexual intercourse that constitutes an offence against section 131 (1) of this Act; or

“(d) That the woman or girl is severely subnormal within the meaning of sections 138 (2) of this Act.

“(2) The following matters, while not in themselves grounds for any act specified in section 183 or section 186 of this Act, may be taken into account in determining for the purposes of subsection (1) (a) of this section, whether the continuances of the pregnancy would result in serious danger to her life or to her physical or mental health:

“(a) The age of the woman or girl concerned is near the beginning or the end of the usual child-bearing years:

“(b) The fact (where such is the case) that there are reasonable grounds for believing that the pregnancy is the result of rape.

“(3) For the purposes of sections 183 and 186 of this Act, any act specified in either of those sections is done unlawfully unless, in the case of a pregnancy of more than 20 weeks’ gestation, the person doing the act believes that the miscarriage is necessary to save the life of the woman or girl or to prevent serious permanent injury to her physical or mental health.

“(4) Where a registered medical practitioner, in pursuance of a certificate issued by 2 certifying consultants under section 33 of the Contraception, Sterilisation and Abortion Act 1977, does any act specified in section 183 or section 186 of this Act, the doing of that act shall not be unlawful for the purposes of the section applicable unless it is proved that, at the time when he did that act, he did not believe it to be lawful in terms of subsection (1) or subsection (3) of this section, as the case may require.”

The Contraception, Sterilisation and Abortion Act 1977, No. 112

This part of this act relating to abortion (section 10 - 45) is too long to reproduce. It deals with the setting up of the supervisory committee, its powers, in particular to issue licences to institutions to enable them to perform abortions; its power to appoint certifying consultants and counselling services. The act also deals with the procedure for obtaining an abortion, and the maintaining of records on abortion services.

Appendix B:

The Critical Electorates in the 1978 New Zealand General Election¹

| <i>ELECTORATE</i> | <i>CANDIDATE TO VOTE FOR</i> | <i>PARTY</i> |
|--------------------|------------------------------|--------------|
| West Coast | T.K. Burke | Labour |
| Mt Albert | W.W. Freer | Labour |
| Napier | G. Christie | Labour |
| Papatoetoe | E.E. Isbey | Labour |
| Manurewa | R. Douglas | Labour |
| Hastings | D. Butcher | Labour |
| Western Hutt | J. Terris | Labour |
| Rotorua | P. East | National |
| Kapiti | M. Shields | Labour |
| Whangarei | J. Elliot | National |
| Wairarapa | A. Levett | Labour |
| Hunua | M. Douglas | Labour |
| Invercargill | N. Jones | National |
| Hawkes Bay | M. Cullen | Labour |
| Wellington Central | N. Pickering | Labour |
| Helensville | J. Elder | Labour |
| Yaldhurst | D. Watson | National |
| Taupo | L. Miller | National |
| Palmerston North | J. Lithgow | National |
| Tasman | R. Richardson | National |
| Nelson | P. Malone | National |
| Pencarrow | B. Newall | National |
| Mangere | P. Saunders | National |

Two other marginal seats, Gisborne and Roskill, need to be checked out. In both cases, the sitting candidates are SPUC supporters, but it is not clear where their challengers stand.

How do you judge a candidate's views, if they are or have been an MP

- Check how they voted on the Wall Bill, the Gill Bill and the Contraception, Sterilisation and Abortion Bill.

Find out if they unequivocally support repeal of the present law – this is a basic minimum requirement. If no National or Labour candidate supports repeal, then vote Values (or something else – but not Social Credit which is pro-SPUC).

¹ Table taken from *Broadsheet*, no.64 (Nov 1978), p.18.

Appendix C:

Candidates for the 1978 Election and How They Voted in 1977¹

| National Candidates for 1978 and How They Voted | | | | |
|---|-------------|-------|-------|--------|
| Candidate | 3rd Reading | BIRCH | WALL | ARTHUR |
| Adams-Schneider | | + | + | + |
| Allen | + | Leave | Leave | Leave |
| Austin H.N. | + | + | + | + |
| Austin W.R. : Sick | | | | |
| Bell | | + | + | - |
| **Birch | + | + | + | + |
| Bolger | + | + | + | + |
| **Brill | + | + | + | + |
| Comber | + | + | + | + |
| Cooper | + | + | + | + |
| Couch | + | + | + | + |
| Dewe | - | - | - | - |
| Downie | + | + | + | + |
| Elliott | | - | - | - |
| Elworthy | | + | + | + |
| Falloon | + | + | + | + |
| Fenton | + | + | + | + |
| Friedlander | - | - | - | - |
| Gair | - | - | - | - |
| Gandar | - | Sick | Sick | Sick |
| **Gill | + | + | + | + |
| Harrison | Leave | Leave | + | + |
| Highet | - | - | | |
| Holland | - | - | + | - |
| * Jones, D.M. | + | + | + | + |
| Jones, N.P. | - | - | | |
| * Lambert | + | + | + | + |
| Latter | + | + | + | + |
| Lithgow | - | - | - | - |
| Luxton | + | Chair | Chair | Chair |
| MacIntyre | - | - | - | - |
| McLachlan | + | + | | |
| McLay | - | - | - | - |
| *Malcolm | + | + | | + |
| Minogue | - | - | - | - |
| **Muldoon | + | + | + | + |
| Quigley | - | - | - | - |
| Schultz | | + | + | + |
| Shearer | - | - | - | - |
| Talbot | + | + | + | + |
| Templeton | - | - | | |

¹ Tables taken from *Broadsheet*, no.57 (March 1978) pp.24 – 25.

| | | | | |
|-------------|---|---|---|---|
| **Thompson | + | + | + | + |
| Walker | + | + | + | + |
| Walls | - | - | - | - |
| Waring | - | - | - | - |
| *Wellington | + | + | + | + |
| Wilkinson | + | + | | |
| **Young | + | + | + | + |
| Young, W.L. | + | + | + | + |

N.B. Gordon and La Varis: overseas. Jack: sick.

+ = for

- = against

* Many MPs, old and young, voted the way their more powerful colleagues did, in unthinking loyalty to the party machine. Most of these MPs will never make good representatives of their electors because they find it safer to tailor what little conscience they have to the Boss. The Mafia mentality is very strong.

** What I call the Medievalists. The prime targets for feminists in these electorates. Any MP who voted for all clauses is medieval. Any MP who didn't vote on all clauses, for or against, is suspect. Careful, though, he may have a cast-iron excuse.

| Labour Candidates for 1978 and How They Voted | | | | |
|---|-------------------------|-----------|------------------|--------|
| Candidate | 3 rd Reading | BIRCH | WALL | ARTHUR |
| Arthur | + | + | + | + |
| Bailey | + | + | + | + |
| Christie | - | - | - | - |
| Coleman | + | + | + | + |
| Connelly | + | + | + | + |
| Courtney | + | + | + | + |
| Faulkner | + | Leave | + | Leave |
| Finlay | - | - | Duped into Leave | |
| Fraser | + | + | + | - |
| Freer | - | - | | |
| Isbey | - | - | | |
| Kirk | - | - | | |
| Lange | | + | - | - |
| MacDonald | | + | + | + |
| Marshall | - | - | - | - |
| O'Brien | + | + | + | + |
| Prebble | - | Abstained | - | - |
| Rata | + | + | + | + |
| Reweti | | + | | |
| Rogers | - | - | - | - |
| Tirikatene-Sullivan | - | - | - | - |
| Tizard | - | - | | |
| Wall | + | + | + | + |
| Wetere | + | + | + | + |
| Young | + | Leave | + | + |

N.B. Batchelor, Douglas, Hunt, Rowling: overseas

Barclay, Blanchfield: sick.

+ = for

- = against

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 167. Hamilton Organisation for Women
 168. National Organisation for Women, Christchurch
 197. Organisation for Women, Nelson. Representative: Kinraid, D.
 200. Wellington Feminists
 214. Women's National Abortion Action Campaign (WONAAC)
 238. National Organisation for Women: (Auckland)
 248. “Feminists For Life” Wellington: Elizabeth Mintz, Chairperson
 286. Women's Electoral Lobby, Nelson Branch
 310. New Plymouth Women's Action Group
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